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Form **990-EZ**

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions.

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsonng organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000
at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

20112

Open to Public Inspection

Form 990-EZ (2011)

Α	For the	2011 calend	lar year, or tax year beginning $01/01/12$, and ending $06/30/2$	12				
В	Check if a	applicable	C Name of organization		Dı	Employer	identification number	
	Address	change	South Dakota Association for Career					
	Name cha	ange	and Technical Education		46-0427245			
Ц	Initial retu	ım	Number and street (or P O box, if mail is not delivered to street address)	Room/suite	E ·	E Telephone number		
	Terminate	bed	230 11th Street NE	<u></u>		605-882-5284		
Ц	Amended	l retum	City or town, state or country, and ZIP + 4		F	Group Ex	emption	
	Applicatio	n pending	Watertown SD 57201			Number	<u>_</u>	
G		nting Method	Cash X Accrual Other (specify) ▶	_ H Check ▶		_	ganization is not	
1			w.lakeareatech.edu/sdacte	_ required	to att	ach Sche	dule B	
J	Tax-exe					0-EZ, or		
K	Check	_	organization is not a section 509(a)(3) supporting organization or a section 527 or					
			00 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-posto	ard) may be requir	ed (s	ee instru	ctions) But if	
	•		oses to file a return, be sure to file a complete return					
L			b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total as	sets (Part II,			16 005	
			ow) are \$500,000 or more, file Form 990 instead of Form 990-EZ			<u>▶ \$</u>	16,205	
e tal	art i		ue, Expenses, and Changes in Net Assets or Fund Balances		ions	for Part	I.)	
<u> </u>			if the organization used Schedule O to respond to any question in this Pa	ırt I		. 1		
	1		gifts, grants, and similar amounts received		F	1 -	15 600	
氢	2	•	vice revenue including government fees and contracts	h	⊢	2	15,690 515	
	3	•	dues and assessments See Sta	cement	F	3	212	
	4	Investment i	1 _ 1		-	4		
AON	5a		nt from sale of assets other than inventory		\dashv			
	b		r other basis and sales expenses (formula of coach other than investor (Cubicad has 5b from has 5c)	-	\dashv	_		
=	٦	, ,	from sale of assets other than inventory (Subtract line 5b from line 5a) fundraising events		F	5c		
ு	6	•						
2	a		ne from gaming (attach Schedule G if greater than					
Revende		\$15,000)		tions.	\dashv			
œ	b			idons	- 1			
			sing events reported on line 1) (attach Schedule G if the gross income and contributions exceeds \$15,000)					
	1 .		gross income and contributions exceeds \$15,000) expenses from gaming and fundraising events 6c		\dashv			
	d d		or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract		\dashv			
	1 "	line 6c)	or (1055) from gaming and fundraising events (and fines of and obtain subtract		- 1	6d		
	7a	•	of inventory, less returns and allowances 7a			-		
	Ь	Less cost o	1 - 1		\dashv			
	c		or (loss) from sales of inventory (Subtract line 7b from line 7a)		\neg	7c		
	8	•	ue (describe in Schedule O)		ļ	8		
	9		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶│	9	16,205	
	10		similar amounts paid (list in Schedule O)			10		
	11			201		11	860	
Ø	12	Salanes, oth	er compensation, and employee benefits	<u> </u>		12	7,500	
Expenses	13	Professional	fees and other payments to independent contractors			13	792	
ē	. 14	Occupancy,	rent, utilities, and maintenance	E		14		
ũ	15	Printing, put	plications, postage, and shipping	/		15		
	16	Other expen	ses (describe in Schedule O)			16	15,128	
_	17	Total exper	ises. Add lines 10 through 16			17	24,280	
·/^	18	Excess or (c	leficit) for the year (Subtract line 17 from line 9)			18	-8,075	
Net Assets	19	Net assets of	or fund balances at beginning of year (from line 27, column (A)) (must agree with					
Ass		end-of-year	figure reported on pnor year's return)		L	19	128,273	
žet Tet	20	Other chang	es in net assets or fund balances (explain in Schedule O)			20	956	
	21	Net assets	r fund balances at end of year Combine lines 18 through 20		▶⊥	21	121,154	

