



**Owners/Beneficiaries**

Name \_\_\_\_\_ Percent Ownership \_\_\_\_\_

Address \_\_\_\_\_

Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ # of Shares (Form 1120-S only) \_\_\_\_\_

Name \_\_\_\_\_ Percent Ownership \_\_\_\_\_

Address \_\_\_\_\_

Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ # of Shares (Form 1120-S only) \_\_\_\_\_

Name \_\_\_\_\_ Percent Ownership \_\_\_\_\_

Address \_\_\_\_\_

Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ # of Shares (Form 1120-S only) \_\_\_\_\_

Name \_\_\_\_\_ Percent Ownership \_\_\_\_\_

Address \_\_\_\_\_

Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ # of Shares (Form 1120-S only) \_\_\_\_\_

Form 990 – Please list any directors

_____	_____
_____	_____
_____	_____
_____	_____