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INTERNAL REVENUE SERVICE
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TAX EXEMPT AND
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Contact Person:

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Telephone Number:

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Employer Identification Number:

Legend:

Company =

Old VEBA =

New VEBA =

Retirement Plan =

401(h) Account =

Medical Plan =

Dear Sir or Madam:

This is in reference to a ruling request by counsel of the Company, the Old VEBA, and the New VEBA regarding the federal tax consequences under the Internal Revenue Code (the "Code") of a restructuring in the funding of the Company's postretirement medical benefits program (the "Restructuring").

The Company sponsors the Medical Plan, which provides health-related benefits for eligible active and retired employees. In general, eligible employees are the Company's non-collectively bargained employees. The Medical Plan has two components:

1. The Core Program – this is the Company's medical program, and
2. The Supplemental Program – this is the Company's dental program, vision care program, behavioral health program and the Medicare reimbursement program.

394

Prior to January 1, 1999, depending on the category of retired employee, obligations under the Medical Plan were funded in various ways:

(1) **Benefits Payable from General Assets** – Post-retirement benefits under the Medical Plan for non-collectively bargained employees who retired before January 1, 1993 have been payable out of general assets of the Company or through insurance contracts purchased with general assets of the Company.

(2) **Old VEBA** – Supplemental Program post-retirement benefits for eligible non-collectively bargained employees who retired after December 31, 1992 were funded through the Old VEBA.

(3) **401(h) Account** – Core Program post-retirement benefits for Retirement Plan non-collectively bargained employees who retired after December 31, 1992 were funded through the 401(h) Account.

Key employees (within the definition of section 416(i)) of the Code are excluded. There was no aggregate dollar limit imposed on the Supplemental Programs payable by the Old VEBA. All assets in the Old VEBA are attributable to employer contributions. As of December 31, 1998, the Old VEBA covered 7,500 active employees and 3,000 retired employees. Key employees are ineligible to receive benefits under the 401(h) Account. All assets in the 401(h) Account are attributable to employer contributions.

Effective January 1, 1999, as part of its benefits restructuring, the Company amended the Old VEBA and the 401(h) Account and established the New VEBA.

The Old VEBA amendments changed the definition of eligible benefits, limited the membership and imposed a limit on the aggregate dollar amount of benefits payable. Each amendment discussed below is effective January 1, 1999:

(1) The Old VEBA will cover all post-retirement benefits payable under the Core Program and the Supplemental Program (subject to certain limits). Eligible employees are the Company's non-collectively bargained employees.

(2) The Old VEBA will limit membership to current retired employees who retired after December 31, 1992 and to active employees who are eligible for certain "grandfathered" pension benefits under the Retirement Plan.

Active employees who were members of the Old VEBA prior to January 1, 1999 and who are no longer eligible for membership as a result of the 1999 amendments will become members of the New VEBA.

(3) The Old VEBA will not pay post-retirement benefits to the extent that they exceed a certain threshold for any calendar quarter. The threshold is determined by dividing (A) the product of $3,500 times the total number of "Grandfathered Spousal Beneficiaries" as of the first day of such quarter, by (B) four (4).

395

Grandfathered Spousal Beneficiaries are all retired employees and their spouses who are members of the Old VEBA.

After the January 1, 1999 amendment, the Retirement Plan will cover a portion of all Supplemental Program (as well as the Core Program) post-retirement benefits through the 401(h) Account. The 401(h) Account will pay for benefits that exceed the maximum threshold amounts under the Old VEBA (as amended) and the New VEBA (as described below) for any calendar quarter until funds in the 401(h) Account are exhausted.

The Company also proposes to establish the New VEBA, effective as of January 1, 1999. The New VEBA will cover all post-retirement Core Program and Supplemental Program benefits, subject to certain limits. Membership in the New VEBA is limited to active employees of the Company and retired employees who retire after March 31, 1999 who are not members of the Old VEBA. Thus, the New VEBA limits membership to those active and retired employees (and their spouses and dependents) who are ineligible for the "grandfathered" benefits under the Retirement Plan. The New VEBA excludes key employees and collectively bargained employees.

The New VEBA will not pay post-retirement benefits to the extent that they exceed a certain threshold for any calendar quarter. The threshold is determined by dividing (A) the product of $3,500 times the total number of "Current Spousal Beneficiaries" as of the first day of such quarter, by (B) four (4). Current Spousal Beneficiaries are all retired employees and their spouses who are members of the New VEBA.

If the amount in the 401(h) Account is insufficient to pay the benefits otherwise payable through the 401(h) Account, payments from the 401(h) Account will immediately cease. The Company has no obligation, before or after such payments cease, to contribute amounts to fund additional benefits or to pay any benefits directly. However, employees continue to have a claim for benefits payable by the 401(h) Account (should it have additional funds at a later time) that are not made because it has no funds.

The liabilities for all "non-grandfathered members" were transferred from the Old VEBA to the New VEBA effective as of January 1, 1999. These non-grandfathered members will receive their benefits from the New VEBA. The liabilities for members of the grandfathered group remained in the Old VEBA, and they will receive their benefits from the Old VEBA.

With the transfer of the liabilities for non-grandfathered members from the Old VEBA to the New VEBA, the Company transferred the portion of assets in the Old VEBA attributable to such members to the New VEBA. The transfer amount was an amount allocated to the New VEBA based upon the portion of the total present value of future covered medical benefits, reflecting current medical costs, attributable to members covered by the New VEBA. This actuarial present value was calculated as of December 31, 1998 using the same actuarial assumptions and projected benefits in the actuarial report for the Old VEBA (as of December 31, 1998).

Pursuant to a letter from the Company dated April 18, 2001, the Retirement Plan, the New VEBA and the Old VEBA will be amended to provide for a specific payment order of

396

welfare benefits. After the transfer of assets from the Old VEBA to the New VEBA, the order of payment of the welfare benefits will be as follows:

(1) Benefits will initially be paid from the respective VEBA's.

(2) Benefit amounts over the calendar quarter threshold described above will be paid from the 401(h) Account in the Retirement Plan.

(3) If in any calendar quarter the amount in the 401(h) Account is insufficient to pay the benefits otherwise payable, then payments from the 401(h) Account will cease. The Company has no obligation to contribute amounts to fund additional benefits from the 401(h) Account or to pay any benefits directly. However, employees continue to have a claim for benefits payable by the 401(h) Account (should it have additional funds at a later time) that are not made because it has no funds.

Issue 1 Whether the proposed Restructuring results in prohibited inurement or otherwise adversely affects the tax-exempt status of the Old VEBA or the New VEBA under Code sections 501(a) and 501(c)(9).

Law and Analysis Issue 1

Section 501(a) of the Code provides an exemption from federal income tax for organizations described in section 501(c)(9). Section 501(c)(9) describes a voluntary employees beneficiary association providing for the payment of life, sick, accident or other benefits to its members or their dependents or designated beneficiaries, if no part of net earnings inures (other than through such payments) to the benefit of any private shareholder or individual.

Section 1.501(c)(9)-4(a) of the Income Tax Regulations (the "regulations") provides that no part of the net earnings of an employees association may inure to the benefit of any private shareholder or individual other than through the payment of benefits permitted by that section.

Section 1.501(c)(9)-4(d) of the regulations provides that it will not constitute prohibited inurement if, on termination of a plan established by an employer and funded through an association described in section 501(c)(9), any assets remaining in the association, after satisfaction of all liabilities to existing beneficiaries of the plan, are applied to provide, either directly or through the purchase of insurance, life, sick, accident or other benefits pursuant to criteria that do not provide for disproportionate benefits to officers, shareholders, or highly compensated employees of the employer. Similarly, a distribution to members upon the dissolution of the association will not constitute prohibited inurement if the amount distributed to members is determined pursuant to the terms of a collective bargaining agreement or on the basis of objective and reasonable standards which do not result in either unequal payments to officers, shareholders, or highly compensated employees of an employer contributing to or otherwise funding the employees' association.

The transferred assets will be used only to provide permissible benefits to members who share an employment-related bond, pursuant to criteria that do not provide disproportionate benefits to officers, shareholders, or highly compensated employees. All liabilities of the old VEBA with respect to non-grandfathered members will be assumed by the New VEBA. In addition, the methodology described in this ruling that will be used to calculate the amount of assets to be transferred is consistent with the requirements of section 501(c)(9). Therefore, the proposed Restructuring will not result iin prohibited inurement or otherwise adversely affect the tax-exempt status of the Old VEBA or the New VEBA .

