Internal Revenue Service P.O. Box 12192 Covington, KY 41012-0192

Re: Connecticut Creditor Bar Association, Inc. application for tax-exempt status

To Whom It May Concern:

As President of the Connecticut Creditor Bar Association, Inc. I have attached our complete Form 1024 application and our complete Form 8718.

Please let me know if I may further assist in any regard and thank you for your assistance with this matter.

Very truly yours

Adam J. Olshan (phone: 860-528-9991 x339)

President, Connecticut Creditor Bar Association, Inc.

1127 High Ridge Road #165

Stamford, CT 06905

Form 1024

(Rev. September 1998) Department of the Treasury Internal Revenue Service

Application for Recognition of Exemption Under Section 501(a)

OMB No. 1545-0057

If exempt status is approved, this application will be open for public inspection.

Read the instructions for each Part carefully. A User Fee must be attached to this application.

If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to the organization.

Complete the Procedural Checklist on page 6 of the instructions. Part I. Identification of Applicant (Must be completed by all applicants; also complete appropriate schedule.) Submit only the schedule that applies to your organization. Do not submit blank schedules. Check the appropriate box below to indicate the section under which the organization is applying: Section 501(c)(2)—Title holding corporations (Schedule A, page 7) Section 501(c)(4)—Civic leagues, social welfare organizations (including certain war veterans' organizations), or local associations of employees (Schedule B, page 8) Section 501(c)(5)—Labor, agricultural, or horticultural organizations (Schedule C, page 9) Section 501(c)(6)—Business leagues, chambers of commerce, etc. (Schedule C, page 9) Section 501(c)(7)—Social clubs (Schedule D, page 11) Section 501(c)(8)—Fraternal beneficiary societies, etc., providing life, sick, accident, or other benefits to members (Schedule E, page 13) Section 501(c)(9)—Voluntary employees' beneficiary associations (Parts I through IV and Schedule F, page 14) Section 501(c)(10)—Domestic fraternal societies, orders, etc., not providing life, sick, accident, or other benefits (Schedule E, page 13) Section 501(c)(12)—Benevolent life insurance associations, mutual ditch or irrigation companies, mutual or cooperative telephone companies, or like organizations (Schedule G, page 15) Section 501(c)(13)—Cemeteries, crematoria, and like corporations (Schedule H, page 16) Section 501(c)(15)—Mutual insurance companies or associations, other than life or marine (Schedule I, page 17) Section 501(c)(17)—Trusts providing for the payment of supplemental unemployment compensation benefits (Parts I through IV and Schedule J, page 18) Section 501(c)(19)—A post, organization, auxiliary unit, etc., of past or present members of the Armed Forces of the United States (Schedule K, page 19) Section 501(c)(25)—Title holding corporations or trusts (Schedule A, page 7) 2 Employer identification number (EIN) (if Full name of organization (as shown in organizing document) none, see Specific Instructions on page 2) Connecticut Creditor Bar Association, Inc. 27-2490738 Name and telephone number of person to be 1b c/o Name (if applicable) contacted if additional information is needed Room/Suite Address (number and street) Adam J. Olshan 1127 High Ridge Rd #165 City, town or post office, state, and ZIP + 4 If you have a foreign address, see Specific Instructions for Part I, page 2. Stamford, CT 06905 860) 528-9991 Date incorporated or formed Month the annual accounting period ends Web site address December, 2010 4/19/10 n/a ☑ No Did the organization previously apply for recognition of exemption under this Code section or under any other section of the Code? ☐ Yes If "Yes," attach an explanation. **V** No Has the organization filed Federal income tax returns or exempt organization information returns? If "Yes," state the form numbers, years filed, and Internal Revenue office where filed. Check the box for the type of organization. ATTACH A CONFORMED COPY OF THE CORRESPONDING ORGANIZING DOCUMENTS TO THE APPLICATION BEFORE MAILING. Corporation— Attach a copy of the Articles of Incorporation (including amendments and restatements) showing approval by the appropriate state official; also attach a copy of the bylaws. Attach a copy of the Trust Indenture or Agreement, including all appropriate signatures and dates. ☐ Trust— Attach a copy of the Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or Association other evidence that the organization was formed by adoption of the document by more than one person. Also include a copy of the bylaws. If this is a corporation or an unincorporated association that has not yet adopted bylaws, check here . I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization, and that I have examined this application including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete. **PLEASE** Adam J. Olshan - President SIGN

(Signature)

HERE

(Type or print name and title or authority of signer)

Part II. Activities and Operational Information (Must be completed by all applicants)

Provide a detailed narrative description of all the activities of the organization—past, present, and planned. Do not merely refer to or repeat the language in the organizational document. List each activity separately in the order of importance based on the relative time and the following: (a) a detailed description of the activity including its purpose and how each activity furthers your exempt purpose; (b) when the activity was or will be initiated; and (c) where and by whom the activity will be conducted.