	akota Association for	or Career	46-0427245			Page 2
	(see the instructions for Part II.)					Ć
· Check if the organiz	ation used Schedule O to respond t	o any question in th				
			(A) Beginning of year	-		End of year
22 Cash, savings, and investments			128,2			121,154
23 Land and buildings					:3	
24 Other assets (describe in Schedule	O)		100.6		4	101 154
25 Total assets			128,2		5	121,154
26 Total liabilities (describe in Sched	•		100 0	0 2		101 154
	27 of column (B) must agree with line 2		128,2	2/3 2	7	121,154
	gram Service Accomplishmen	•	•	X		penses
	ation used Schedule O to respond to	o any question in th	s Part III		(Required t	
What is the organization's primary exem	ipt purpose?					and 501(c)(4)
See Schedule O	ausa accomplishments for each of its the	an largest program and		 [ons and section
	rvice accomplishments for each of its thro nd concise manner, describe the services			l		trusts, optional
persons benefited, and other relevant in		s provided, the hamber	OI .		for others)	,
	 					
•	echnical education to the orga		rs,			
primarily through attend	lance at seminars and conferen	ices.		l l		
(Grants \$). If this amount includes foreign grant	to shock boro		28	, ,	15,396
) If this amount includes foreign grant			1 20	,a	13,330
enrollment in various di	the National organization an	id racificate the				
enrollment in various di	.Visions.			1	ļ	
(Grants \$) If this amount includes foreign grant	ts check here		₂₉	ا دا	860
30	y it this amount includes loreign grant	is, check here				
					J	
(Grants \$) If this amount includes foreign grant	ts check here		130)a	
31 Other program services (describe ii		ta, Greek Here		1 1 00	<u>"</u>	
(Grants \$) If this amount includes foreign grant	ts check here	•	☐ 31	la l	
32 Total program service expenses		is, check fiere		▶ 3		16,256
Part IV List of Officers, Direct	tors, Trustees, and Key Employees, L	ist each one even if no	ot compensated (see			
Check if the organization	on used Schedule O to respond to any qu	uestion in this Part IV	(a) Danadable			
(a) Na	ame and address	(b) Title and avera hours per week	compensation	contribution	ath benefits, ns to employee	(e) Estimated amount of
(-,		devoted to position	n (Forms W-2/1099-MISC) (If not paid, enter -0-)		plans, and compensation	other compensation
Dodie Bemis	Watertown	Executive	Director			
230_11th Street NE	SD 57201	20	00 7,500		0	o
Jon Severson	Watertown	Past Presi	dent			
230 11th Street NE	SD_57201	1.	00	<u>}</u>	0	0
Annıka Russell	Watertown	President				
230 11th Street NE	SD 57201	1.	00 0		0	0
Terry Rieckman	Watertown	President	Elect			
230 11th Street NE	SD_57201	1.	00	<u></u>	0	0
Jim Kayl	Watertown	Pres., Adm	un Div.			
230 11th Street NE	SD 57201	1.	00 0	<u> </u>	0	0
Lori Christensen	Watertown	Pres., Ag.	Div.	1		
230 11th Street NE	SD 57201	1.	00 0	<u> </u>	0	0
Lenessa Keehn	Watertown	Pres., Bus	/Marketing			
230 11th Street NE	SD 57201	1.	00	<u> </u>	0	0
Mary Jo Parker	Watertown	Pres., FAC	s piv.			
230 11th Street NE	SD 57201	1	00 0	<u> </u>	0	0
Trent Theye	Watertown	Pres., T&l	/Tech Div.	}		
230 11th Street NE	SD_57201	1.	00 0	1	0	0
Brad Bles	Watertown	OCCTE Liaz	son			
230 11th Street NE	SD 57201	1.	00 0	 	0	0
			[
						
				1		
				<u> </u>		
DAA						om 990-F7 (2011)

Form	990-EZ	(2011)	<u>S</u> out	<u>th</u> I	<u>Dakota</u>	Assoc	ciation	for	Career	4	<u>6-0427245</u>			F	age 4
														Yes	No
46	Did the	organiza	ition engag	ge, dıre	ectly or indire	ectly, ın poli	tıcal campaıgı	n activities	on behalf of o	r ın oj	pposition				
		lidates fo	r public offi	ice? If	"Yes," com	plete Sched	lule C, Part I						46		<u> </u>
Pa	rt VI	501(c)(3) orga	inizat	ions and se	ection 494	nd section 7(a)(1) none s 50 and 51	exempt c)(1) nonexe haritable trus	empi sts m	t charitable tri ust answer ques	u sts only. All sec tions 47-49b	ction		
									y question in	this f	Part VI		_		
47	Did the	organiza	ition engag	ae in lo	bbving activ	/ities or hav	e a section 50)1(h) elect	ion in effect du	ırına ti	he tax			Yes	No
		•		•	le C, Part II			. (,					47		х
48	Is the c	organizati	on a schoo	ol as d	escribed in a	section 170	(b)(1)(A)(ıı)? lı	f "Yes," co	mplete Schedi	ule E			48		X
49a	Did the	organiza	ition make	any tr	ansfers to a	n exempt n	on-charitable	related ore	ganization?				49a		X
b	If "Yes,	" was the	related or	rganıza	ation a section	on 527 orga	ınızatıon?						49b	<u> </u>	
50				-							directors, trustees				
	employ	rees) who	each rece	eived i	more than \$	100,000 of	compensation	from the	organization If	there	s is none, enter "No	one "			
	·	•	(a) Nar		address of each ore than \$100,0				(b) Title and ave hours per we devoted to pos	ek	(c) Reportable compensation (Forms W-2/1099-MISC	(d) Health benefits, contributions to employee benefit plans, and deferred compensation		timated a er compe	mount of
Non	е												}		
					-	•			1		-				
						-			- 						
									ļ		_				
f 51	Compl	ete this ta	ble for the	orgar	s paid over s	e highest co	ompensated in e is none, ent	depender	nt contractors v	vho e	ach received more	than			
			•		endent contrac			ei ivone		(b) T	ype of service	(c) Co	mpensa	ition	
No	one														
			·				 								
	_								-	_	····				
					_										
										•	***				
d	Total r	number of	f other inde	epende	ent contracto	ors each red	ceiving over \$	100,000	 _						
52		•	•		chedule A?			3) organiza	ations and 494	7(a)(1	1)	► X	Yes		No
Unde	er penaltie	es of penu	rv. I declare	that I	have examine	ed this return	, including acc	ompanying all informa	schedules and	staten eparer	nents, and to the bes	t of my knowledge and			
			Dod	" ب	Bem	ن					10/2	4/12	_		
Sig	n		ature of office		mia				E.	,	utive Dir	ector			
Her	е	—	Dodie or print name	_					152	<u>.ec</u>	ucive Dii	ector			
			preparer's nam				Preparer a	gnatura	10 1	_	Date	Check	PTIN		
Paid	d	Ma obaci	I W - €~	de~			Mul	\mathcal{N}	the	CF	PA. CVA 10/	25/12 self-employed	ľ	89353	37
_	parer	Firm's nam	L W. Sny∙ e ▶		lhauer	Raml	& Snyd	er P	.c. Y		10/			140	
	Only	Firm's add		Ρ.	O. Box	1267									
				_	tertow		<u>57201</u>		7			Phone no 605-			7
May	the IRS	discuss	this return	with th	ne preparer	shown abov	ve? See instru	ctions				<u> </u>	XY		No
												ſ	om 9	90-E2	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

2011/2

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

South Dakota Association for Career and Technical Education

Employer identification number 46-0427245

Pŧ	urt i	Reaso	on for Public Charity S	Status (All organizations n	nust cor	nplete t	his par	t.) See	<u>ınstrı</u>	uctions	<u>s</u>		
he	orgar			t is (For lines 1 through 11, ched									
1	Ň			ciation of churches described in s			A)(i).						
2	П	A school desc	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	П		,	organization described in section	on 170(b)	(1)(A)(iii).	•						
4	Ħ			n conjunction with a hospital des				(A)(iii).	Enter th	e hospr	tal's name,		
•	لــا	city, and state	=				`			•			
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
•	ш	section 170(b)(1)(A)(iv). (Complete Part II)											
_		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
6 7	H	An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
′	لــا	-			a governi	nentar an	01 11011	i ilic gei	iciui pu	00			
			ection 170(b)(1)(A)(vi). (Co		`								
8	X	•		0(b)(1)(A)(vi). (Complete Part II more than 33 1/3% of its support		tributione	membe	arehin fe	es and	aross			
9				t functions—subject to certain ex									
				unrelated business taxable inco						113			
							1 (0)	om basii	103303				
40				1975 See section 509(a)(2). (Continue to test for public safety			a)(A)						
10	\vdash			clusively to test for public safety clusively for the benefit of, to per				carp, ou	the				
11	Ш			d organizations described in sect						tion			
				e type of supporting organization									
							d (· e III–Otl	her			
_	\Box	a Type		c Type III–Functiona nization is not controlled directly of the contr									
е	Ш			than one or more publicly support									
				than one of more publicly suppor	itea oigai	iizalionis c		2 111 0000		(-)(-)			
		or section 509		mination from the IRS that it is a	Type I Ty	ne II or T	vne III s	unnortin	a				
f		-	check this box	illiation from the into that it is a	1 900 1, 1 9	pc 11, 01 1	ypc iii o	арроппп	9				П
		•		on accepted any gift or contribution	on from ar	ov of the							ш
g				on accepted any gift of continuent)	., 01 1.10							
		following pers		itrols, either alone or together wit	h narenne	describe	d in (ii) a	nd				Yes	No
			v, the governing body of the s		ii persono	describe	G 117 (11) C				11g(i)		
			member of a person describe								11g(ii	1	
			ontrolled entity of a person de								11g(ii		
_			ollowing information about the								(**8(**	'Л	
<u>h</u>	III Nom		(ii) EIN	(iii) Type of organization	(iv) Is the c	rnanization	(v) Did y	ou notify	(vi)	ls the	(vii) Am	nount of	
'		e of supported ganization	(11) 2114	(described on lines 1–9	1	sted in your	the organ	nization in	organizat	uon ın col		port	
		_		above or IRC section	governing	document?		of your oort?		zed in the S			
				(see instructions))	Yes	No	Yes	No	Yes	No			
(A)													
(~)								1					
(B)		 										_	
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(C)													
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ion A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						<u></u> -
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3				<u></u>		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	ion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						11to a
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10		<u> </u>				
12	Gross receipts from related activities, etc. (see instructions)				12	
13	First five years. If the Form 990 is for the o	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c)	(3)	
	organization, check this box and stop here						•
Sec	tion C. Computation of Public Su	 					
14	Public support percentage for 2011 (line 6,	column (f) dıvıded	by line 11, column	(f))		14	<u>%</u>
15	Public support percentage from 2010 Schei					15	%
16a	33 1/3% support test—2011. If the organic				1/3% or more, che	ck this	
	box and stop here. The organization qualif	, .					> [
b	33 1/3% support test—2010. If the organization has been the property and step here. The organization				is 33 1/3% or more	€,	▶ □
470	check this box and stop here. The organization of the control of t				or 16h and line 1	A ie	
17a	10% or more, and if the organization meets						
	Part IV how the organization meets the "fac						
	organization	is-and-circumstan	ces test the orga	iriization quaines a	o a pablicly suppor	.00	▶ [
	-	0 If the organizati	on did not check a	hox on line 13, 16a	16b or 17a, and	line	ـــا
h	-1()%_tacte_and_circilmetances test/!!						
b	10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization is	neets the "facts-ar	id-circumstances".	test, check this hox	and Stop nere.		
b	15 is 10% or more, and if the organization r					cly	
b	15 is 10% or more, and if the organization recognization in Part IV how the organization med					cly	▶ [
b 18	15 is 10% or more, and if the organization r	ets the "facts-and-o	arcumstances" tes	t The organization	qualifies as a publi	cly	>

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

Sec	tion A. Public Support	Zap	Zaon	ZOLO	ZOLL	2012	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 20 09	(d) 2910°	(e) 201 1	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	9,620	37,451	50,001	52,983		150,055
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		67,801	52,787	50,005	16,205	186,798
3	Gross receipts from activities that are not an unrelated trade or business under section 513			2,840	_		2,840
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	9,620	105,252	105,628	102,988	16,205	339,693
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						339,693
_	tion B. Total Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	9,620	105,252	105,628	102,988	16,205	339,693
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13	3,074	4,074			7,161
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		3,074	4,074			7,101
С	Add lines 10a and 10b	13	3,074	4,074	·		7,161
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,	1 T					
	and 12)	9,633	108,326	109,702	102,988	16,205	346,854
14	First five years. If the Form 990 is for the	•	econd, third, fourth,	, or fifth tax year as	a section 501(c)(3)		
<u></u>	organization, check this box and stop here				.		
	tion C. Computation of Public Su					15	07.04%
15 16	Public support percentage for 2011 (line 8, Public support percentage from 2010 Schero	,,		"		16	97.94% 96.26%
_	tion D. Computation of Investment					1 10 1	96.26 //
17	Investment income percentage for 2011 (Irr			tumn (f))		17	2 %
18	Investment income percentage from 2010 S			(1))		18	4 %
19a	33 1/3% support tests—2011. If the organ			, and line 15 is mor	e than 33 1/3%, an		
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests—2010. If the organ	x and stop here. The	e organization qual	ifies as a publicly si	upported organizati	on	► X
-	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did					· · · · · · · · · · · · · · · · · · ·	•

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information. (See instructions).

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide Information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011/Z Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

South Dakota Association for Career and Technical Education

Employer Identification number 46-0427245

Form 990-EZ, Part I, Line 16 - Other Expenses

Description		Amount
Expenses		
Communications	\$	887
Supplies	\$	420
National Policy Seminar	\$	6,999
Region V Meeting	\$	2,275
ACTE Conference	\$	1,993
Vision Registration	\$	1,780
Newsletter	\$	250
Board Meetings	\$	524
	Total \$	15,128

Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description

Amount

Unrealized gain on investments

\$ 956

Form 990-EZ, Part III - Primary Exempt Purpose

To provide leadership and assistance to educators in developing a prepared and competitive workforce.

Form 1:128

(Rev January 2008)
Department of the Treasury
Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

► See separate instructions.

OMB No 1545-0134

Attachment Sequence No 148

ľ	Part I General Information	
_	Important: All filers must complete Part I and sign below See instructions	
	Name of filer (if a joint return is filed, also enter spouse's name) (see instructions)	Filer's identifying number
	South Dakota Association for Career and Technical Education	46-0427245
	Number, street, and room or suite no (if a P O box, see instructions)	Service Center where income tax return will be filed
Ħ	230 11th St NE	Ogden UT
or Print	City or town, state, and ZIP code	Filer's area code and telephone number/Fax number
9	Watertown SD 57201	(605) 882-5284 /()
ž	Name of applicant, if different than the filer (see instructions)	Applicant's identifying number (see instructions)
	Name of person to contact (if not the applicant or filer, attach a power of attorney)	Contact person's area code and telephone number/Fax number
		() /()
_	Check the appropriate box(es) to indicate the type of applicant (s	ee instructions).
	☐ Individual ☐ Cooperative (sec. 1381(a))	Passive foreign investment company (PFIC)
	Partnership Controlled foreign corporation (CFC) (sec 957)	(sec. 1297)
	☐ Estate ☐ Foreign sales corporation (FSC) or Interest-charge	Other foreign corporation
	Domestic corporation domestic international sales corporation (IC-DISC)	✓ Tax-exempt organization
	☐ S corporation ☐ Specified foreign corporation (SFC) (sec. 898)	☐ Homeowners Association (sec. 528)
	Personal service 10/50 corporation (sec 904(d)(2)(E))	Other
	corporation (PSC) Trust	(Specify entity and applicable Code section)
2	2a Approval is requested to (check one) (see instructions):	
	☐ Adopt a tax year ending ► (Partnerships and	PSCs: Go to Part III after completing Part I.)
		ear ending ►
	E change to a tax your change	•
	b If changing a tax year, indicate the date the present tax year ends. ▶	12/31
	c If adopting or changing a tax year, the first return or short period return	
	beginning ► 01/01 , 20 12 , and ending ►	06/30 , 20 12
-(Is the applicant's present tax year, as stated on line 2b above, also its cu	rrent financial reporting year? ► 🗹 Yes 🗆 No
	, , , , , , , , , , , , , , , , , , , ,	
	If "No," attach an explanation.	
4	Indicate the applicant's present overall method of accounting.	
	☐ Cash receipts and disbursements method ☐ Accrual method	
	☐ Other method (specify) ▶	
_		
,	State the nature of the applicant's business or principal source of incom-	e.
_		
_	Signature—All Filers (See Who Must Sign	
an	nder penalties of perjury, I declare that I have examined this application, including accompanyi Id belief, it is true, correct, and complete. Declaration of preparer (other than filer) is based on	ng schedules and statements, and to the best of my knowledge all information of which preparer has any knowledge.
	Filer*	Preparer (other than filer)
	$\mathcal{N} \cap \mathcal{R} = \mathcal{N} \cap \mathcal{M}$	V VIN . PA CIM
-	NTAIL DEMIN /26/12	gnature of individual preparing the application and date
	Signature and date	griature of individual preparing the application and date
	Oodie Bemis, Executive Director Michael S	envder
	Name and title (print or type)	Name of individual preparing the application
	Vilhauer B	Raml & Snyder P.C.
	the application is filed on behalf of a controlled foreign corporation or a VIIII due: P	Name of firm preparing the application

	Automatic Approval Request (see instructions)	
_	dentify the revenue procedure under which this automatic approval request is filed ▶	
Sec	ction A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, successor)	
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	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. 2006-46, or its successor)	
4	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) .	✓
5	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?	√
6	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. 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted)	√
7	Is the S corporation requesting an ownership tax year? (see instructions)	✓
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev. Proc. 2006-45 (or its successor) or section 5.04(8) of Rev. Proc. 2002-39 (or its successor)? (see instructions)	√
Sec	etion C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions)	
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year?	√
	etion D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions)	
_	Is the applicant a tax-exempt organization requesting a change?	
Pai	Ruling 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)	ection that
500	applies to the entry. See instructions.) (Nev. Proc. 2002-39, or its successor)	Vec No
		Yes No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court?	
2	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.	Part of the second
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented?	
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-39 (or its successor)?	
b	If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions). If your business purpose is based on one of the natural business year tests under section 5.03, check the	
	applicable box.	* * 5 q* =
	☐ 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)	
5	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.	G.
	Short period \$ First preceding year \$	
	Second preceding year \$	
	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.	

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6.	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated Expiring	Yes No
	Net operating loss \$ \$	
	Capital loss \$ \$	
7	Unused credits \$ \$ \$ Enter 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)	
ва	Is the applicant a U.S. shareholder in a CFC?	
b	Will each CFC concurrently change its tax year?	
	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297?	
10a	Is the applicant a member of a partnership, a beneficiary 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?	
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 "Yes," 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)	
Sect	tion B—Corporations (other than S corporations and controlled foreign corporations) (see instructions)	
<u>15</u>	Enter the date of incorporation. ▶	
	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? ▶ If "No" to line 16b, attach an explanation.	
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.	i in the second
18a	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.	Total St
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. Grandfathered (attach copy of letter ruling) Letter ruling (date of letter ruling (attach copy))	

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Form	1128	(Rev	1-2008)
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Sect	tion C—S Corporations (see instructions)				
19·	Enter the date of the S corporation election. ▶	Yes	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) 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	tion 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?	<u> </u>			
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 profits.				
26	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)?				
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) Letter ruling (date of letter ruling (attach copy))	t mai	2 - 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
Sec	tion E—Controlled Foreign Corporations (CFC)	Liter	طدت ش		
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			
30	Date of organization. ▶		er e		
31	Code section under which the organization is exempt. ►	1 1 1 7			
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶	 	50 L. Tal		
33	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.	14. m			
34	If the organization is a private foundation, is the foundation terminating its status under section 507?		المستحدة		
	tion G—Estates	·	L		
35	Enter the date the estate was created. ▶				
36a	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.	oersor	n who		
b	Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing th distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period.				
Sec	tion 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, address, identifying number, and percentage of interest owned.				