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Case ID: CISYB27MNK

		Short Form	\sim 1	0	7 DMB No. 1545-1150	
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Fort	, yy			I ELA	l <i>(2</i> 009)	
		(except black toop begefft trust or private foundation)	sa defined i	n eerilon		
_		Sponsoring organizations of donor edvised funds and controlling organizations 512(b)(13) must like Form 990. All other organizations with gross recable test than pa messay assets feas than \$1,250,000 at the error if the year may use this for	3600,000	משטו מוש	Open to Public	
	raylor Silvent		ud ladmusu Hiir	ents.	Inspection	
A F	or the	2009 calangar year, or tax year beginning SEPTEMBER 1, 2009, and	ending	Jané:	30 , 20/0	
8.0	Prock If a				dentification number	
H	A 14 MOGS (Name of ta	1) William Clew Dociet 1 DI CHILEON			6065127	
	e sul retu	The state of the s	esius/mo	E Tolophono	361-7188	
=	T -inlagte	Spacific Cdv or town, state or pountry, and 719 + 4				
=	A runded Aceleste	n pending dams. CHARLOTE, NC 28211		F Group Ex Number	•	
		ion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach	G Accou		: Cash Acorusi	
	- 3 0 0	р completed Schedule A (Form 890 of 890-EZ).		(specily) ►		
	-		_		organization is not	
1.4	Vebsit	2: ▶ .			Schadule B (Form 990,	
JŢ	ax-exe	mpt status (check only one) — 1 501(c) (3) 4 (Insert no.) 1 4947(z)(1) or 1 527	990-E	Z, or 990-PF).		
K	neck F	of the organization is not a section 509(a)(3) supporting organization and its gross rec	eipts are n	cormally not n	nore than \$25,000. A	
!	<u>99 سر ع</u>	00-EZ or Form 930 return is not required, but if the organization chooses to file a return, be	-	•		
		55, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead o			\$	
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances	(See the		s tor Part I.)	
	1	Contributions, gifts, grants, and similar amounts received		· · 1		
	2	Program service revenue including government fees and contracts	•	2	"Q 30/.	
	3	Membership dues and assessments		3	9,306	
	4 5a	Investment Income		4	1.281	
	ь	Gross amount from sale of assets other than inventory				
	C	Less: cost or other basis and sales expenses	<u> </u>	5c	-0-	
\$	6	Special events and activities (complete applicable parts of Schedule Clip Hany, amount is from gaming,	oaj. check here l			
Revenue	a	Gross revenue (not including \$ of contributions	origon recor			
ě	_	reported on line 1)			· ·	
_	Ь	Less, direct expenses other than fundraising expenses				
	c	Net income or (loss) from special events and activities (Subtract line 6b from line)	6a)	вс	1	
	7a	Gross sales of inventory, less returns and allowances				
	ь	Less: cost of goods sold				
	C	Gross profit or (loss) from sales of Inventory (Subtract line 7b from line 7a)		7c		
	В	Other revenue (describe FIND RAISERS MEETING, T-DAY		; <u>B</u> _	41, 839	
	9_	Total revenue. Add lines 1, 2, 3, 4, 5ε, 6c, 7c, and 8	<u> </u>	. 🕨 🥹	51,432	
	10	Grants and similar amounts paid (attach schedule)		10		
_	11	Benefits paid to or for-members		11		
Fos	12	Salarles, other compensation, and employee benefits	- • •	12	1	
	13	Professional fees and other payments to independent contractors		13		
Expa	14 15	Occupancy, rent, utilities, and maintenance		15	964	
_	16	Printing, publications, postage, and shipping	PHIND		49.551	
	17	Total expenses, Add lines 10 through 16	· 4 NDR	. > 17	50.411	
_	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	<u> </u>	18	1.016	
컱	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (mi	ust agree			
Ş		end-of-year figure reported on prior year's return)		19		
Net Assets	20	Other changes in net assets or fund balances (attach explanation)		20		
z	21_	Net assets or fund balances at end of year. Combine lines 18 through 20		. ▶ 21		
P	art II	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or mor			ad of Form 990-EZ.	1. 1
-		(See the instructions for Part II.)		troning of year	(B) End of year	! 30 #
22	Ca	sh, savings, and investments	29,	699.50	22 39, 1/3.53	•
23		nd and buildings	<u> </u>		23	
24		her assets (describe >)			24	
25	Ta	tal assets . tal liabilities (describe > CHECKS NOT CLEARED FOR SCHOLARSH)	<u>a</u>		25 8.000	(
28	TO M-	tal liabilities (describe - CHECIG NO) CLEATED FOR SEMONES RY it assets or fund balances (line 27 of column (B) must agree with line 21)	29.0	41.50	27 30, 113 5 3	a
27			Cal. No. 10	4.7	Form 990-EZ (2009)	(, ٔ
ror	LLIABC	y Act and Paperwork Reduction Act Rouss, 888 to Saparate instructions.	yat. NO. 10	G=4.1		•