The Connecticut Creditor Bar Association, Inc. is a trade association comprised or members who seek to improve local business conditions in the State of Connecticut. All members have an interest in ensuring that Connecticut laws/regulations, and judicial department policies/rules, are knowledge-based and fair and that Connecticut creditors are provided with fair access to the local court system to assist with the debt collection process. All members also are interested in ensuring that Connecticut collection attorney practitioners are well informed and that they act professionally in their dealings with the courts and the public. Our association will strive to ensure that these goals are realized. We have four primary strategies to achieve these goals:

- 1. Education Board member Renee Cannella will work with members to develop educational programs to promote improved business methods and heightened professionalism. Overall educational opportunities further the goal of the group by circulating the name of the group, showing the scholarship and professionalism of the group and its members and improving the quality of the membership through education. In the future we plan on putting on Continuing Legal Education (CLE) seminars specifically in the area of collection law. These continuing legal eduction seminars will be for the purpose of educating our members as well as the general bar of the State of Connecticut. These CLE seminars can also be used to raise money for the group by charging an attendance fee. These seminars would be put on by the members of the group.
- 2. Public Affairs Board member Mark Sank will work with members to promote the industry by making sure that our voice is heard in the area of collection law. This will further our goal by providing a united group of professionals with focus. This improves the view of the industry by showing focus and professionalism. Primarily, there is a three pronged approach to achieving this.
 - a. We will issue a press release to let the news outlets know of our formation.
- b. We will give notice to the State Bar Association of our formation and hopefully work to develop a loose association with them.
- c. We will meet with legislators to make sure they are aware of our group and our position on matters. All of these approaches further our goal by working to make sure that our voice is heard when there are issues that arise regarding collections in the State of Connecticut.
- d. We will present financial literacy programs to local high school students to assist young people to better understand credit and collection issues at an important point in their lives.
- 3. Judicial Affairs Board member Karen Lahey has led an effort whereby members work toward development of improved court rules that will improve the business conditions for collection law firms and our clients. This effort will also include meetings with judicial department leadership to improve business conditions through vastly improved communication.
- 4. Legislative Affairs Board member Russell London has developed a strategy whereby our members will endeavor to communicate with their legislators toward the enactment of laws to advance the common business interests of our organization's members. To make changes in the law we plan on engaging a lobbyist and/or meeting with members of the legislature. We are currently forming ideas for the drafting of bills.
- 2 List the organization's present and future sources of financial support, beginning with the largest source first.
 - 1. Membership annual dues
 - 2. Educational programs for the public

Part II	I.	Activities	and	Operational	Information	(continued)
				- t		rconuniuem

3	Give the following information about the organization's governing body:

a Names, addresses, and titles of officers, directors, trustees, etc.	b Annual compensation
Adam Olshan, President, 510 Tolland Street, East Hartford, CT 06108 Russell London, Vice President, 48 Christian Lane, Newington, CT 06111 Karen Lahey, Vice President, 76 Center St, Waterbury, CT 06702 Renee Cannella, Treasurer, 1127 High Ridge Road, Stamford, CT 06905 Mark Sank, Secretary, 666 Glenbrook Rd, Stamford, CT 06906	None None None None

4 If the organization is the outgrowth or continuation of any form of predecessor, state the name of each predecessor, the period during which it was in existence, and the reasons for its termination. Submit copies of all papers by which any transfer of assets was effected.
None

5 If the applicant organization is now, or plans to be, connected in any way with any other organization, describe the other organization and explain the relationship (e.g., financial support on a continuing basis; shared facilities or employees; same officers, directors, or trustees).
None

If the organization has capital stock issued and outstanding, state: (1) class or classes of the stock; (2) number and par value of the strument authorizes dividend payments on any class of capital stock.

No stock was or will be issued.

7 State the qualifications necessary for membership in the organization; the classes of membership (with the number of members in each class); and the voting rights and privileges received. If any group or class of persons is required to join, describe the requirement and explain the relationship between those members and members who join voluntarily. Submit copies of any membership solicitation material.
Attach sample copies of all types of membership certificates issued.

Please see attached membership application which defines the association's full membership (with voting rights) classification and the associate member (no voting rights) classifications.

8 Explain how your organization's assets will be distributed on dissolution.

All dues will be refunded to the parties who made the donations. Any fees generated from outside sources (such as CLE) will be donated to one or more exempt purposes in the legal field. Any assets not disposed of will be disposed of by a court of competent jurisdiction in the county in which the principal office of the corporation is located.

9	Has the organization made or does it plan to make any distribution of its property or surplus funds to shareholders or	
	members?	☐ Yes ☑ No
10	Does, or will, any part of your organization's receipts represent payments for services performed or to be performed?. If "Yes," state in detail the amount received and the character of the services performed or to be performed. We will use receipts to cover costs associated with professional services such as accountants or lobing payments have been made to date.	
11	Has the organization made, or does it plan to make, any payments to members or shareholders for services performed or to be performed?	☐ Yes ☑ No
12	Does the organization have any arrangement to provide insurance for members, their dependents, or others (including provisions for the payment of sick or death benefits, pensions, or annuities)?	☐ Yes 🗹 No
3	Is the organization under the supervisory jurisdiction of any public regulatory body, such as a social welfare agency, etc.?	☐ Yes ☑ No
4	Does the organization now loose or does it also to be	Yes 🗹 No
	Has the organization spent or does it plan to spend any money attempting to influence the selection, nomination, election, or appointment of any person to any Federal, state, or local public office or to an office in a political organization? [If "Yes," explain in detail and list the amounts spent or to be spent in each case.	_ Yes ☑ No
3	Does the organization publish pamphlets, brochures, newsletters, journals, or similar printed material? [

Part III. Financial Data (Must be completed by all applicants)

Complete the financial statements for the current year and for each of the 3 years immediately before it. If in existence less than 4 years, complete the statements for each year in existence. If in existence less than 1 year, also provide proposed budgets for the 2 years following the current year.

	A. Staten	nent of Reve	nue an	a Exper	<u> 15es </u>		
		(a) Current Tax Ye	ar 3 Prio	r Tax Years	s or Proposed Budge	et for Next 2 Years	
	Revenue	From 4/2010)				
		To 12/2010		1 - 12/11	(c) 1/12-12/12	. (d)	(e) Total
1	Gross dues and assessments of members	\$6,750.0		7,500.00	\$8,750.00		\$23,000.00
2		\$0.0		\$0.00			0
	Gross contributions, gifts, etc		_		73.53		
3	Gross amounts derived from activities related to						
	the organization's exempt purpose (attach	\$0.0	ols:	1,000.00	\$1,000.00	1	\$2000.00
_	schedule) (Include related cost of sales on line 9.)		0	0	0		0
4	Gross amounts from unrelated business activities (attach schedule)				- 0		
5	Gain from sale of assets, excluding inventory items (attach schedule)		0	0	0		0
6	Investment income (see page 3 of the instructions)		0	0	0		0
7	Other revenue (attach schedule)		0	0	<u> </u>		0
8	Total revenue (add lines 1 through 7)	\$6,750.0	0 \$8,	5000.00	\$9,750.00		\$25,000
	Expenses						
9	Expenses attributable to activities related to the						
٠	organization's exempt purposes	\$1,500.0	0 \$	7,000.00	\$8,000.00		\$16,500.00
10	Expenses attributable to unrelated business activities		0	0	0		0
	Contributions, gifts, grants, and similar amounts						
11	paid (attach schedule).	:	o	0	l 0		0
42			<u> </u>	0	0		0
12	Disbursements to or for the benefit of members (attach schedule)		0	0	0		0
13	Compensation of officers, directors, and trustees (attach schedule)		0	0	0		0
14	Other salaries and wages	···-	0	0	0	 	0
15	Interest			0	0		0
16	Occupancy		0	0	0		0
17	Depreciation and depletion		0	0	0		- 0
18	Other expenses (attach schedule)		<u></u>				
19	Total expenses (add lines 9 through 18)	\$1,500.0	J 3.	7,000.00	\$8,000.00	 	\$16,500.00
20	Excess of revenue over expenses (line 8 minus line 19)	\$5,250.0) \$ ⁻	1,500.00	\$1,750.00		\$8,500.00
	B. Balance Sh	eet (at the e	nd of th	e perio	d shown)		
		Acceto					urrent Tax Year s of 11/2/10
_		Assets				1	
1	Cash					2	
2	Accounts receivable, net						
3	Inventories					3	
4	Bonds and notes receivable (attach schedule)					4	
5	Corporate stocks (attach schedule)					5	0
6	Mortgage loans (attach schedule)						0
7	Other investments (attach schedule)						
8	Depreciable and depletable assets (attach schedule)						
9	Land					9	-
10	Other assets (attach schedule)	<i>.</i>				10	
11	Total assets					11	\$5,709.25
		iabilities					
12	Accounts payable					12	. 0
13	Contributions, gifts, grants, etc., payable						0
14	Mortgages and notes payable (attach schedule)					l l	0
15	Other liabilities (attach schedule)						0
						· · · 	
17						17	\$5,709.25
	Total liabilities and fund balances or net asset	s (add line 16 a	 nd line 17			19	
16 17 18	Total liabilities	ances or Net	Assets and line 17	ancial act			\$5,709.25 \$5,709.25 shown above,

1	Section 501(c)(9) and 501(c)(17) organizations:		
	Are you filing Form 1024 within 15 months from the end of the month in which the organization was created or formed as required by section 505(c)?	□ Ves	□ No
	If "Yes," skip the rest of this Part.		
	If "No," answer question 2.		
2	If you answer "No" to question 1, are you filing Form 1024 within 27 months from the end of the month in which the organization was created or formed?	☐ Yes	□ No
	If "Yes," your organization qualifies under Regulation section 301.9100-2 for an automatic 12-month extension of the 15-month filing requirement. Do not answer questions 3 and 4.		
	If "No," answer question 3.		
3	If you answer "No" to question 2, does the organization wish to request an extension of time to apply under the "reasonable action and good faith" and the "no prejudice to the interest of the government" requirements of Regulations section 301.9100-3?	☐ Yes	□ No
	If "Yes," give the reasons for not filing this application within the 27-month period described in question 2. See Specific Instructions, Part IV, Line 3, page 4, before completing this item. Do not answer question 4.		
	If "No," answer question 4.		
4	If you answer "No" to question 3, your organization's qualification as a section 501(c)(9) or 501(c)(17) organization can be recognized only from the date this application is filed. Therefore, does the organization want us to consider its application as a request for recognition of exemption as a section 501(c)(9) or 501(c)(17) organization from the date the application is received and not retroactively to the date the organization was created or formed?		

Organizations described in section 501(c)(2) or 501(c)(25) (Title holding corporations or trusts) Schedule A

1	State the complete name, address, and EIN of each organization for which title to property is held and the number and type of the applicant organization's stock held by each organization.					
2	If the annual excess of revenue over expenses has not been or will not be turned over to the organization for which title to property is held, state the purpose for which the excess is or will be retained by the title holding organization.					
3	In the case of a corporation described in section 501(c)(2), state the purpose of the organization for which title to property is held (as shown in its governing instrument) and the Code sections under which it is classified as exempt from tax. If the organization has received a determination or ruling letter recognizing it as exempt from taxation, please attach a copy of the letter.					
	¥.					
4	In the case of a corporation or trust described in section 501(c)(25), state the basis whereby each shareholder is described in section 501(c)(25)(C). For each organization described that has received a determination or ruling letter recognizing that organization as exempt from taxation, please attach a copy of the letter.					
	With represent to the activities of the accession time.					
5	With respect to the activities of the organization. a Is any rent received attributable to personal property leased with real property?					
	b Will the organization receive income which is incidentally derived from the holding of real property, such as income from operation of a parking lot or from vending machines?					
	c Will the organization receive income other than rent from real property or personal property leased with real property or income which is incidentally derived from the holding of real property?					
	Instructions					
hic	1.—Provide the requested information on each organization for the applicant organization holds title to property. Also indicate umber and types of shares of the applicant organization's stock that describes the organization (as shown in its IRS determination letter). Line 4.—Indicate if the shareholder is one of the following:					

that are held by each.

Line 2.—For purposes of this question, "excess of revenue over expenses" is all of the organization's income for a particular tax year less operating expenses.

Line 3.—Give the exempt purpose of each organization that is the basis for its exempt status and the Internal Revenue Code section

- 1. A qualified pension, profit-sharing, or stock bonus plan that meets the requirements of the Code;
 - 2. A government plan;
 - 3. An organization described in section 501(c)(3); or
 - 4. An organization described in section 501(c)(25).

	n 1024 (Rev. 9-9			Page
Sc	thedule B	Organizations Described in Section 501(c)(4) (Civic leagues, social welfare orga (including posts, councils, etc., of veterans' organizations not qualifying or apprexemption under section 501(c)(19)) or local associations of employees.)	nizatio	ns or
1	later revoked on propagan	nal Revenue Service previously issued a ruling or determination letter recognizing the applicant organization ecessor organization listed in question 4, Part II of the application) to be exempt under section 501(c)(3) and that recognition of exemption on the basis that the applicant organization (or its predecessor) was carrying da or otherwise attempting to influence legislation or on the basis that it engaged in political activity? cate the earliest tax year for which recognition of exemption under section 501(c)(3) was revoked and the ffice that issued the revocation.	☐ Yes	s 🗌 N
2	the common a	anization perform or plan to perform (for members, shareholders, or others) services, such as maintaining areas of a condominium; buying food or other items on a cooperative basis; or providing recreational facilities tion services, job placement, or other similar undertakings?	☐ Yes	
	or the perient	ain the activities in detail, including income realized and expenses incurred. Also, explain in detail the nature to the general public from these activities. (If the answer to this question is explained in Part II of the pages 2, 3, and 4), enter the page and item number here.)		
3	If the organize	otion is claiming exemption as a house with a second secon		
•	or maintains r	ation is claiming exemption as a homeowners' association, is access to any property or facilities it owns restricted in any way?	☐ Yes	☐ No
	If "Yes," expla	ain.		

If the organization is claiming exemption as a local association of employees, state the name and address of each employer whose employees are eligible for membership in the association. If employees of more than one plant or office of the same employer are eligible for membership, give the address of each plant or office.

Page	(

Sc	hedule C	Organizations described in section 501(c)(5) (Labor, agricultural, including fishermen's organizations, or horticultural organizations) or section 501(c)(6) (business leagues, chambers of commerce, etc.)
1	Describe an contained in	y services the organization performs for members or others. (If the description of the services is Part II of the application, enter the page and item number here.)
	Please se	e page 2, Item #1
2	Fishermen's	organizations only.—What kinds of aquatic resources (not including mineral) are cultivated or harvested gible for membership in the organization?
3	Labor organ	izations only.—Is the organization organized under the terms of a collective bargaining agreement?
	If "Yes," att	ach a copy of the latest agreement.

2	Chedule D Organizations described in section 501(c)(7) (Social clubs)		
1	Has the organization entered or does it plan to enter into any contract or agreement for the management or operation of its property and/or activities, such as restaurants, pro shops, lodges, etc.?	☐ Yes	No
	If "Yes," attach a copy of the contract or agreement. If one has not yet been drawn up, please explain the organization's plans.		
2	Does the organization seek or plan to seek public patronage of its facilities or activities by advertisement or otherwise? If "Yes," attach sample copies of the advertisements or other requests. If the organization plans to seek public patronage, please explain the plans.	☐ Yes	No
3a	Are nonmembers, other than guests of members, permitted or will they be permitted to use the club facilities or participate in or attend any functions or activities conducted by the organization?	☐ Yes	 No
b d	State the amount of nonmember income included in Part III of the application, lines 3 and 4, column (a) Enter the percent of gross receipts from nonmembers for the use of club facilities		 <u>%</u> %
4a	Does the organization's charter, bylaws, other governing instrument, or any written policy statement of the organization contain any provision that provides for discrimination against any person on the basis of race, color, or religion?	Yes	 /° lo
b	If "Yes," state whether or not its provision will be kept.		
c	If the organization has such a provision that will be reposled deleted as all the control of the organization has such a provision that will be reposled deleted as all the control of the organization has such a provision that will be reposled deleted as all the control of the organization has such a provision that will be reposled deleted as all the control of the organization has such a provision that will be reposled deleted as all the control of the organization has such as provision that will be reposled deleted as a little organization has such a provision that will be reposled deleted as a little organization has such a provision that will be reposled deleted as a little organization or the organization of the		
	If the organization has such a provision that will be repealed, deleted, or otherwise stricken from its requirements, state when this will be done.		
d e	If the organization formerly had such a requirement and it no longer applies, give the date it ceased to apply		 _
-	If the organization restricts its membership to members of a particular religion, check here and attach the explanation specified in the instructions	7	

