

TABLE OF CHANGES – FORM
Form I-956F, Application for Approval of an Investment in a Commercial Enterprise
OMB Number: 1615-0159
06/12/2026

Reason for Revision: EB-5 Reform

Legend for Proposed Text:

- Black font = Current text
- Red font = Changes

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Current Page Number and Section	Current Text	Proposed Text
Page 1, Part 1. Application Type	<p>[Page 1]</p> <p>...</p> <p><input type="checkbox"/> Initial I-956F, Application for Approval of an Investment in a Commercial Enterprise</p> <p><input type="checkbox"/> Amendment to a previously approved I-956F</p> <p>2. If your application is an amendment, provide the receipt number of the approved Form I-956F.</p> <p>3. If your application is an amendment, provide the NCE Identification Number (NCEID)</p> <p>4. Is the project or offering described in this application the same project or offering submitted with an approved I-924 application or amendment as an exemplar I-526 prior to March 15, 2022? Y/N</p> <p>5. If yes, provide the receipt number of the Form I-924 Date of Approval (mm/dd/yyyy):</p> <p>[new]</p> <p>[new]</p>	<p>[Page 1]</p> <p>...</p> <p><input type="checkbox"/> Initial I-956F, Application for Approval of an Investment in a Commercial Enterprise (Skip Part 6.)</p> <p><input type="checkbox"/> Amendment to a previously approved I-956F</p> <p>2. If your application is an amendment, provide the receipt number of the approved Form I-956F.</p> <p>3. If your application is an amendment, provide the NCE Identification Number (NCEID)</p> <p>[deleted]</p> <p>4. If your application is an amendment, identify the reason(s) for the amendment (select all that apply and complete the identified Parts). All applications must have Parts 9. and 12. - 14. completed.</p> <p><input type="checkbox"/> Extend validity period of an approved high unemployment area designation (Complete Parts 2. - 5.)</p> <p><input type="checkbox"/> Seek modification of an approved high unemployment area designation (Complete Parts 2. - 5.)</p> <p><input type="checkbox"/> Change in location where the NCE or JCE is principally doing business (project location) identified in the approved Form I-956F</p>

		<p>(Complete Parts 2., 3. and/or 4., as appropriate).</p> <p><input type="checkbox"/> Change in the manner capital is contributed by a regional center investor to the NCE or subsequent disbursement of such capital to any JCE (Complete Parts 2. - 4. and Part 11.)</p> <p><input type="checkbox"/> Change in the economically and statistically valid and transparent methodology provided in the approved Form I-956F that regional center investors will rely upon when filing their Form I-526E (Complete Parts 2. - 5.)</p> <p><input type="checkbox"/> Change in the substantive rights or obligations associated with the regional center investor’s ownership of the NCE (Complete Parts 2. - 4. and Part 10.)</p> <p><input type="checkbox"/> Change in the expenditure of capital or capital structure reflected in any business plan submitted with the approved Form I-956F (Complete Parts 2. - 4. and Part 11.)</p> <p><input type="checkbox"/> To provide updated information and evidence of project progress for incorporation into associated investor petitions to remove conditions on permanent resident status? (Complete Parts 2. - 4. and Part 6.)</p>
<p>Pages 2-3, Part 3. Information About the New Commercial Enterprise (NCE)</p>	<p>[Page 2]</p> <p>Part 3. Information About the New Commercial Enterprise (NCE)</p> <p>[new]</p> <p>1. Legal Name of the NCE (Required Field - Do Not Leave Blank)</p> <p>2. Other name(s) the NCE is authorized to use or do business as (d/b/a)</p> <p>3. Select the organizational structure. If the organizational structure is different from the examples listed below, select “Other” and describe the nature of the organizational structure in Part 14. Additional Information.</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership (including Limited Partnerships) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other (Describe below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.)</p> <p>4. Is the NCE comprised of a holding company and its wholly owned subsidiaries? Y/N</p> <p>If yes, describe the overall organizational structure of the NCE and list each wholly</p>	<p>[Page X]</p> <p>Part 3. Information About the New Commercial Enterprise (NCE)</p> <p>1. Is the NCE comprised of a holding company and its wholly owned subsidiaries? Y/N If you answered “Yes” to Item Number 1., answer Item Numbers 2. - 13. for the holding company entity and list each subsidiary, date of formation, and jurisdiction in Part 15. Additional Information.</p> <p>2. Legal Name of the NCE (Required Field - Do Not Leave Blank)</p> <p>3. Other name(s) the NCE is authorized to use or do business as (d/b/a)</p> <p>4. Select the organizational structure. If the organizational structure is different from the examples listed below, select “Other” and describe the nature of the organizational structure in Part 15. Additional Information.</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership (including Limited Partnerships) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other (Describe below. If you need extra space to complete this section, use the space provided in Part 15. Additional Information.)</p> <p>[deleted]</p>

	<p>owned subsidiary along with its date and jurisdiction of formation. If you need additional space, use the space provided in Part 14. Additional Information.</p> <p>Table of 4 rows, 3 columns</p> <p>Row 1, Column 1 = Subsidiary Name Row 1, Column 2 = Date of Formation Row 1, Column 3 = Jurisdiction of Formation</p> <p>Rows 2-4, Columns 1-3 = Fillable Field</p> <p>5. Date the NCE was Established (mm/dd/yyyy)</p> <p>[Page 3]</p> <p>...</p> <p><i>NCE Mailing Address (and Physical Address when Applicable)</i></p> <p>[] Mailing Address same as Physical Address [new]</p> <p>9. In Care Of Name (if any) Street Number and Name Apt./Ste./Flr. Number City or Town County State ZIP Code</p> <p>...</p> <p>13. Street Number and Name Apt./Ste./Flr. Number City or Town County State ZIP Code Census Tract(s)</p> <p><i>Type of NCE (Select only one)</i></p> <p>14. [] NCE formed after November 29, 1990</p> <p>15. [] NCE resulting from the purchase of a business formed on or before November 29, 1990 that is restructured or reorganized</p> <p>16. [] NCE resulting from a capital investment in, and substantial expansion of, a business formed on or before November 29, 1990.</p> <p>17. Is the NCE a troubled business? Yes</p>	<p>5. Date the NCE was Established (mm/dd/yyyy)</p> <p>[Page 3]</p> <p>...</p> <p><i>NCE Mailing Address (and Physical Address when Applicable)</i></p> <p>[] Mailing Address same as Physical Address</p> <p>[] Change of address from approved Form I-956F</p> <p>9. In Care Of Name (if any) Street Number and Name Apt./Ste./Flr. Number City or Town County State ZIP Code</p> <p>...</p> <p>13. Street Number and Name Apt./Ste./Flr. Number City or Town County State ZIP Code Census Tract(s)</p> <p>[deleted]</p> <p>[deleted]</p> <p>[deleted]</p> <p>[deleted]</p> <p>[deleted]</p>
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	<p>No</p> <p>NOTE: If you answered "Yes" to Item Number 17., you must provide an explanation in Part 14. Additional Information of how the NCE qualifies as a troubled business.</p> <p>[new]</p>	<p>[deleted]</p> <p>14. If you answered “Yes” to Item Number 1., list each wholly owned subsidiary along with its date and jurisdiction of formation. If you need additional space, use the space provided in Part 15. Additional Information.</p> <p>[Table, 3 entries] Subsidiary Name Date of Formation Jurisdiction of Formation</p>
<p>Pages 4-5, Part 4. Information about the Job Creating Entity(ies) (JCE)</p>	<p>[Page 4]</p> <p>Part 4. Information about the Job Creating Entity(ies) (JCE)</p> <p>Provide the information below for the JCE associated with the investment project if different than the NCE. If the regional center seeks to add more than one JCE with this filing, provide the information below for each JCE in Part 14. Additional Information.</p> <p>[new]</p> <p>[new]</p> <p>1. Legal Name of the JCE 2. Other name(s) the entity JCE is authorized to use or do business as (d/b/a)</p> <p>3. Select the organizational structure. If the organizational structure is different from the examples listed below, select “Other” and describe the nature of the organizational structure in Part 14. Additional Information.</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership (including Limited Partnerships) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other (Describe below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.)</p> <p>4. Is the JCE comprised of a holding company and its wholly owned subsidiaries? Y/N</p>	<p>[Page 4]</p> <p>Part 4. Information About the Job Creating Entity(ies) (JCE)</p> <p>Provide the information below for the JCE associated with the investment project if different than the NCE. If the regional center seeks to add more than one JCE with this filing, provide the information below for each JCE in Part 15. Additional Information.</p> <p>1. Is the JCE comprised of a holding company and its wholly owned subsidiaries? Y/N</p> <p>If you answered “Yes” to Item Number 1., answer Item Numbers 2. - 13. for the holding company entity and list each subsidiary, date of formation, and jurisdiction in Part 15. Additional Information.</p> <p>2. Legal Name of the JCE 3. Other name(s) the entity JCE is authorized to use or do business as (d/b/a)</p> <p>4. Select the organizational structure. If the organizational structure is different from the examples listed below, select “Other” and describe the nature of the organizational structure in Part 15. Additional Information.</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Partnership (including Limited Partnerships) <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other (Describe below. If you need extra space to complete this section, use the space provided in Part 15. Additional Information.)</p> <p>[deleted]</p>

	<p>If yes, describe the overall organizational structure of the JCE and list each wholly owned subsidiary along with its date and jurisdiction of formation. If you need additional space, use the space provided in Part 14. Additional Information.</p> <p>Table of 4 rows, 3 columns</p> <p>Row 1, Column 1 = Subsidiary Name Row 1, Column 2 = Date of Formation Row 1, Column 3 = Jurisdiction of Formation</p> <p>Rows 2-4, