1	
1	-1

Name and Address Information				
Employer ID number	1			
Corporation's legal name	2			
DBA (Doing business as)	3			-
In care of	4			-
Address, Suite #	5			Suite # 6
City	7			
U.S. ONLY State, ZIP, county	8 9	10		
Foreign ONLY Province / state, country, postal code	11	12 13		J
Phone number	14			
General Information		Other Information		
A 1a Consolidated return (En	er on 851 screen)	Resident state		28
1b Life / nonlife consolidated in	retum	Resident city	29	
2 Personal holding company	(Enter on PH screen)	Misc code 1	30	
3 Personal service corporation		Misc code 2	31	
17 Qualified personal service	corporation	Invoice #	32	
C Date incorporated 18		Preparer fee	33	
E State of incorporation		Firm #	34	
Mark applicable boxes:		Preparer #	35	
20 23	ne change	Data entry #	36	
21	nge in address	ERO#	37	
22 Superseding	J			
Suberseand				
	lient Information (for cli	ent reports only)		
If not calendar year C	lient Information (for cli	ent reports only)		

52-53 week tax year

Fax

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