Line 1.—Answer "Yes," if any of the organization's property or activities will be managed by another organization or company.

Lines 3b, c, and d.—Enter the figures for the current year. On an attached schedule, furnish the same information for each of the prior tax years for which you completed Part III of the application.

Line 4e.—If the organization restricts its membership to members of a particular religion, the organization must be:

1. An auxiliary of a fraternal beneficiary society that:

- a. Is described in section 501(c)(8) and exempt from tax under section 501(a), and
- $\boldsymbol{b}.$ Limits its membership to members of a particular religion; or
- **2.** A club that, in good faith, limits its membership to the members of a particular religion in order to further the teachings or principles of that religion and not to exclude individuals of a particular race or color.

If you checked **4e**, your explanation must show how the organization meets one of these two requirements.

Schedule E		Organizations described in section 501(c)(8) or 501(c)(10) (Fraternal societies associations)	, orders, o	or
1	Is the organiz	zation a college fraternity or sorority, or chapter of a college fraternity or sorority?	☐ Yes	□ No
2	If "No," does	or will it operate for the exclusive benefit of the members of an organization operating under the lodge	☐ Yes	☐ No
	system? .	· · · · · · · · · · · · · · · · · · ·	Yes	☐ No
3	ir "yes," attac	ration a subordinate or local lodge, etc.?	☐ Yes	□ No
4	ir "yes," attac	ation a parent or grand lodge?	☐ Yes	□ No

Line 1.—To the extent that they qualify for exemption from Federal income tax, college fraternities and sororities generally qualify as organizations described in section 501(c)(7). Therefore, if the organization is a college fraternity or sorority, refer to the discussion of section 501(c)(7) organizations in Pub. 557. If section 501(c)(7) appears to apply to your organization, complete Schedule D instead of this schedule.

Line 2.—Operating under the lodge system means carrying on activities under a form of organization that is composed of local branches, chartered by a parent organization, largely self-governing, and called lodges, chapters, or the like.

		Page
Sc	chedule F Organizations described in section 501(c)(9) (Voluntary employees' beneficiary	associations)
1	Describe the benefits available to members. Include copies of any plan documents that describe such benefits and the terms and conditions of eligibility for each benefit.	
2	Are any employees or classes of employees entitled to benefits to which other employees or classes of employees are not entitled?	☐ Yes ☐ No
3	Give the following information for each plan as of the last day of the most recent plan year and enter that date here. If there is more than one plan, attach a separate schedule	/ / (mo.) (day) (yr.)
а	Total number of persons covered by the plan who are highly compensated individuals (See instructions below.)	3, 0,
b	Number of other employees covered by the plan.	
C	Number of employees not covered by the plan	
d	Total number employed*	
	* Should equal the total of a, b, and c —if not, explain any difference. Describe the eligibility requirements that prevent those employees not covered by the plan from participating.	
4	State the number of persons, if any, other than employees and their dependents (e.g., the proprietor of a business whose employees are members of the association) who are entitled to receive benefits	

Line 3a.—A "highly compensated individual" is one who:

- (a) Owned 5% or more of the employer at any time during the current year or the preceding year.
- **(b)** Received more than \$80,000 (adjusted for inflation) in compensation from the employer for the preceding year, and
- (c) Was among the top 20% of employees by compensation for the preceding year. However, the employer can choose not to have (c) apply.

	hedule G Organizations described in section 501(c)(12) (Benevolent life insurance associations, mutual ditch or irrigation companies, mutual or cooperative telephone companies, or like organizations)
1 a b	Attach a schedule in columnar form for each tax year for which the organization is claiming exempt status. On each schedule: Show the total gross income received from members or shareholders. List, by source, the total amounts of gross income received from other sources.
2 a	If the organization is claiming exemption as a local benevolent insurance association, state: The counties from which members are accepted or will be accepted.
b	Whether stipulated premiums are or will be charged in advance, or whether losses are or will be paid solely through assessments.
3	If the organization is claiming exemption as a "like organization," explain how it is similar to a mutual ditch or irrigation company, or a mutual or cooperative telephone company.
	Are the rights and interests of members in the organization's annual savings determined in proportion to their business with it?
5	If the organization is a mutual or cooperative telephone company and has contracts with other systems for long-distance telephone services, attach copies of the contracts.