Issue 2 – Whether the post-retirement medical benefits provided by the 401(h) Account are reasonable and ascertainable. Whether the post-retirement medical benefits provided by the Old VEBA and the New VEBA are definitely determinable, if the benefits to be paid therefrom are determined under the methodology described in this request.

Law and Analysis – Issue 2

Section 401(h) of the Code permits a pension plan to provide for the payment of benefits for medical expenses of retired employees, their spouses, and their dependents, provided certain requirements are met. Section 401(h)(3) provides that the employer's contributions to such account must be reasonable and ascertainable.

Section 1.401-14(c)(1)(i) of the regulations provides that the plan must specify the medical benefits described in section 401(h) of the Code that will be available and must contain provisions for determining the amount, which will be paid. Section 1.401-14(c)(3) of the regulations provides that section 401(h) requires that amounts contributed to fund medical benefits therein described must be reasonable and ascertainable. Section 1.505(c)-1T, Q&A-4, of the regulations provides that the benefits provided by an organization described in section 501(c)(9) must be definitely determinable.

The contributions for medical benefits provided by the section 401(h) account must be reasonable and ascertainable, and the plan must contain provisions for determining the amount that will be paid. These requirements will not be satisfied unless the terms of the plan specify the amount of benefits and the time period with respect to which benefits will be paid. Where there are other potential sources of payment of medical benefits such as a welfare benefit fund or the general funds of the employer, the plan must be specific as to how the benefits payable from the sectoin 401(h) account are coordinated with benefits payable from other sources. Without such specificity, a plan participant will not be able to know the amount and timing of benefits, the plan will not contain provisions for determining the amount of medical benefits which will be paid, and the contributions with respect to medical benefits payable from the section 401(h) account are not ascertainable.

Accordingly, the plan may not allow for employer discretion in the timing and amount of benefit payments. Similarly, a section 501(c)(9) organization must not allow for employer discretion in the timing and amount of benefit payments to its members.

The 401(h) Account in the Retirement Plan provides for post-retirement medical benefits. The 401(h) Account will pay for benefits that exceed the maximum threshold amounts under the

Old VEBA (as amended) and the New VEBA for any calendar quarter until the funds in the 401(h) Account are exhausted. While benefits will not be paid if the 401(h) Account funds are exhausted and the employer is not obligated to make contributions, the employees continue to have a claim for benefits (in the event there are additional funds later) that should have been paid.

The benefit payments are based on the actual claims experience of members in the Old VEBA and the New VEBA during each calendar quarter. The Company has no control over such claims experience and precludes employer discretion in the timing and amount of benefit payments. Therefore, the post-retirement medical benefits provided by the 401(h) Account are reasonable and ascertainable.

Similarly, the Old VEBA and the New VEBA provide for post-retirement medical benefits. Benefits paid under each VEBA are determined by a formula that limits the amount paid in any calendar quarter. The limit is equal to the maximum threshold amounts provided under the Old VEBA (as amended) and the New VEBA.

The benefit payments are based on the actual claims experience of members in the Old VEBA and the New VEBA during each calendar quarter. The Company has no control over such claims experience and precludes employer discretion in the timing and amount of benefit payments. Therefore, the post-retirement benefits provided by the New VEBA and the Old VEBA are definitely determinable.

Issue 3 – Whether the aggregate funding method may be used to determine the reasonable addition to the reserves under section 419A(c)(2) of the Code calculated separately for each of the Old VEBA and the New VEBA. Whether the amount of deductions for such contributions made in accordance with section 419 will generally not be limited under section 162 by reference to the cost allocation principles described in Rev. Ruls. 69-382, 69-478 and 73-599.

Law and Analysis – Issue 3

Section 419(a) of the Code provides that contributions paid or accrued by an employer to a welfare benefit fund shall not be deductible under Chapter 1 of the Code but if they would otherwise be deductible such contributions shall (subject to the limitations of subsection (b)) be deductible under section 419 for the taxable year in which paid. Section 419(b) provides that the amount of the deduction allowable under subsection (a) for any taxable year shall not exceed the welfare benefit fund's qualified cost for the taxable year. Section 419(c) provides that the term "qualified cost" means the sum of (A) the qualified direct cost for such taxable year, and (B) subject to the limitation of section 419A(b), any addition to a qualified asset account for the taxable year, minus (C) after-tax income.

