Form **8940**
(Rev. June 2011)
Department of the Treasury
Internal Revenue Service

Request for Miscellaneous Determination

Under Section 507, 509(a), 4940, 4942, 4945, and 6033 of the Internal Revenue Code

OMB No. 1545-2211

Use the instructions to complete this form. **A User Fee must be attached to this form, if required.** For user fee information or additional help, visit our website at *www.irs.gov/eo* or call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. If the required information and documents are not submitted with payment of the appropriate user fee, the form may be returned to you.

Part I Identification of Organization

1a Full Name of Organization

b Address (number, street and room/suite) If a P.O. Box, see instructions.	**c** City	**d** State	**e** Zip Code + 4

2 Employer Identification Number	**3** Month Tax Year Ends (MM)	**4** Person to Contact if More Information is Needed	
5 Contact Telephone Number		**6** Fax Number (optional)	**7** User Fee Submitted

Part II Type of Request

8 Please select the item(s) below that best describe your request. Using an attachment, provide a detailed explanation of your request. Be sure to include the organization's name and EIN on each additional sheet.

- **a** ☐ Advance approval of certain set-asides described in section 4942(g)(2)
- **b** ☐ Advance approval of voter registration activities described in section 4945(f)
- **c** ☐ Advance approval of scholarship procedures described in section 4945(g)
- **d** ☐ Exemption from Form 990 filing requirements
- **e** ☐ Advance approval that a potential grant or contribution constitutes an “unusual grant”
- **f** ☐ Change in Type (or initial determination of Type) of a section 509(a)(3) organization
- **g** ☐ Reclassification of foundation status, including a voluntary request from a public charity for private foundation status
- **h** ☐ Termination of private foundation status under section 507(b)(1)(B)—advance ruling request
- **i** ☐ Termination of private foundation status under section 507(b)(1)(B)—60-month period ended

Under penalties of perjury, I declare that I have examined this application, including accompanying statements and schedules, and to the best of my knowledge and belief, it is true, correct, and complete.

Please Sign Here ▶ _____ _____
(Signature of Officer, Director, Trustee or other authorized official.) (Date)

_____ _____
(Type or print name of signer) (Type or print title or authority of signer)