Mutual or cooperative electric or telephone companies should show income received from qualified pole rentals separately. Mutual or cooperative telephone companies should also show separately the gross amount of income received from nonmember telephone companies for performing services that

involve their members and the gross amount of income received from the sale of display advertising in a directory furnished to their members.

Do not net amounts due or paid to other sources against amounts due or received from those sources.

Page	16

_	1 (U24 (Rev. 9-98)	Page	
Sc	hedule H Organizations described in section 501(c)(13) (Cemeteries, crematoria, and like cor	poration	15)
1	Attach the following documents:		
а	Complete copy of sales contracts or other documents, including any "debt" certificates, involved in acquiring cemetery or crematorium property.		
b	Complete copy of any contract your organization has that designates an agent to sell its cemetery lots.		
С			
2	Does your organization have, or does it plan to have, a perpetual care fund?	Yes	No
3	If your organization is claiming exemption as a perpetual care fund for an organization described in section 501(c)(13), has the cemetery organization, for which funds are held, established exemption under that section?	Yes 🗌	

Schedule I Organizations described in section 501(c)(15) (Small insurance companies or associations)

1	Is the organization a member of a controlled group of corporations as defined in section 831(b)(2)(B)(ii)? (Disregard section 1563(b)(2)(B) in determining whether the organization is a member of a controlled group.)				Yes 🗌 No	
	If "Yes," include on lines 2 through 5 the total amount received by the organization and all other members of the controlled group.					
	If "No," include on lines 2 through 5 only the amounts that relate to th	e applicant organization.				
(a) Current Year 3 Prior Tax Years				rs		
		From To	(b)	(c)	(d)	
2	Direct written premiums					
3	Reinsurance assumed				 	
4	Reinsurance ceded					
5	Net written premiums ((line 2 plus line 3) minus line 4)				 	
6	If you entered an amount on line 3 or line 4, attach a copy of the reinsurance agreements the organization has entered into.				<u> </u>	

Instructions

Line 1.—Answer "Yes," if the organization would be considered a member of a controlled group of corporations if it were not exempt from tax under section 501(a). In applying section 1563(a), use a "more than 50%" stock ownership test to determine whether the applicant or any other corporation is a member of a controlled group.

Line 2.— In addition to other direct written premiums, include on line 2 the full amount of any prepaid or advance premium in the year the prepayment is received. For example, if a \$5,000 premium for a 3-year policy was received in the current year, include the full \$5,000 amount in the Current Year column.

	m 1024 (Rev. 9-98 Chedule J	Page
	sincuale 5	Organizations described in section 501(c)(17) (Trusts providing for the payment of supplemental unemployment compensation benefits)
1	If benefits are	provided for individual proprietors, partners, or self-employed persons under the plan, explain in detail.
2	If the plan pro whether the o	vides other benefits in addition to the supplemental unemployment compensation benefits, explain in detail and state ther benefits are subordinate to the unemployment benefits.
		
3 a	rotal number	of employees covered by the plan who are shareholders, officers, self-employed persons, or highly See Schedule F instructions for line 3a on page 14.)
b	Number of oth	er employees covered by the plan
d	Total number of	ployees not covered by the plan
	* Should equa those employe	the total of a, b, and c —if not, explain the difference. Describe the eligibility requirements that prevent es not covered by the plan from participating.
4	At any time aft creator of the t	er December 31, 1959, did any of the following persons engage in any of the transactions listed below with the trust: the rust or a contributor to the trust; a brother or sister (whole or half blood), a spouse, an ancestor, or a lineal descendant of or contributor; or a corporation controlled directly or indirectly by such a creator or contributor?
ote Plar	: If you know th ned" box. Give	at the organization will be, or is considering being, a party to any of the transactions (or activities) listed below, check the a detailed explanation of any "Yes" or "Planned" answer in the space below.
a		t of the trust's income or corpus?
b	Receive any co	mpensation for personal services?
c d		of the trust's services?
e	Sell any securit	ecurities or other properties from the trust?
f	Receive any of	the trust's income or corpus in any other transaction?

Schedule K		Organizations described in section 501(c)(19)—A post or organization of past or members of the Armed Forces of the United States, auxiliary units or societies post or organization, and trusts or foundations formed for the benefit of such organizations.	for suc	h a
1	To be comple	eted by a post or organization of past or present members of the Armed Forces of the United States.		
a b c	Total member Number of me	ship of the post or organization. embers who are present or former members of the U.S. Armed Forces embers who are cadets (include students in college or university ROTC programs or at armed services ly), or spouses, widows, or widowers of cadets or past or present members of the U.S. Armed Forces		
			<u> </u>	
đ	Does the orga	nization have a membership category other than the ones set out above?	Yes	: 🗆 N
	If "Yes," pleas	e explain in full. Enter number of members in this category	-	
e	If you wish to a	apply for a determination that contributions to your organization are deductible by donors, enter the number orm line 1b who are war veterans, as defined below.		
	7 pin 2 1, 1030,	is a person who served in the Armed Forces of the United States during the following periods of war: through July 4, 1902; April 6, 1917, through November 11, 1918; December 7, 1941, through December 27, 1950, through January 31, 1955; and August 5, 1964, through May 7, 1975.		
2		ed by an auxiliary unit or society of a post or organization of past or present members of the Armed Forces		<u> </u>
а	post or organiz	tion affiliated with and organized according to the bylaws and regulations formulated by such an exempt cation?	☐ Yes	□ No
b	How many mer	mbers does your organization have?	l	
С	How many are persons related	themselves past or present members of the Armed Forces of the United States, or are their spouses, or it to them within two degrees of blood relationship? (Grandparents, brothers, sisters, and grandchildren istant relationships allowable.)		
đ	Are all of the mof the United S	nembers themselves members of a post or organization, past or present members of the Armed Forces States, spouses of members of such a post or organization, or related to members of such a post or thin two degrees of blood relationship?	☐ Yes	☐ No
3	To be complete members of the	ed by a trust or foundation organized for the benefit of an exempt post or organization of past or present a Armed Forces of the United States.		
а		or income be used solely for the funding of such an exempt organization (including necessary related	☐ Yes	□ No
b	If the trust or fou provision as des	indation is formed for charitable purposes, does the organizational document contain a proper dissolution scribed in section 1.501(c)(3)-1(b)(4) of the Income Tax Regulations?	☐ Yes	□ No

