

STATE OF ARKANSAS CORPORATION INCOME TAX SECTION Application for Income Tax Exempt Status

PART I Identification of A	 pplicant				
1a Full Name of Organization (As shown in organizing document)			2 FEIN		
1b C/O Name (if applicable)			3 Name and telephone number of person to be		
			contacted if additional information is ne	eded	
1c Address (Number, Street and Room or Suite Number)					
1d City or Town, State and ZIP Code			() 4 Tax Year (Month/Year)		
Tu Oily of Town, State and Zir Gode			4 Tax Todi (Wohan Todi)		
F. Database and J. Francis L. O. A. Sitta O. day (Oct. Anterior)			7 Adams On the Onetion could be considered		
5 Date Incorporated or Formed	med 6 Activity Codes (See Instructions)		7 Arkansas Code Section applying under		
8 Date began activity in Arkansas	9 Domestic or Foreign		10 IRC Exempt Under		
11 IRS Approval Date 12 IF		12 IRS Exp	Expiration Date		
13 Has the organization filed Arkansas Corporation Income Tax Returns? Yes No (If "Yes", state the tax years filed)					
(ii roo , otato aro tax youro mou)					
14 Check the box for your type of organization.					
BE SURE TO ATTACH A COMPLETE COPY OF THE CORRESPONDING DOCUMENTS TO THE APPLICATION BEFORE MAILING.					
01 Corporation: Attach a copy of your Articles of Incorporation (including amendments and restatements) showing approval by the appropriate					
	State official; also include a copy of your Bylaws.				
02 Trust: Attach a copy	Attach a copy of your Trust Indenture or Agreement, including all appropriate signatures and dates.				
03 Cooperative: Attach a copy of your creating documents and a copy of your Bylaws, Rules and Regulations.					
04 Partnership: Attach a copy of your Partnership Agreement and Bylaws if any.					
Partnership. Attach a copy of your Fartnership Agreement and Bylaws if any.					
O5 Association: Attach a copy of your Articles of Association, Constitution, or other creating documents, with a declaration or other evidence the organization was formed by adoption of the document by more than one person; also include a copy of your Bylaws.					
organization w	vas formed by adoption of the documer	it by more than c	me person, also include a copy of your bylaws.		
If you are a corporation or an unincorporated association that has not yet adopted Bylaws, check here					
I declare under the penalties of perjury that I am authorized to sign this application on behalf of the organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge, it is true, correct and complete.					
	,	,	1		
Please Sign					
Here					
Si	ignature	Title	e or Authority Signer	Date	
Please mail to the following address					

Corporation Income Tax, P O Box 919, Little Rock, AR 72203



PART II Activities and Operational Information
1 Provide a detailed narrative description of all the activities of the organization - past, present and planned. Do not merely refer to or repeat the language in your organizational document. Describe each activity separately in the order of importance. Each description should include, as a minimum, the following: (a) a detailed
description of the activity including its purpose; (b) when the activity was or will be initiated; and (c) when and by whom the activity will be conducted.
2 Will any of the organization's income be credited to surplus or inure to the benefit of any private stockholder or individual? [] Yes [] No (If "Yes", explain below.)
3 What are or will be the organization's sources of financial support? List in order of size.
4 Describe the organization's fundraising program, both actual and planned, and explain to what extent it has been put into effect. Include details of fundraising activities such as selective mailings, formation of fundraising committees, use of volunteers or professional fundraisers, etc. Attach representative copies of solicitations for financial support.
5 Attach a copy of the latest financial statement showing the assets, liabilities, receipts and disbursements of the organization.