Section 419A(f)(5) of the Code provides that no account limits shall apply in the case of any qualified asset account under a separate welfare benefit fund under a collective bargaining agreement.

Section 419A(c)(2) of the Code provides that the account limit for any taxable year may include a reserve funded over the working lives of the covered employees and actuarially determined on a level basis (using assumptions that are reasonable in the aggregate) as necessary to fund: (A) post-retirement medical benefits to be provided to covered employees (determined on the basis of current medical costs), or (B) post-retirement life insurance benefits to be provided to covered employees.

Section 419A(h)(1)(A) of the Code provides that all welfare benefit funds of an employer must be treated as one fund only for the following purposes:

(i) Section 419A(c)(4) – pertaining to disability, supplemental unemployment or severance pay benefits.

(ii) Section 419A(d)(2) – pertaining to the treatment under section 415 of any amount attributable to medical benefits allocated to separate accounts for key employees.

(iii) Section 419A(e)(2) – pertaining to a limitation on the amount of life insurance benefits that may be taken into account when calculating reserves for post-retirement life insurance benefits.

Section 1.419-1T, Q&A-10(a), of the regulations states in part that contributions to a welfare benefit fund are deductible only to the extent that the requirements of section 162 of the Code are met.

Section 1.419-1T, Q&A-10(d) of the regulations provides that in determining the extent to which contributions paid or accrued with respect to a welfare benefit fund are deductible under section 419 of the Code, the rules of sections 263, 446(b), and 461(a) will be treated as having been satisfied to the extent that such contributions satisfy the otherwise applicable rules of section 419. Thus, for example, contributions to a welfare benefit fund will not fail to be deductible under section 419 merely because they create an asset with a useful life extending substantially beyond the close of the taxable year if such contributions satisfy the otherwise applicable requirements of section 419.

Section 1.419-1T, Q&A-10(e) of the regulations provides that in determining the extent to which contributions with respect to a welfare benefit fund satisfy the requirements of section 461(h) of the Code for any taxable year for which section 461(h) is effective, pursuant to the authority under section 461(h)(2), economic performance occurs as contributions to the welfare benefit fund are made.

Revenue Ruling 69-382, 1969-2 C.B. 28, Revenue Ruling 69-478, 1969-2 C.B. 29, and Revenue Ruling 73-599, 1973-2 C.B. 40, held, in effect, that employer contributions to a reserve for post-retirement benefits were deductible under section 162 of the Code if (1) the reserve was held for the sole purpose of providing benefits to covered employees; (2) the employer had no contractual right to recapture any part of the reserve as long as any active or retired employee remains alive; and (3) the contribution did not exceed the amount necessary to fairly allocate the cost of post-retirement benefits over the working lives of covered employees.

Section 419 of the Code limits the deduction that may be taken for contributions to a welfare benefit fund to the qualified cost for the year. One element of the qualified cost is the amount that may be added to the qualified asset account of the fund to the extent the limits of section 419A are not exceeded. In general, in order for an amount to be deductible under section 419, the rules of sections 162 and 263 (among other requirements) must be satisfied. Therefore, the addition to a qualified asset account would be required to satisfy the requirements of sections 162 and 263.

The three enumerated revenue rulings are concerned with the amount of deduction that meets the requirements of section 162 of the Code, but do not necessarily provide the exclusive rule as to whether an amount satisfies the requirements of section 162. Section 263 is also concerned with the amount of the deduction allowable for a year. Section 1.419-1T, Q&A-10(d) of the regulations provides, however, that section 263 will be treated as having been satisfied to the extent that the contributions to a welfare benefit fund satisfy the otherwise applicable rules of section 419. Thus, if the amount of contribution to a welfare benefit fund does not exceed the limits of section 419, the deduction of such amount is not limited by section 263. While section 1.419-1T, Q&A 10(d) does not specifically cite section 162, the Service takes the position that, if the amount of the contribution satisfies the requirements of section 419, the deduction of such amount is generally not limited by section 162.

Note, however, that if the contribution is such that the assets exceed the amount needed to provide post-retirement benefits to all current and future retirees (from current active employees) (i.e., the present value of future benefits), then the contribution would fail to satisfy the requirements of section162 of the Code.

