



## IWIRC 2022 Network Annual Report

Due April 15, 2023 for January 1, 2022-December 31, 2022 . Networks who fail to submit this form in a timely manner will forfeit their annual rebate checks. Rebates are \$50 per year, per member, paid in two installments of \$25 each.

### Name

Amy Swedberg

### E-mail

amy.swedberg@maslon.com

### IWIRC Network

Minnesota

**PLEASE FILL IN YOUR 2022 BOARD OF DIRECTORS (A Network Board should consist of no less than three officers and no individual may maintain the same position for more than six years. In addition, no individual may serve on the Board for more than six years, however Networks may waive or modify this requirement.)**

**We encourage Networks to run their Network Roster Report before board elections. Log in to your IWIRC profile, and then [click here](#). Toggle your Network and run the report. This will verify that all board candidates are members in good standing.**

### 2022 NETWORK BOARD OF DIRECTORS

Name	Position	Current Term Expires	Prior Network Board Position
Amy Swedberg	Chair	2023	Membership Director
Brittany Michael	Vice Chair, Membership Director	2023	Treasurer
Bethany Rubis	Programming Director	2023	Vice Chair
Kara Casteel	Treasurer, Secretary, Immediate Past Chair	2023	Chair, Treasurer
Amanda Schlitz	Immediate Past Chair	2023	Chari, Vice Chair, Secretary
Adine Momoh	Board Member	2023	Chair, Vice Chair

**I note that all of our Board Members have current memberships and will continue to remain current through 2023.**

Yes

**How many board meetings were held this year? (Network boards must meet regularly)**

and at least once per year)

6

**When were the last board elections held?  
(Network elections are to be held no less than  
bi-annually)**

March, 2021

**Please note that you have reviewed the  
Network's Rules of Operation in 2022.**

Yes

**Please note whether all Network Board  
Members have signed the Code of Conduct**

Yes

**PLEASE DESCRIBE THE EVENTS YOUR NETWORK HELD IN 2022:** Networks must hold at least three events, two of which are to be open to non-members and one which is specifically designed to recruit new members. Networks are to participate in at least one regional event or, if the Network is a regional Network, participate in a program with another Network every four years. A Network shall obtain prior written Board approval for Network "Special Events" as defined in the handbook.

#### NETWORK EVENTS IN 2022

Date of Event	Title of Event	Virtual or Live?	Type of Event (Educational, Charitable, Networking?)	Co-hosted? (y/n)	Co-host organization	Open to nonmembers? (y/n)	No. in attendance
5/24/22	Meet Judge Tanabe	Live	Educational, Networking	y	TMA NOW	y	25
7/11/22	IWIRC MN Summer Event	Live	Networking	n	n/a	n	10
9/14/22	Sips Happen: Wine Tasting Event	Live	Educational, Networking	y	TMA NOW	y	22
12/6/22	Annual Holiday Gift Wrapping Event	Live	Charitable, Networking	n	n/a	n	12

#### NETWORK SPONSORS IN 2022

Firm Name	Sponsor Level	Event or Annual Sponsor
Maslon LLP	350	Summer Networking Event
ASK LLP	200	Wine Tasting Event
Dorsey LLP	200	Wine Tasting Event
Maslon LLP	100	Annual Charity Gift Wrapping Event
Pachulski Stang Siehl & Jones LLP	100	Annual Charity Gift Wrapping Event

**How many members does your network currently have**

13

**How many articles did your Network submit to the IWIRC eNewsletter this year? (Networks are to submit at least one article to the IWIRC eNewsletter each year.)**

3 for 2022 and 2 for 2021 published in 2022

**NETWORKS ARE TO PROVIDE AN ACCOUNTING OF INCOME ON AN ANNUAL BASIS. Please provide:**

**Beginning Balance (as of January 1, 2022)**

2,839

**Ending Balance (as of December 31, 2022)**

6,664

**Net Income for 2022**

3,825

**Has the Network filed the yearly IRS tax form (U.S. Networks only)?**

Yes

**Please note other information that would be helpful to the International Board, including challenges faced, suggestions, or comments.**

Recommend a global, remote event on "Mean Girls in the Modern Age" to deal with how women sometimes are not as supportive of other women in business and sometimes can even sabotage or hurt them. I discussed this issue with Jennifer Fondrevay who spoke at IWIRC on Ice (author, TED talk presenter), and she has heard a lot of this from women as well.

