(Rev. September 2001) Department of the Treasury Internal Revenue Service

Short Form Application for Determination for Minor Amendment of Employee Benefit Plan

(Under sections 401(a) and 501(a) of the Internal Revenue Code)

OMB No. 1545-0229

For IRS Use Only

Revi	ew the Procedural Requirements Checklist on page	3 before si	ubmitting this	application.		
1a	Name of plan sponsor (employer if single-employer plan)				1b	Employer identification number
	Number, street, and room or suite no. (If a P.O. box, see instruc	tions.)			1c	Employer's tax year ends—Enter (MM)
	City	State	ZIP	code	1d	Telephone number
2a	Person to contact if more information is needed. (See instruction and Declaration of Representative, or other written designation complete the rest of this line.)	ons.) (If Form on is attached	n 2848, Power of d, check box an	Attorney d do not	1e	Fax number ()
	Number, street, and room or suite no. (If a P.O. box, see instruc	tions.)			2b	Telephone number
	City	State	ZIP	code	2c	Fax number
3a	Determination requested for amendment (fill in ap Date amendment signed ►//		lates):		•	
b	Has the plan received a determination letter? Date of letter ▶/					Yes 🗌 No 🗌
c d	Have interested parties been given the required no Does the plan have a cash or deferred arrangement	otification o	of this applica	•		
е	Does the plan have matching contributions (section	on 401(m))?	·			Yes No
g Does the plan provide for disparity in contributions or benefits that is intended to meet the permitted						ne permitted
4a	Name of plan (Plan name may not exceed 66 cha				•	Yes 🔲 No 🗀
	b Enter 3-digit plan number c Enter date plan year ends (MMDE			•	_	inal effective date (MMDDYYYY) participants (See instructions.)
5	Indicate type of plan by entering the number from					
	1—profit-sharing and/or 401(k) 2—money purchase		cash balance everaged ES)P		
	3—target benefit		non-leveraged			
	4—defined benefit but not cash balance	8—5	stock bonus			
	r penalties of perjury, I declare that I have examined this applicat it is true, correct, and complete.	ion, including	accompanying s	tatements and s	chedul	es, and to the best of my knowledge and
Print	Name ►	Title ►				
Signa	ture ▶	Date ▶				
For I	Paperwork Reduction Act Notice, see separate instruc	tions		Cat No. 245001		Form 6406 (Rev. 9-2001)

		Yes	No
	Is the employer a member of an affiliated service group?		
	control?		
b	Is this a master or prototype plan?		
b c	Is this plan a governmental plan?		
a	Is this plan a section 412(i) plan?		
	NA NA	Yes	No
9a	Does any amendment to the plan reduce or eliminate any section 411(d)(6) protected benefit including an amendment adopted after September 6, 2000, to eliminate the joint and survivor annuity form of benefit? (See instructions.)		
b	Is this plan or trust currently under examination or is any issue related to this plan or trust currently pending before:		
	 The Internal Revenue Service The Department of Labor The Pension Benefit Guaranty Corporation 		
	• Any court?		

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Procedural Requirements Checklist

		list to assure that your submitted package is complete. Failure to supply the appropriate information may result y in the processing of the application.					
	1	Are the amendments MINOR in nature? (i.e., Form 6406 may not be used to amend for law changes or for significant changes to plan benefits or coverage.) For more information, please see Who May File in the instructions?					
	2	Is Form 8717, User Fee for Employee Plan Determination Letter Request, attached to your submission?					
	3	Is the appropriate user fee for your submission attached to Form 8717?					
	4	If appropriate, is the Form 2848 , Power of Attorney and Declaration of Representative, or a privately designated authorization attached? (For more information, see the Disclosure Request by Taxpayer in the instructions.)					
	5	Is a copy of your plan's latest determination letter, if any, attached?					
	6	Is the Employer Identification Number (EIN) of the plan sponsor/employer (NOT the trust's EIN) entered on line 1b?					
	7	Does line 4d list the plan's original effective date?					
	8	Is page 1 of the application signed and dated?					
	9	Have interested parties been given the required notification of this application? (See instructions.)					
	10	Have you included the following information:					
		A copy of the new amendment(s) or adoption agreement; A statement as to how the amendment(s) or new adoption agreement elections affect or change the plan or any other plan maintained by the employer; A copy of the latest determination letter, and A copy of the approval letter if your plan is either a volume submitter or M&P document?					

If you answered "Yes" to line(s) 6a and/or 6b, have you included the information requested in the instructions?

Have you completed the information on page 2?