Neither VEBA provides post-retirement life insurance benefits. Nor does either VEBA provide disability, supplemental unemployment or severance pay benefits. Also, key employees are ineligible to receive benefits from either VEBA.

The proposed method to fund the additional reserve for post-retirement medical benefits is the aggregate funding method as described below. Under this method, the annual contribution level is computed in the aggregate as the annual cost per participant multiplied by the number of the participants who are currently employed by the Company. The annual cost per participant is (A) the present value of future medical benefits, based on current medical costs, for both current retirees and current active employees less adjusted assets divided by (B) the sum of the present value of an annuity of $1 per year payable from the attained age to retirement age for each active member.

The method described above determines the amount needed to fund future post-retirement medical benefits for both current retirees and active employees covered by each VEBA on a level dollar amount per covered active employee. The amount so determined is recalculated annually to take into account the experience of each VEBA and any new entrants into the employee groups covered by each VEBA. If all of the actuarial assumptions used in the calculation were exactly realized, the covered group of employees did not change, and the Company contributed the calculated amount each year per active employee, the amount needed to provide the post-retirement medical benefits would not change from year to year. The method of determining the annual amount (i.e., the normal cost under the method)

401

effectively spreads the unfunded future estimated cost for current retirees and current active employees covered by the VEBA over the remaining working lifetimes of the current active employees covered by the VEBA. The method, therefore, determines the annual amount needed to provide the post-retirement medical benefits as a level amount over the working lives of the covered employees and can be used to determine the reasonable addition to the reserve under section 419A(c)(2) of the Code.

Section 1.419-1T, Q&A-10 of the regulations provides that employer contributions to a welfare benefit fund are deductible only to the extent that the requirements of sections 162 and 263 of the Code are met. As described above, Rev. Ruls. 69-382, 69-478 and 73-599 relate to the deductibility under sections 162 and 263 of employer contributions to welfare benefit funds.

The Company has stated that the determination of the maximum contributions for each VEBA, consistent with sections 419 and 419A of the Code, will be made taking into account the amount of assets under each VEBA, respectively. Thus, if the amount of the contribution satisfies the requirements of section 419, the deduction of such amount is generally not limited by section 162. If the contribution were such that the assets exceed the present value of future benefits, then the contribution would fail to satisfy the requirements of section 162.

The method of determining the annual amount (i.e., the normal cost under the aggregate method) effectively spreads the unfunded future estimated cost for current retirees and current active employees covered by the VEBA over the remaining working lifetimes of the current active employees covered by the VEBA. The method, therefore, determines the annual amount needed to provide the post-retirement medical benefits as a level amount over the working lives of the covered employees and can be used to determine the reasonable addition to the reserve under section 419A(c)(2) of the Code.

Except as specifically ruled above, no opinion is expressed as to the federal tax consequences of the contributions to the Old VEBA and to the New VEBA under any other provision of the Code. Specifically, no opinion is expressed regarding whether part or all of the contributions to the Old VEBA and the New VEBA must be capitalized or included in inventory costs because they are allocable to the cost of property produced by the taxpayer to which section 263A applies.

Issue 4 - Whether the Restructuring constitutes a reversion to the Company, resulting in an excise tax payable under section 4976 of the Code.

Law and Analysis Issue 4

Section 4976 of the Code generally provides that any portion of a welfare benefit fund (including a VEBA) reverting to the benefit of the employer is a disqualified benefit and will be subject to a 100% excise tax.

The Company will have no right to receive any funds that are transferred from the Old VEBA to the New VEBA. All of the assets held by the Old VEBA and the New VEBA will be used for the exclusive purpose of providing welfare benefits (and paying related expenses) to the Company's retired employees, spouses and eligible dependents in accordance with the underlying welfare benefit plans. Therefore, there is no reversion for excise tax purposes.

<u>Issue 5</u> – Whether the Restructuring will result in the realization or recognition of gross income or loss of prior tax deductions, by the Company (or its subsidiaries) for any years.

<u>Law and Analysis – Issue 5</u>

Section 1001(a) of the Code provides, in part, that the gain from the sale or other disposition of property shall be the excess of the amount realized therefrom over the adjusted basis provided in Code section 1011 for determining gain. Section 1001(b) generally provides that the amount realized from the sale or other disposition of property shall be the sum of any money received plus the fair market value of the property (other than money) received. Under section 1001(c), except as otherwise provided in subtitle A of the Code, the entire amount of the gain or loss, determined under section 1001 on the sale or exchange of property shall be recognized.

