

PO Box 1286 Rancho Cordova CA 95741-1286

AMERICAN ARMORY MUSEUM 1 JELLY BELLY LANE FAIRFIELD CA 94533 Date:

02.13.17

Case:

31620627310013033

Case Unit: 31620627310013036 In reply refer to: 760:KKP:F120

Regarding:

Tax-Exempt Status

Organization's Name:

AMERICAN ARMORY MUSEUM

3803310

Purpose:

CCN:

Charitable and Educational

R&TC Section: Form of Organization: 23701d Incorporated

Accounting Period Ending:

06/30

Tax-Exempt Status Effective:

07/01/2015

## **Exempt Acknowledgement Letter**

We have received your federal determination letter that shows tax exemption under Internal Revenue Code (IRC) Section 501(c)(3).

Under California law, Revenue and Taxation Code (R&TC) Section 23701d provides that an organization is exempt from taxes imposed under Part 11 upon submission of the federal determination letter approving the organization's tax-exempt status.

Generally, the effective date of an organization's California tax-exempt status is the same date as the federal tax-exempt status.

To retain tax-exempt status, the organization must be organized and operating for nonprofit purposes within the provisions of the above R&TC section. An inactive organization is not entitled to tax-exempt status.

In order for us to determine any effect on the tax-exempt status, the organization must immediately report to us any change in:

- Operation
- Character
- Purpose
- Name
- Address

For filing requirements, refer to FTB Pub.1068, Exempt Organizations - Filing Requirements and Filing Fees. Go to ftb.ca.gov and search for 1068.

This exemption is for state franchise or income tax purposes only. For information regarding sales tax exemption, contact the State Board of Equalization at 800.400.7115 or go to their website at boe.ca.gov.

Krystal K. Prasad Telephone: 916.845.4171 Fax: 916.845.9074

cc: STEPHEN J. DELAHUNTY



State of California Secretary of State

97,4

Statement of Information

(Domestic Nonprofit, Credit Union and General Cooperative Corporations)

Filing Fee: \$20.00. If this is an amendment, see instructions. IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATE NAME
 American Armory Museum

FILED Secretary of State State of California APR 0 1 2016

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2. CALIFORNIA CORPORATE NUMBER C3803310			ય	30/00	Was the Carl	
	dress (Do not abbreviate the name of the ci	ty Itam 3 cannot he a P	O Box	\This Space for F	ling use Only	
3. STREET ADDRESS OF PRINCIPAL	····	CITY		state	ZIP CODE	
One Jelly Belly Lane			Fairfield		94533	
4. MAILING ADDRESS OF THE CORP	CITY	сіту Fairfield		ZIP CODE		
One serry being barre		ramen	rannelu		94533	
Names and Complete Addres officer may be added; however, the	ses of the Following Officers (The co	rporation must list these red.)	three	officers. A comparat	ole title for the specific	
5. CHIEF EXECUTIVE OFFICER/	ADDRESS	спү		STATE	ZIP CODE	
Herman G. Rowland, Presider	nt One Jelly Belly Lane	Fairfield	ł	CĄ	94533	
6. SECRETARY	ADDRESS	CITY	_	STATE	ZIP CODE	
Christopher C. Rowland	One Jelly Belly Lane	Fairfield		CA	94533	
7. CHIEF FINANCIAL OFFICER/ Christopher C. Rowland	ADDRESS One Jelly Belly Lane	crry Fairfield	l	STATE CA	ZIP CODE 94533	
address, a P.O. Box address is not	If the agent is an individual, the agent must acceptable. If the agent is another corpora porations Code section 1505 and Item 9 must	tion, the agent must have				
<u> </u>	OF PROCESS (Note: The overson designated as the		ave agr	reed to not in that capacit	y prior to the designation )	
9. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL CITY One Jelly Belly Lane Fairfi				STATE CA	ZIP CODE 94533	
Common Interest Developmen	ts					
Development Act, (Californi (California Civil Code section	on is an association formed to manage a cia Civil Code section 4000, et seq.) or ur n 6500, et seq.). The corporation must file a lode sections 5405(a) and 6760(a). Please se	ider the Commercial ar Statement by Common I	nd Indi nterest	ustrial Common Inter t Devetopment Associ	est Development Act,	
11. THE INFORMATION CONTAINED H	IEREIN IS TRUE AND CORRECT.					
3/31/1/2	Andread Bouch!		d	And and	Reachi	
DATE TYPE/PRINT	Andrea L. Bacchi NAME OF PERSON COMPLETING FORM	Attorney TITLE	4	SIGNATI	UNCCUO UNE	
SI-100 (REV 01/2016)			APPROVED BY SECRETARY OF STATE			