CONNECTICUT CREDI	TOR BAŔ ASSOCIA	TION INC. 51-	110/211	101
			17, 8010	
Pay Poter of United	atote to	<u>jukae</u>	\$ 40	000
WACHOVIA Wachovia Bank, a division of			900	Contain
	ϵ		- Carrell	

-Form **8718**

(Rev. January 2010) Department of the Treasury Internal Revenue Service

User Fee for Exempt Organization Determination Letter Request

► Attach this form to determination letter application. (Form 8718 is NOT a determination letter application.)

For	OMB No. 1545-1798	_
IRS Use Only	Control number Amount paid	_

		t of the or to is not a determination letter application	cauon.j	User ree screener				
1 Na	me of	organization	2 Employ	er Identification Number				
Cor	nnect	ticut Creditor Bar Association, Inc.	27	2490738				
	Cau	ution. Do not attach Form 8718 to an application for a pension plan de	termination	letter. Use Form 8717 instead.				
3	Type of request			Fee				
а	\mathbf{Z}	Initial request for a determination letter for:						
	 An exempt organization that has had annual gross receipts averaging not more than \$10,000 during the preceding 4 years or 							
		 A new organization that anticipates gross receipts averaging not me 	ore than \$1	0,000 during its first 4 years ► \$400				
		Note. If you checked box 3a, you must complete the Certification be						
		Certification						
		I certify that the annual gross receipts of Connecticut Creditor Bar Association, Inc.						
		/	name of org	anization				
		have averaged (or are/expected to average) not more than \$10,000 operation.) during the	preceding 4 (or the first 4) years of				
		Signature ► # Clark Of Title ►	Presider	nt				
b		Initial request for a determination letter for:						
		 An exempt organization that has had annual gross receipts averagin 4 years or 	g more thai	1 \$10,000 during the preceding				
c	• A new organization that anticipates gross receipts averaging more than \$10,000 during its first 4 years c Group exemption letters							

Instructions

The law requires payment of a user fee with each application for a determination letter. The user fees are listed on line 3 above. For more information, see Rev. Proc. 2009-8; 2009-1 I.R.B. 229, or latest annual update.

Check the box or boxes on line 3 for the type of application you are submitting. If you check box 3a, you must complete and sign the certification statement that appears under line 3a.

Attach to Form 8718 a check or money order payable to the "United States Treasury" for the full amount of the user fee. If you do not include the full amount, your application will be returned. Attach Form 8718 to your determination letter application.

Generally, the user fee will be refunded only if the Internal Revenue Service declines to issue a determination.

Where To File

Send the determination letter application and Form 8718 to:

Internal Revenue Service P.O. Box 12192 Covington, KY 41012-0192

Who Should File

Organizations applying for federal income tax exemption, other than Form 1023 filers. Organizations submitting Form 1023 should refer to the instructions in that application package.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. If you want your organization to be recognized as tax-exempt by the IRS, you are required to give us this information. We need it to determine whether the organization meets the legal requirements for tax-exempt status.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating

to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of Form 8718 are covered in section 6104.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 5 minutes. If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send this form to this address. Instead, see Where To File above.

Form 8718 (1-2010)



CERTIFICATE OF INCORPORATION NONSTOCK CORPORATION

MAILING ADDRESS: Commercial Recording Division

Connecticut Secretary of the State P.O. Box 150470 Hartford, CT 06115-0470 860-509-6003 Office of the Secretary of the State

DELIVERY ADDRESS: Commercial Recording Division Connecticut Secretary of the State 30 Trinity Street Hartford, CT 06106 860-509-6003

