Name and Address Information										
Employer ID Number										
Corporation's Legal Name		2								
·		3								
DBA (doing business as)										
In care of			5							6
Address, suite #										Suite #
City					T.					
U.S. ONLY	State, ZIP, count	ty 8	9		10					
Foreign O	Province / state country, postal	nde 11			·	12	13			
Phone number		14								
General Information								If not a calendar year		
A Date of election as an S corporation			15					Fiscal year be	gins	35
B Business activity code number			16					Fiscal year en	<u> </u>	36
Business activity								37	eek tax yea	ar
Product or service			18 Other Information							A1
			19							38
E Date incorporated				J				Resident state		39
State of incorporation			20					Resident city		40
G	First year as an S corp	oration						Misc code 1		
22	Attaching Form 2553 a	as a PDF doo	document					Misc code 2		41
H Mark	applicable boxes:							Invoice #		42
23	Final return	²⁴ S	uperseding					Preparer fee		43
25	Name change	²⁶ A	Amended return					Firm #		44
27	Change of address S election termination or revocation							Preparer #		45
Number of shareholders during the year								Data entry ope	erator #	46
J Aggregated activities for section 465 at-risk purposes								ERO#		47
Grouped activities for section 469 passive activity purposes										
Accounting Method										
Cash Sa Accrual Other S										
Client Information (for client reports only)										
	formation (for client	reports or	niy)							
Email	49		ا	50						
Cell			Fax	,,,						