Form 990-EZ (2009)						Page 2
Part III Statement of Program Service Accom	plishments (See the instr	ections for Part II	l.)		Echau	
What is the organization's primary exempt purpose?					ired for a	
Describe what was achieved in carrying out the org				501(c)(5) and 501(c)(4) organizations and section		
menner, describe the services provided, the number of	f persons benefited, and o	ither relevant into	rmation for			bs; optional
each program title.	for ot	HBUS 1				
28		الله چههست				
				000		
	includes foreign grants, che	eck nere	<u>, P U </u>	28a		
29						
(Grants \$) If this amount	Includes foreign grants, che	ack hose		29a		
30	melaces foreign Himits' On	SAU IIGA · · ·	<u>یا ۲ </u>	200		
3U				1		
40 M CC (2707 P) **** *** *** **** **** **** **** *						
(Grants \$) If this amount	includes foreign grants, che	ock here	▶ □	30a		
31 Other program services (attach schedule)	includes leading grains, en	oen (1984		1		
· · · · · · · · · · · · · · · · · · ·	includes foreign grants, ch	ack here	. ▶ □	31a		
32 Total program service expenses (add lines 28a t				32		
Part IV List of Officers, Directors, Trustees, and Key		en if not compense	ted. (See the		tions fo	or Part IV.)
	(b) Title and sverage	(c) Compensation	(d) Contribute	MB to	(a) E	ecnsox
(a) Name and eddress CPLIL	hours per week devoted to position	(If not pato, enter =0=)	deferred compa			unt and Novembes
STEVE MONTGOMERY 40N						
101 S. TRION ST.	PREGIDENT	o-	~0-	_	#5	needed
CHAPLOTIE						
		•				
EDWIN HERRERA COOK	MARCHAS - DEATH	- 0~	~0-		AS	NEEDED
LIBERTY MUNUAL	VICE PRESIDENT	- 0	- 0		-	
138230 BALLANTINE CORP. PL.			1			
CHARLOTTE NO.					L	
			(
			<u> </u>			
CANDY CO C. ELLOR CPCL	TREASURER	- 0-	l -o-	-	As	NEEDED
MONEARY INC.						
6586 MORLISON BLVD, STEROD					j	
CHAPLONE, NC 28011		<u> </u>				
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	<u> </u>	1.		For	m 990	-EZ (2008)

Form 95	90-EZ (2009)		Р	3
Part	Other Information (Note the statement requirements in the instructions for Part V.)			
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed		Yes	No.
_	description of each activity	33		· •
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6s, and 7s (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	3		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		<u>~</u>
35	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yea," complete applicable parts of Schedule N	35b		/
37 a				
ь 36э	Did the organization file Form 1120-POL for this year? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	37b 38a	5	
b	If "Yes," complete Schedule L. Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:	霻		
a	Initiation fees and capital contributions included on line 9		,	
ช 40ล	to the distance of the paster and the distance of the feet and the second of the secon			
b	The state of the s	40b		~
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax Imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	7	<u> </u>
41	List the states with which a copy of this return is filed.			
	The organization's books are in care of ► Located at ► ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account?	42b	Yes	No
	If "Yes," enter the name of the foreign country: ► See the Instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	If "Yes," enter the name of the foreign country: ▶	42c	L	<u>. </u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		· 	- ⊔
44	Did the organization maintain any donor activised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	Yes	No
. 4 5 	is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ.	45	Ŀ	
	- · · · · · · · · · · · · · · · · · · ·	m 99	22-ب	(200 <i>3</i>)