**Date**

Thursday, February 10, 2022

**From:** [Schlitz, Amanda K](#)  
**To:** [Kara Casteel](#); [hmontgomery@iwirc.com](mailto:hmontgomery@iwirc.com); "[Brittany M. Michael](#)"  
**Cc:** [sbedker@iwirc.com](mailto:sbedker@iwirc.com); [ccschnapp@iwirc.com](mailto:ccschnapp@iwirc.com)  
**Subject:** RE: IWIRC Minnesota Annual Report - missing 990-N filing?  
**Date:** Monday, June 12, 2023 12:40:37 PM  
**Attachments:** [image001.png](#)  
[image003.png](#)  
[image011.png](#)  
[EXTERNAL Form 990-EZ E-filing Receipt - IRS Status Accepted \(10.1 KB\).msg](#)  
[2022 Form990Package-1 EFILED.pdf](#)  
[6117112432022b8453TESigned - 2022.pdf](#)

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Yes, our 2022 return has been filed (see attached) – we’ve had a number of issues filing the 990-N, so the IRS directed us to file the 990-EZ instead.

**Amanda K Schlitz**

Vice President | Senior Corporate Counsel  
p. 612.303.7877 | [amanda.schlitz@usbank.com](mailto:amanda.schlitz@usbank.com)

**U.S. Bank**

**US Bancorp Ctr, Minneapolis**

800 Nicollet Mall, Minneapolis, MN 55402-7020 | BC-MN-H21N | [usbank.com](http://usbank.com)

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**From:** Kara Casteel <[kcasteel@askllp.com](mailto:kcasteel@askllp.com)>  
**Sent:** Monday, June 12, 2023 11:34 AM  
**To:** [hmontgomery@iwirc.com](mailto:hmontgomery@iwirc.com); 'Brittany M. Michael' <[bmichael@pszjlaw.com](mailto:bmichael@pszjlaw.com)>; Schlitz, Amanda K <[amanda.schlitz@usbank.com](mailto:amanda.schlitz@usbank.com)>  
**Cc:** [sbedker@iwirc.com](mailto:sbedker@iwirc.com); [ccschnapp@iwirc.com](mailto:ccschnapp@iwirc.com)  
**Subject:** [EXTERNAL] RE: IWIRC Minnesota Annual Report - missing 990-N filing?

[WARNING] Use caution when opening attachments or links from unknown senders.

Hi Heather,





Thanks for reaching out! Amanda Schlitz has been our fearless 990-N filer all 10 years (w00t w00t! Thank you Amanda!) and knows the answer to this. The IRS mucked something up one year, or something like that. I’m sorry I don’t have the answer at my fingertips Amanda!



**KARA E. CASTEEL**

Partner



 (651) 289-3846  
 2600 Eagan Woods Drive,  
Suite 400 St. Paul, MN 55121  
 [kcasteel@askllp.com](mailto:kcasteel@askllp.com)  
 [askllp.com](http://askllp.com)



The information transmitted is intended only for the person or entity to which it is addressed and may contain confidential and/or privileged material. Any review, retransmission, dissemination or other use of, or taking of any action in reliance upon, this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please E-mail the sender and delete the material from any computer. Thank you.

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**From:** [hmontgomery@iwirc.com](mailto:hmontgomery@iwirc.com) <[hmontgomery@iwirc.com](mailto:hmontgomery@iwirc.com)>  
**Sent:** Friday, June 9, 2023 3:30 PM  
**To:** 'Brittany M. Michael' <[bmichael@pszjlaw.com](mailto:bmichael@pszjlaw.com)>  
**Cc:** Kara Casteel <[kcasteel@askllp.com](mailto:kcasteel@askllp.com)>; [sbedker@iwirc.com](mailto:sbedker@iwirc.com); [ccschnapp@iwirc.com](mailto:ccschnapp@iwirc.com)  
**Subject:** IWIRC Minnesota Annual Report - missing 990-N filing?