FEE:\$50.00 (INCLUDING APPOINT)	NG #0004144995 PG 01 OF 02 VOL B-01395
Space For Office Use Only	SECRETARY OF THE STATE 01902
	CONNECTICUT SECRETARY OF THE STATE
Please contact the Department of Revenue Services or your tax	advisor as to any potential tax liability relating to your business
Connecticut Creditor Bar Association, Inc	•
The corporation is nonprofit and shall not have	e or issue shares of stock or make distributions.
2. PLACE A CHECK NEXT TO THE APPROPRIATE	STATEMENT:
A. The corporation shall not have members.	
B. The corporation shall only have members, wh	ich are <u>not</u> entitled to vote.
C. The corporation shall have one class of memb	ers.
D. The corporation shall have multiple classes of Class A — Full Voting Members Class B — Non Voting Members	members which classes are designated as follows:
Please note: the manner of election and appointment of a be set forth in this certificate or in the corporation's byla	nembers along with their qualifications and rights may ws. Please see C.G.S.§ 33-1055 & -1056.
3. APPOINTMENT OF REGISTERED AGENT: (Please	
Name of agent:	Business address:
A. Individual's Name:	510 Tolland Street Rast Hartford, Connecticut 06108
Adam Olshan	
	Residence address: (P.O. box is unacceptable) 510 Tolland Street East Hartford, Connecticut 06108
B. Business Entity:	Address: (P.O. box is unacceptable)
1	
/// Acceptance of a	ppointment
X JUAN UPL	
Signature o	if agent

эp	FILED 04/16/2010 08:30	AM PAGE	<i>ര</i> 19മാ
	CONNECTICUT SECRETARY OF T	HE STATE F THE STA	o a de de de

4. THE NATURE OF THE ACTIVITE PROMOTED BY THE CORPORAT	ES TO BE CONDUC	TED OR THE PURPOSES TO BE
The purpose of the corporat for which corporations may ! Ronstock Corporation Act.	ion is to engage be formed under t	in any lawful act or activity the Connecticut Revised
		•
,		
(Please reference a	u 81/2 X 11 attachment	if additional space is required)
OTHER INFORMATION:		
	:	
141		
Dated this	day of Apr	
PRINT OR TYPE NAME OF INCORPORATOR(S)	is must be signed by	each incorporator. COMPLETE ADDRESS(ES)
hilip H. Monagen		61 Holmes Avenue P.O. Box 1817 Waterbury, Connecticut 06722
den Olshan		510 Tolland Street East Hartford, Connecticut 06108

STATE OF CONNECTICUT

SS HAHIHOME

1840 CODI

The at Mary a factorially of

the state of the teachers of t

Since all causes with the

Bijaniscy

2010 Income and Expenses to date

Income: \$6750.00 Source: Member Dues

Expense: \$265 Type: PO Box

Expense: \$275 Type: CT incorporation cost Expense: \$400 Type: Form 1024/8718 application

Expense: \$100.75 Type: Restaurant expense for educational dinner meetings

Total Current Expense: \$1040.75

Anticipated Expense: \$459.25 Type: Accounting / tax return

Total 2010 Anticipated Expense: \$1500.00

2011 Income and Expenses to date

Income: \$7500.00 Source: Member Dues

Income: \$1,000 Source: Educational programming

Total Income: \$8500.00

Expense: \$265 Type: PO Box

Expense: \$250 Type: annual CT corporation registration

Expense: \$500.00 Type: Restaurant expense for educational dinner meetings

Expense: \$450 Type: Accounting / Tax return

Expense: \$5535 Type: Government Affairs consultant

Total Expense: \$7000.00

2012 Income and Expenses to date

Income: \$8750.00 Source: Member Dues

Income: \$1,000 Source: Educational programming

Total Income: \$9750.00

Expense: \$265 Type: PO Box

Expense: \$250 Type: annual CT corporation registration

Expense: \$500.00 Type: Restaurant expense for educational dinner meetings

Expense: \$450 Type: Accounting / Tax return

Expense: \$6535 Type: Government Affairs consultant

Total Expense: \$8000.00

Future Receipts

All income from sources other than member dues is anticipated to come from education workshops that will be held for members and for the public.

Future Expenses

All expenses are anticipated to be limited to tax preparation, mailbox cost, meeting speakers from the industry and government affairs expense.

CONNECTICUT CREDITOR BAR ASSOCIATION, INC.

1127 High Ridge Rd #165 Stamford, CT 06905

Membership Application

Full Attorney Member (with voting rights): Must be an attorney admitted and in good standing to the Connecticut bar and the attorney's creditor / debtor practice must be limited to the representation of creditors and/or debt buyers (with the exception of permissible foreclosure defense and consumer bankruptcy representation).

Associate Attorney Member (non-voting): Must be an attorney admitted in good standing to the Connecticut bar and the attorney's creditor/debtor practice must be limited to either the representation of creditors (with the exception of permissible foreclosure defense and consumer bankruptcy representation) or to in-house representation of creditors or to the defense of Connecticut attorneys that qualify for full CCBA membership.

Creditor Member (non-voting): Must be an entity that lends credit in Connecticut or which provides healthcare services in Connecticut without being immediately paid in full upon the service being completed.

Applicant Name and CT Bar Admission Date:		
Class of CCBA membership:		
Law Firm Name and Address:		
Office Phone:En	nail Address:	
Dues are \$250.00 annually. CCBA is not an exqualified under 26 U.S.C. 501(c). CCBA maked deductibility or characterization of membership business expense purposes. Checks should be Association, Inc.	es no representation we dues or any addition	hatsoever as to the
Certification: The undersigned hereby certifies hereby requesting membership in CCBA. I am Connecticut bar and I qualify for full attorney, pursuant to the above definitions.	admitted in good star associate attorney or o	nding with the creditor membership
Certification: Creditor member is a Connecticu Secretary of State and the below is duly authori	t corporation in good zed by the corporation	standing with the CT n to join the CCBA.
Signature		Juris#
Print Name		