Form 1023-EZ

(June 2014)

Department of the Tressury Internal Revenue Service

Streamlined Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

➤ Do not enter social security numbers on this form as it may be made public.

➤ Information about Form 1023-EZ and its separate instructions is at www.irs.gov/form1023.

OMB No. 1545-0056

Note: If exempt statue to approved, this application will be open for public free store.

Part I Identification of Ap	plicant					
1a Full Name of Organization					00	
b Address (number, street, and room	n/suite). If a P.O. box, see instru	ctions.	e City		d State 2 Zip Code + 4	
2 Employer Identification Number	3 Month Tax Year Ends (MM)	4 Pers	on to Contact if Mor	s Information	is Newcled	
5 Contact Telephone Number		6 Fax	Number (optional)		7 User Fee Submitted	
8 List the names, titles, and mailing a	addresses of your officers, direct	tors, and	Vor trustees. (If you I	nave made to	ar five, see Instructions.)	
First Name:	Last Name:			Title		
Street Address:	City:	City:			Zip Code + 4:	
First Name:	Last Name:			Title:		
Street Address:	City:		.0	State:	Zip Code + 4:	
First Name:	Last Name:			Title:		
Street Address:	City:	X	9	State:	Zip Code + 4:	
First Name:	Last Name:	State:		Title:		
Street Address:	City:	9		State:	Zip Code + 4:	
First Name:	Last Name:	Last Name:		Title:		
Street Address:	City:			State:	Zip Code + 4:	
9 a Organization's Website (if availab	ole):	VP 5 4		W-9-4		
b Organization's Email (optional):		ate (A) IV		r will improve	Allerta in Co. 1772 in the	
Part II Organizational Stru	icture					
	poration, an unincorporated as in porporated association you have the organizing docum		☐ Trust			
(See the instructions for an example of a Date incorporated if a corporation	planation of necessary organiz , or formed if other than a corpo	ing doci ration (M	uments.)			
4 State of incorporation or erier for 5 Section 501(c)(3) requires that you	r organizing document must lim	it your p	urposes to one or m	ore exempt p	ourposes within section 501(c)(3).	
your activities, in activities that in	r organizing document must not themselves are not in furtheranc	e of one	sly empower you to o or more exempt put	poses.	rwise than as an insubstantial part o	
Chack his box to attest that part onyour activities, in activ	your organizing document does ities that in themselves are not in	not exp	ressly empower you ance of one or more	to engage, o	therwise than as an insubstantial oses.	
7 Section 501(c)(3) requires that you section 501(c)(3) exempt purposes operation of state law.	r organizing document must pro s. Depending on your entity type	ovide that and the	t upon dissolution, y state in which you a	our remaining are formed, th	g assets be used exclusively for its requirement may be satisfied by	
Check this box to attest that not need an express dissoluti you are formed for your disso	on provision in your organizing of	ains the documer	dissolution provision at because you rely o	n required und on the operati	der section 501(c)(3) or that you do on of state law in the state in which	

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ď	rt III Your Specific Activ	iues					
1	Enter the appropriate 3-character	NTEE Code that best describes your activitie	s (See the instructions):				
2	To qualify for exemption as a sect following purposes. By checking t indipated. Check all that apply.	ion 501(c)(3) organization, you must be organ he box or boxes below, you attest that you ar	ized and operated exclusively to further one or more of the enganized and operated exclusively to further the purposes				
	M Charitable	☐ Religious	☑ Educational				
	☐ Scientific	☐ Literary	☐ Testing for public safety				
		nal amateur sports competition	Prevention of cruelty to drill on or animals				
3	To qualify for exemption as a sect						
7	Refrain from supporting or opposing candidates in political campaigns in any way.						
	이 것은 그 아이들이 아니는 아이들이 가지 않는데 아이들이 가지 않는데 하는데 그렇게 하는데 없다.	not inure in whole or in part to the benefit of	private shareholders or individuals that is, board members,				
	 Not further non-exempt purpose 	s (such as purposes that benefit private inter	ests) more than insubstantially				
	 Not devote more than an insubs normally make expenditures in e 	r the primary purpose of conducting a trade of tantial part of your activities attempting to infi xcess of expenditure limitations outlined in se surance as a substantial part of your activities	[25] [26] [27] [25] [25] [25] [25] [25] [25] [25] [25				
			activities that violate base prohibitions and restrictions.				
4	Do you or will you attempt to influ	[2] (B. 10 전 10 B. 10 B	No.				
		See the instructions for more details.)					
5		ion to any of your officers, directors, or truste	as? Yes M No				
_	(Refer to the instructions for a def	inition of compensation.)					
6	Do you or will you donate funds to	or pay expenses for individual(s)?	Yes Yes No				
7	Do you or will you conduct activiti United States?	es or provide grants or other assistance to in	dividual's) or organization(s) outside the				
8	Do you or will you engage in finan directors, or trustees, or any entiti	cial transactions (for example, loans, payments they own or control?	is, vents, etc.) with any of your officers,				
9	Do you or will you have unrelated	business gross income of \$1,000 or grow an	ing a tax year?				
	Do you or will you operate bingo o	the same of the two case of a last to the same of the same of					
	Do you or will you provide disaste						
	t IV Foundation Classifi						
at	us is a more favorable tax sta	as an organization of this either a pri tus than private foundation status. tus, check the appropriate box (1a – 1c below	vate foundation or a public charity. Public charity				
		네트그리트 그 그 그 그 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은	r support from public sources or you normally receive at least 1				
			tics of a publicly supported organization. Sections 509(a)(1) and				
1	membership fees, and gross r	you normally receive more than one-third of y ecaipt from permitted sources) from activitie from investment income and unrelated busin	our support from a combination of gifts, grants, contributions, as related to your exempt functions and normally receive not most taxable income. Section 509(a)(2).				
•	Check this box to attest that Sections 509(a)(1) and 170(b)		r university that is owned or operated by a governmental unit.				
2	specific provisions in your orga	nizing document, unless you rely on the open	s a private foundation, you are required by section 508(e) to have ation of state law in the state in which you were formed to meet old liability for private foundation excise taxes under sections				
	does not need to include the p		cions required by section 508(e) or that your organizing docume you rely on the operation of state law in your particular state to on of the section 508(e) requirements.)				

Form 1023-EZ (6-2014) Page 3 Reinstatement After Automatic Revocation Part V Complete this section only if you are applying for reinstatement of exemption after being automatically revoked for failure to file required annual returns or notices for three consecutive years, and you are applying for reinstatement under section of Revenue Procedure 2014-11. (Check only one box.) 1 Check this box if you are seeking retroactive reinstatement under section 4 of Revenue Procedure 2014-11. By checking this XOX ou attest that you meet the specified requirements of section 4, that your failure to file was not intentional, and that you have put in place precedures to file required returns or notices in the future. (See the Instructions for requirements.) 2 Check this box if you are seeking reinstatement under section 7 of Revenue Procedure 2014-11, effective the day filling this application. Part VI Signature I declare under the penalties of perjury that I am authorized to sign this application on behalf above organization and that I have examined this application, and to the best of my knowledge it is true, correct and complete. THOMAS **PLEASE** SIGN Form 1023-EZ (6-2014)

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