Hi Brittany,

As part of my review of Annual Reports, I'm double-checking that Networks filed their 990-N postcards with the IRS. I'm cc'ing your treasurer Kara Casteel as well in case she filed them already too. I see on the Annual Report that you said "yes" on the question as to whether you filed, but I don't see yours listed from 2022 on the IRS site. They did say there is a delay on their end so it might be that it hasn't gone through yet.

So, if you haven't yet – please do file your 990-N form. We don't want to see you lose the Non-Profit status for your Network. Here's the link for the 990-Ns – it is a simple submission:

<https://www.irs.gov/charities-non-profits/annual-electronic-filing-requirement-for-small-exempt-organizations-form-990-n-e-postcard>

Your Tax ID No. is 61-1711243 – you can easily search past ones filed here:

<https://www.irs.gov/charities-non-profits/search-for-tax-exempt-organizations> to show you what basic information your network previously provided.

Thanks so much and have a great weekend!

Best,

Heather Montgomery  
IWIRC Membership Services Director



**International Women's Insolvency and Restructuring Confederation**  
[info@iwirc.com](mailto:info@iwirc.com) / [www.iwirc.com](http://www.iwirc.com) / [Facebook](#) / [Twitter](#) / [Linked In](#)

IWIRC PO Box 249 / Stanardsville, VA 22973 USA  
Tel: +1-434-939-6002 / Fax: +1-434-939-6030

U.S. BANCORP made the following annotations

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Electronic Privacy Notice. This e-mail, and any attachments, contains information that is, or may be, covered by electronic communications privacy laws, and is also confidential and proprietary in nature. If you are not the intended recipient, please be advised that you are legally prohibited from retaining, using, copying, distributing, or otherwise disclosing this information in any manner. Instead, please reply to the sender that you have received this communication in error, and then immediately delete it. Thank you in advance for your cooperation.

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**From:** [990 Online Tech Support](#)  
**To:** [Schlitz, Amanda K](#)  
**Subject:** [EXTERNAL] Form 990-EZ E-filing Receipt - IRS Status: Accepted  
**Date:** Thursday, February 16, 2023 4:38:03 PM

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[WARNING] Use caution when opening attachments or links from unknown senders.

Organization: INTERNATIONAL WOMENS INSOLVENCY & RESTRUCTURING CONFEDERATION INC  
EIN: 61-1711243  
Return Type: Form 990-EZ  
Return Year: 2022  
Submission ID: 8600762023047o504965  
Return Timestamp: 2/16/2023 3:14:16 PM  
Accepted Date: 2/16/2023

Thank you for using the 990 Online system for preparing and electronically filing your Form 990 EZ return. This email contains some important identifying information about the return we transmitted. You may want to keep this email in case you need to contact the IRS regarding your return.

The return described above was transmitted to the IRS. The IRS has ACCEPTED the return. Congratulations.

NOTE: The IRS does NOT reject returns for being late. If this return was transmitted to the IRS after the due date, and your organization has not filed a Form 8868 (Request for Extension), you may receive a letter from the IRS indicating whether your organization owes any penalties or other fees.

Please visit

[https://urldefense.com/v3/\\_http://efile.form990.org\\_!!GRBPSLYk!6P1pMY\\_tUq4uu0wdmv7aBGEZHMtgWIB2ZBmTuBnLHMlzHz11Pu6fB6YnU6BT9vGrs\\_JXfzEpw9kwWF64n5SCjyRSS](https://urldefense.com/v3/_http://efile.form990.org_!!GRBPSLYk!6P1pMY_tUq4uu0wdmv7aBGEZHMtgWIB2ZBmTuBnLHMlzHz11Pu6fB6YnU6BT9vGrs_JXfzEpw9kwWF64n5SCjyRSS)  
to stay informed of enhancements to our e-filing systems.

Once again, thank you for using the 990 Online system.

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e-file.form990.org technical support  
Phone: 888-666-1773 (toll free)  
email: [Support@Form990.org](mailto:Support@Form990.org)





Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .		<input checked="" type="checkbox"/>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions . . . . .		<input checked="" type="checkbox"/>
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .		<input checked="" type="checkbox"/>
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .		<input checked="" type="checkbox"/>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <b>37a</b> 0		
b	Did the organization file Form 1120-POL for this year? . . . . .		<input checked="" type="checkbox"/>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .		<input checked="" type="checkbox"/>
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved . . . . . <b>38b</b>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b>		
b	Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b>		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: _____; section 4912: _____; section 4955: _____		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . .		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .		<input checked="" type="checkbox"/>
41	List the states with which a copy of this return is filed: _____		
42a	The organization's books are in care of: <u>Kara Casteel</u> Telephone no. <u>434-939-6002</u> Located at: <u>2600 Eagan Woods Dr Ste 400, Eagan, MN 55121-1169</u> ZIP + 4 <u>55121-1169</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		<input checked="" type="checkbox"/>
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: _____		<input checked="" type="checkbox"/>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . <b>43</b>		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		<input checked="" type="checkbox"/>
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .		<input checked="" type="checkbox"/>
c	Did the organization receive any payments for indoor tanning services during the year? . . . . .		<input checked="" type="checkbox"/>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		<input checked="" type="checkbox"/>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions . . . . .		<input checked="" type="checkbox"/>

		Yes	No
<b>46</b>	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .		<input checked="" type="checkbox"/>
<b>46</b>			

**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI . . . . .

		Yes	No
<b>47</b>	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .		
<b>47</b>			
<b>48</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .		
<b>48</b>			
<b>49a</b>	Did the organization make any transfers to an exempt non-charitable related organization? . . . . .		
<b>49a</b>			
<b>b</b>	If "Yes," was the related organization a section 527 organization? . . . . .		
<b>49b</b>			
<b>50</b>	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

**f** Total number of other employees paid over \$100,000 . . . . .

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

**d** Total number of other independent contractors each receiving over \$100,000 . . . . .

**52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A . . . . .  Yes  No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>Amanda Schlitz, Officer</b>		Date		
	Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name		Firm's EIN		
	Firm's address		Phone no.		

May the IRS discuss this return with the preparer shown above? See instructions . . . . .  Yes  No

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Primary Exempt Purpose

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Primary Exempt Purpose

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IWIRC is dedicated to enhancing the position of women in the insolvency and restructuring fields internationally.

Form **8453-TE**

### Tax Exempt Entity Declaration and Signature for Electronic Filing

OMB No. 1545-0047

For calendar year 2022, or tax year beginning 01/01/2022 and ending 12/31/2022

# 2022

Department of the Treasury  
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP  
Go to [www.irs.gov/Form8453TE](http://www.irs.gov/Form8453TE) for the latest information.

Name of filer <b>INTERNATIONAL WOMENS INSOLVENCY &amp; RESTRUCTURING CONFEDERATION INC</b>	EIN or SSN <b>61-1711243</b>
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#### Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b	
2a Form 990-EZ check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9) . . . . .	2b	3,825
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22) . . . . .	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5) . . . . .	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance due (Form 8868, line 3c) . . . . .	5b	
6a Form 990-T check here <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4) . . . . .	6b	
7a Form 4720 check here <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1) . . . . .	7b	
8a Form 5227 check here <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D) . . . . .	8b	
9a Form 5330 check here <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19) . . . . .	9b	
10a Form 8038-CP check here <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

#### Part II Declaration of Officer or Person Subject to Tax

- 11a  I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- b  If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that  I am an officer of the above named entity or  I am the person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_.

and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Amanda Schlitz | February 16, 2023 | Amanda Schlitz, Officer  
 Here Signature of officer or person subject to tax | Date | Title, if applicable

#### Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	Date	Check If also paid preparer <input type="checkbox"/>	Check If self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code				EIN Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/type preparer's name	Preparer's signature	Date	Check If self-employed <input type="checkbox"/>	PTIN
	Firm's name				Firm's EIN
	Firm's address				Phone no.