Form 980)-EZ (2009)						age 4
Part \	Section 501(c)(3) organizations and 501(c)(3) organizations and section 49 and complete the tables for lines 50 ar	section 4947(a)(1) none 47(a)(1) nonexempt char nd 51.	xempt charital	ole trusts only. A st answer question	ll sec ons 46	tion 3-49	b
46	Did the organization engage in direct or indirect	t political campaign activiti					No
	candidates for public office? If "Yes," complete	Schedule C, Part I			46		
47	Did the organization engage in lobbying activitie	s? If "Yes," complete Sche	dule C. Part II .		47		
	is the organization a school as described in section				48		
	Did the organization make any transfers to an ex				49a		
	If "Yes," was the related organization a section !				48b		<u> </u>
5 0	Complete this table for the organization's five his	ighest compensated emplo	yees (other than	officers, directors, t	lruste	es an	d key
	employees) who each received more than \$100.	(b) Title and average	(d Compensation			Exper	
	(a) Name and address of each employee paid more than \$100,000	hours per week davoted to position		(d) Constitutions to employee benefit plans & deterred compensation		allows	und
••••	· · · · · · · · · · · · · · · · · · ·	•	}				
					-		
••				}			
		1		Į	Ι.		
		Į					
<u> </u>	Total number of other employees paid over \$100	<u> </u>	L		L		
	Complete this table for the organization's five \$100,000 of compensation from the organization (a) Name and address of each independent contractor	n. If there is none, enter "N	one."	tors who each reco	eived (c) Can		
				j			
ď	Total number of other independent contractors of	sach receiving over \$100,0	00▶				
	Under penalties of perjury, I declare that I have examinated belief, it is true, correct, and complete. Declaration	ed this return, including eccumpan of preparer jother than officer) is t	ying exhedules and su ased on all information	elements, and to the bas n of which preparer has	t of my Bny kno	knowi wledg	edge a.
Sign Herc	Candere Co. Eller	crea Treas	ever	11-15-10			
	Signature of officer CAUDYCE (. ELLG) Type or print name and title	, CPCU INES R TREASURE	e	Data			
	Preparer's	Date	Check If	Preparer's identifying num	riber (See	habuc	dons)
Paid	signature		Check if self- employed ▶)			-
Prepare Use Onl			E				
V3C U/II	y yours if self-employed), address, and ZiP + 4		Pt	none no. 🕨			
May Lag	e IRS discuss this return with the preparer show	n above? See instructions	<u> </u>		Yes	_	Yo Const

