TAXABLE YEAR

20□□

## Request for Consent for a Water's-Edge Re-Election

CALIFORNIA FORM

1115

| Fill out the form completely. Do not change the method of filing until the Fra               | nchise Tax      | Board has approved the      |                                   |
|--|-----------------|-----------------------------|-----------------------------------|
| Corporation name   |                 |                             | Key California corporation number |
| Address (suite, room, or PMB no.)  |                 |                             |                                   |
| Address (saile, room, or this no.)   |                 |                             |                                   |
| City   | State           | ZIP code                    | _                                 |
|  |                 |                             |                                   |
| Part I Effective Dates   |                 |                             |                                   |
| Enter the taxable year ending date of the taxpayer's last filed water's-edge tax return:     |                 |                             | •                                 |
| Effect the taxable year ending date of the taxpayer's last filed water's edge tax return     |                 |                             | (mm/dd/yyyy)                      |
|  |                 |                             |                                   |
| Enter the beginning date of the water's-edge re-election:                                    |                 |                             | / /                               |
|  |                 |                             | (mm/dd/yyyy)                      |
| Part II Basis to Request a Water's-Edge Re-Election. See instructions.                       |                 |                             |                                   |
|  |                 | 1                           | - N                               |
| Explain the basis for the request to re-elect water's-edge. Attach additional sheets if nec  | essary.         |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 | $\overline{\mathbf{A}}$     |                                   |
|  |                 |                             |                                   |
|  |                 | \ <i>V</i>                  |                                   |
| Part III List of Taxpayers Requesting Water's-Edge Re-Election. Attach addit                 | ional sheets i  | if necessary.               |                                   |
|  |                 | •                           |                                   |
| Taxpayer's name  | California      | corporation number          | FEIN                              |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
|  |                 |                             |                                   |
| Signature  |                 |                             |                                   |
| I attest to the belief that the water's-edge re-election is permitted by law and to the accu | racy of factual | statements.                 |                                   |
| Under penalties of perjury, I declare that I have examined this form, including accompar     | nying schedule  | es and statements, and to t | he best of my knowledge,          |
| it is true, correct, and complete.   |                 |                             |                                   |
|  |                 |                             |                                   |
| Signature of officer   | Title           |                             | Date                              |
| <i>(</i> )   |                 |                             |                                   |
| Print or type name of person to contact  | Telephon        | <br>e                       |                                   |

THIS FORM MUST BE FILED SEPARATELY FROM THE TAX RETURN