STATE OF DELAWARE DIVISION OF REVENUE APPLICATION FOR EXEMPTION FROM CORPORATION INCOME TAX SECTION 1902(b)(8) HOLDING COMPANIES

PART 1

Name of Applicant			
Address			Zip Code
Delaware Address if Different from Abo	erent from Above Zip Code		
Date and State of Incorporation	Federal Employer Identification Number	Nature of E	Business

PART 2

Name and address of Delaware employees. (If additional space is needed, attach list.)

Name	Address	

PART 3

Name and address of persons (individuals, corporations, etc.) owning more than 10% of the stock of corporation. (If additional space is needed, attach list.)

Name	Address

PART 4

(Revised 12/09/10)

Describe in detail below your operations in Delaware and list each type of intangible investment owned and all sources of income. RECITING THE STATUTE DOES NOT CONSTITUTE AN ANSWER. (If additional space is needed, please provide attachments.)

•	Will the corporation act as a general partner in a partnership? If yes, please describe the activities of the partnership.	YESNO
	Will the corporation participate in a joint venture? If yes, please describe the activities of the joint venture.	YESNO
	Will the corporation receive income from patents, royalties, copyrights, know-how, etc.? If yes, please describe any services which will be performed by the corporation with regard to such intangibles.	YESNO
	Will the corporation engage in business outside of Delaware? If yes, please describe the activities.	YESNO

Signature and Title

Date

RETURN TO: STATE OF DELAWARE, DIVISION OF REVENUE, 820 N. FRENCH STREET, WILMINGTON, DELAWARE 19801 ATTN: CONFEREE