CIS CASE: DO NOT CORRESPOND FOR A SIGNATURE

DO NOT DETACH FROM RETURN

Form 7728	Application To Adopt, Change, or	Retain a Tax Year	OMB No. 1545-0134			
(Rev. Jarussy 2008) Department of the Transury treamed Revenue Service	Department of the Treatment					
	Information at complete Past I egg sign below. See instructions.	 				
Name of ther & a loint	white it lied, etac and appropriate the instructions (see instructions)	, , , , , , , , , , , , , , , , , , , ,				
CPCU 30	CLETY OF CHARLOTTE	Filer's Identifying number	•			
	en or suits no. (I a P.O. box, see instructions)	56-6045127				
E 6525 MORR	130N BLY D. SUITE 800	Sarvice Center where income to a OGDEN. UTA 1				
CHARLOTT	T, N C 28211	Filer's area code and telephone nu	mber/Fax number			
	Merent than the filer (see instructions)	(704)367-7128/(7 Applicant's Identifying number (s				
Name of person to cont	act (I not the applicant or filer, attach a power of attorney)					
	White a substant of their arrays a broken to stantisty.	Contact person's area code and tale	phone number/Fax number			
1 Check the app	propriete box(es) to indicate the type of applicant (see	a instructions)				
☐ Individual	Cooperative (sec. 1381(a))	Passive foreign investment	company (PEC)			
Partnership	Controlled foreign corporation (CEC) (sec. 957)	(sec. 1297)	Company (1110)			
☐ Estate	Foreign sales corporation (FSC) or interest-charge	Other foreign corporation				
Domestic corp		Tax-exempt organization				
S corporation	Specified foreign corporation (SFC) (sec. 898)	Homeowners Association (sec 528)			
Personal service	ce 10/50 corporation (sec. 904(d)(2)(E))	Other				
corporation (P	SC) Trust	(Specify entity and applical	ole Code section)			
	x year, indicate the date the present tax year ends. ► A! nanging a tax year, the first return or short period return wi 5697. .2007 and ending ► JAN	Il be filed for the tax year				
	s present tax year, as stated on line 2b abové, also its cum		Yes No			
if "No," attach a			·			
	licant's present overall method of accounting.	*				
Cash receipt	s and disbursements method	•				
	d (specify) >		A CHARLES			
5 State the nature	of the applicant's business or principal source of income.					
PROFESSIONA	IL INSURANCE ORG! MONEY					
	Signature—All Filers (See Who Must Sign in					
inder pensities of perjury, and pelief, it is true, correc	l declare that I have exemined this application, including accompanying t, and complete. Declaration of preparer (other than Glar) is based on all	age in the second secon				
		Preparer lother than				
11.1.	A4 × 804 .		198			
yara	10 6. 6le 2/21/2011					
s	Ignature and date Signa	ture of individual preparing the hiphid				
	Greature and date Signature and date Signatu	±				
CANDYCE C.E	LLER TREASURGE					
.=	me and title (print or type)	Name of individual preparing the app	Section			
	/		17.00			
	/					
	/					
W the englowing is filed on	Instance in the second of a comboted foreign/corporation or a					
	rolling domeath: shareholder, see instructions.	Name of firm preparing the applic				
For Privacy Act and Pa	perwork Reduction Act Notice, see separate instructions.	Cat. No. 21115C Fo	m 1128 (Nov. 1-2008)			
	• • • • • • • • • • • • • • • • • • • •					

DO NOT DETACH FROM RETURN

	11/25 (risv. 1-2008)	Page
	Automatic Approval Request (see Instructions)	
	dentify the revenue procedure under which this automatic approval request is filed >	
	ction A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2008-45, successor)	or its
1	is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year and is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-45 (or its successor)? (see instructions)	Yes No
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553.	
3 Sec	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see Instructions) > tion B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc.	V
_	2006-46, of its successor)	
•	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year and is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions) .	V
ì	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶	
	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev. Proc. 2008-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted).	
	le the S corporation requesting an ownership tax year? (see instructions). Let the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev. Proc. 2006-45	
30	(or its successor) or section 5.04(8) of Rev. Proc. 2002-39 (or its successor)? (see instructions)	
_		
) (tion D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see Instructions)	
ō	is the applicant a tax-exempt organization requesting a change?	
	Rufing Request (All applicants requesting a ruling must complete Section A and any other sapplies to the entity. See instructions.) (Rev. Proc. 2002-39, or its successor)	
	is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by	Yes No
	the IRS, before an appeals office, or a Federal court?	1,/
	If "Yes," see the instructions for information that must be included on an attached explanation.	
	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year?	
	If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented	
	Within the most recent 48-month period, has any accounting period application been withdrawn, not perioded, denied, or not implemented? If "Yes," attach an explanation.	- (a) -
,	is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-99 (or its successor)?	
	If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions).	
3	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box.	
	☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)	10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (
	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. If necessary, estimate the amount for the short period.	
	Short period \$ 30,714 First preceding year \$ 21,128 Second preceding year \$ 31,149 Third preceding year \$ 24,128 Note: Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section	
	501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions.	