Section 111(a) of the Code provides that gross income does not include income attributable to the recovery during the taxable year of any amount deducted in any prior taxable year to the extent such amount did not reduce the amount of tax imposed by this chapter. This section, in part, codifies the "tax benefit" rule.

In <u>Hillsboro National Bank v. Commissioner</u>, 460 U.S. 370 (1983), the Supreme Court held that income may arise under the tax benefit rule even though there is no actual recovery of funds that were previously deducted. All that is required is that an event occur in the current year that is "fundamentally inconsistent" with the premise on which the deduction was taken in a prior year.

Section 1.501(c)(9)-4 of the regulations provides that whether prohibited inurement has occurred is a question be determined with regard to all the facts and circumstances. For example, paragraph (d) provides that prohibited inurement will arise upon the termination or dissolution of a VEBA if all existing liabilities of the organization are not satisfied, to the extent of any remaining assets. It further provides that if the trust document or charter provides for the reversion of assets to the employer on dissolution or if the reversion is permitted through operation of law, the trust or organization is not described in section 501(c)(9) of the Code.

Company will not recognize income under the tax benefit rule due to the transfer of assets from the Old VEBA to the New VEBA. Contributions to the Old VEBA and the New VEBA are deductible under sections 419 and 419A of the Code (or their predecessor, if applicable). Additionally, the governing instruments of the Old VEBA and the New VEBA prohibit amounts from reverting to the benefit Company as required by section 1.501(c)(9)-4 of the regulations. Both VEBAs provide postretirement medical

403

benefits. The transfer of funds from the Old VEBA to the New VEBA as part of the Restructuring is not fundamentally inconsistent with the premise on which Company deducted amounts contributed to the Old VEBA. Thus, Company will not recognize income under the tax benefit rule on the transfer of assets from the Old VEBA to the New VEBA due to the Restructuring.

Conclusions

Based on the above, we rule as follows:

Issue 1: The proposed Restructuring will not result iin prohibited inurement or otherwise adversely affect the tax-exempt status of the Old VEBA or the New VEBA .

Issue 2: The benefit payments are based on the actual claims experience of members in the Old VEBA and the New VEBA during each calendar quarter. The Company has no control over such claims experience and precludes employer discretion in the timing and amount of benefit payments. Therefore, the post-retirement benefits provided by the New VEBA and the Old VEBA are definitely determinable.

Issue 3: The method of determining the annual amount (i.e., the normal cost under the aggregate method) effectively spreads the unfunded future estimated cost for current retirees and current active employees covered by the VEBA over the remaining working lifetimes of the current active employees covered by the VEBA. The aggregate method, therefore, determines the annual amount needed to provide the post-retirement medical benefits as a level amount over the working lives of the covered employees and can be used to determine the reasonable addition to the reserve under section 419A(c)(2) of the Code.

Issue 4: All of the assets held by the Old VEBA and the New VEBA will be used for the exclusive purpose of providing welfare benefits (and paying related expenses) to the Company's retired employees, spouses and eligible dependents in accordance with the underlying welfare benefit plans. Therefore, there is no reversion under Code section 4976.

Issue 5: The restructuring will not result in the realization or recognition of gross income, or loss of prior tax deductions, by the company (or its subsidiaries) for any year.

This ruling is being given with the understanding that the proposed trust agreements (along with proposed amendments), as provided to us, are adopted, and that the proposed amendments to the pension plan are adopted. Failure to adopt either the proposed trusts or the proposed amendments to the pension plan as stated would cause the retroactive revocation of this ruling letter. Furthermore, if either trust is later amended (or, if the pension plan provisions relating to the 401(h) Account are amended), for example, to provide for benefits payable under additional plans of the Company, the Company may not rely upon this ruling letter. In addition, if the representations made pursuant to this request are not accurate, the Company may not rely upon this ruling letter.

This private letter ruling is directed only to the organization that requested it. Section

404

6110(k)(3) of the Internal Revenue Code provides that it may not be used or cited by others as precedent.

If you have any questions about this ruling, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely,

Robert C. Harper, Jr.

Robert C. Harper, Jr.
Manager, Exempt Organizations
Technical Group 3

405