

The form you are looking for begins on the next page of this file. Before viewing it, please see the important update information below.

New Mailing Address

The mailing address for certain forms have change since the forms were last published. The new mailing address are shown below.

Mailing Address for Forms 1023, 1024, 1024-A, 1028, 5300, 5307, 5310, 5310-A, 5316, 8717, 8718, 8940:

Internal Revenue Service TE/GE Stop 31A Team 105 P.O. Box 12192 Covington, KY 41012–0192

Deliveries by private delivery service (PDS) should be made to:

Internal Revenue Service 7940 Kentucky Drive TE/GE Stop 31A Team 105 Florence, KY 41042

This update supplements these forms' instructions. Filers should rely on this update for the change described, which will be incorporated into the next revision of the form's instructions.



Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see separate instructions.

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.

Par	i	lc	dentification of Organiz	zation				
1a	F	ull Na	ame of Organization					
b	A	ddress	s (number, street and room/s	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 Month Tax Year Ends (MM)						ation is Nee	eded
5	C	Contact Telephone Number			6 Fax Number (optional)			User Fee Submitted
Part	Ш	T	ype 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 su to include the organization's name and EIN on each additional sheet.							of your request. Be sure
а	Advance approval of certain set-asides described in section 4942(g)(2)							
b] Adv	vance approval of voter req	gistration activities des	scribed in sec	etion 4945(f)		
С] Adv	vance approval of scholars	ship procedures descr	ibed in sectio	n 4945(g)		
d] Exe	emption from Form 990 filir	ng requirements				
е] Adv	vance approval that a pote	ntial grant or contribu	tion constitut	es an "unusual grant"		
f] Cha	ange in Type (or initial dete	ermination of Type) of	a section 509	(a)(3) organization		
g] Red	classification of foundation	status, including a vo	oluntary reque	est from a public charity	for private	foundation status
h] Ter	rmination of private founda	tion status under sect	ion 507(b)(1)(B)—advance ruling requ	ıest	
i] Ter	rmination of private founda	tion status under sect	ion 507(b)(1)(B)—60-month period er	nded	
 Jnder p	oena		perjury, I declare that I have exam					of my knowledge and belief, it
			d complete.	11 /	. ,	,		, ,
Pleas Sign Here		•	(Signature of Officer, Director, T	rustee or other authorized o	fficial.)			(Date)
			(Type or print name of signer)			(Type or print title or aut	hority of signe	
For Pa	nei	rwork	Reduction Act Notice, see s	eparate instructions.		Cat. No. 37756H		Form 8940 (Rev. 6-2011)

Cat. No. 37756H