	1 1128 (Rev. 1-2008)	Page 3
	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period:	Yes No
÷ 0	Generated Expiring	
	Net operating lose	
	Capital loss	
	Unused credits ,	
7	Errier the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6.01(7) of Rev. Proc. 2002-39, or its successor)	
8 a	Is the applicant a U.S. shareholder in a CFC?	
	If "Yes." attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.	
D	Will each CFC concurrently change its tax year? If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S.	
	8hareholder.	
9a	is the applicant a U.S. shareholder in a PFIC as defined in section 1297?	
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the	
	percentage of Interest owned by the applicant, and the amount of distributions or ordinary earnings and net	
b	capital gain from the PFIC included in the income of the applicant. Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund?	
lua	Is the applicant a member of a partnership, a baneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC?	
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust,	
	estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of	
	interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year	
	and for the short period. Indicate the percentage of gross income of the applicant represented by each amount.	
	Will any partnership concurrently change its tax year to conform with the tax year requested? If "Yee" to line 10b, has any Form 1128 been filed for such partnership?	
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical	
	advice request pending with the IRS National Office?. If "Yee," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved	
	in each request.	
12	Is Form 2848, Power of Attorney and Declaration of Representative, attached to this application?	
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application?	
14	Enter amount of user fee attached to this application (see Instructions)	
Sec	tion B—Corporations (other than S corporations and controlled foreign corporations) (see instructions)	
15	Enter the date of incorporation, ▶ 1990	
16a	Does the corporation Intend to elect to be an S corporation for the tax year immediately following the short period?	Yes No
b	If "Yes," will the corporation be going to a permitted S corporation tax year?	
17	Is the corporation a member of an affiliated group filing a consolidated return?	
	If "Yes," attach a statement providing (a) the name, address, identifying number used on the consolidated return,	
	tax year, and Service Center where the applicant files the return, (b) the name, address, and identifying number	
	of each member of the affiliated group; (c) the taxable income (loss) of each member for the 3 years immediately	
	before the short period and for the short period; and (d) the name of the parent corporation.	
188	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.	
b	If the PSC is using a tax year other than the required tax year, Indicate how it obtained its tax year.	No.
	Grandfathered (attach copy of letter ruling) Grandfathered (attach copy of letter ruling) Grandfathered (attach copy) Grandfathered (attach copy) (attach copy))	

Form 1128 (Rev. 1-2008)

Form 1128 (Rev. 1-2008)								
860	tion C—S Carporations (see Instructions)							
19	Enter the date of the S corporation election.	Y06	No					
20	Is any shareholder applying for a corresponding change in tax year?							
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year. Grandfathered (attach copy of letter ruling) Section 444 election (date of election) Letter ruling (date of letter ruling(attach copy))							
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.							
Sec	don D—Partnerships (see Instructions)							
23	Enter the date the partnership's business began.	Yes	No					
24	Is any partner applying for a corresponding change in tax year?							
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profite.							
28	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)?		1					
	If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period.							
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year.							
	☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election) ☐ Letter ruling (date of letter ruling (attach copy))							
Sec	tion E—Controlled Foreign Corporations (CFC)							
28	Attach a statement for each U.S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.							
Sec	tion F—Tax-Exempt Organizations							
29	Type of organization: □ Corporation □ Trust □ Other (specify) ▶	Yes	No					
30	Date of organization. ▶							
31_	Code section under which the organization is exempt.	365	زكتم					
32	is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶							
3 3	Enter the date the tax exemption was granted. Attach a copy of the letter ruling granting exemption. If a copy of the letter ruling is not available, attach an explanation.							
34	If the organization is a private foundation, is the foundation terminating its status under section 507?		L					
Sec	tion G—Estates							
35_	Enter the date the estate was created.		<u> </u>					
	Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each is an interested party of any portion of the estate.							
b	Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement s distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately short period and for the short period.	befor	g the					
Sec	Section H-Passive Foreign Investment Companies							
37	If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name identifying number, and percentage of interest owned.							
	Form 1128	(Rev. 1	1-20C6)					