



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



SYMPOSIA ON ENVIR BIOGEOCHEMISTRY
% THE COMPANY CORP
1313 N MARKET ST
WASHINGTON DC 20001

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

William C. Ghione
Signature of Officer or Trustee

10/21/2011
Date

Treasurer

Title

Change of Address

▶ Please type or print.

OMB No 1545-1163

▶ See instructions on back.

▶ Do not attach this form to your return

Part I Complete This Part To Change Your Home Mailing Address

Check **all** boxes this change affects

1 ☐ Individual income tax returns (Forms 1040, 1040A, 1040EZ, 1040NR, etc.)

▶ If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return, check here ☐

2 ☐ Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)

▶ For Forms 706 and 706-NA, enter the decedent's name and social security number below

▶ Decedent's name

▶ Social security number

3a Your name (first name, initial, and last name)

3b Your social security number

4a Spouse's name (first name, initial, and last name)

4b Spouse's social security number

5 Prior name(s) See instructions

6a Old address (no., street, city or town, state, and ZIP code) If a P.O. box or foreign address, see instructions

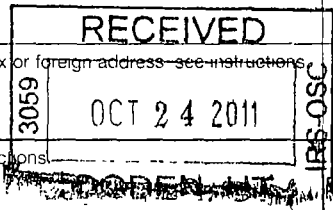
Apt. no.

6b Spouse's old address, if different from line 6a (no., street, city or town, state, and ZIP code) If a P.O. box or foreign address, see instructions

Apt. no.

7 New address (no., street, city or town, state, and ZIP code) If a P.O. box or foreign address, see instructions

Apt. no.



Part II Complete This Part To Change Your Business Mailing Address or Business Location

Check **all** boxes this change affects

8 ☒ Employment, excise, income, and other business returns (Forms 720, 940, 940-EZ, 941, 990, 1041, 1065, 1120, etc.)

9 ☐ Employee plan returns (Forms 5500, 5500-EZ, etc.)

10 ☐ Business location

11a Business name

11b Employer identification number

Symposia on Environmental Biogeochemistry 51 0223079

12 Old mailing address (no., street, city or town, state, and ZIP code) If a P.O. box or foreign address, see instructions

Room or suite no.

% The Company Store Corp. 1813 N. Market St. Washington, D.C.

13 New mailing address (no., street, city or town, state, and ZIP code) If a P.O. box or foreign address, see instructions

Room or suite no.

% W.C. GHORSE, 102 Wing Hall, Cornell University, Ithaca, NY 14850

14 New business location (no., street, city or town, state, and ZIP code) If a foreign address, see instructions

Room or suite no.

102 WING HALL, CORNELL UNIVERSITY, ITHACA, NY 14850

Part III Signature

Daytime telephone number of person to contact (optional) ▶

(607) 255-3086

Sign Here

Your signature

Date

If joint return, spouse's signature

Date

William C. Ghorse

If Part II completed, signature of owner, officer, or representative Date

10/21/2011

Treasurer

Title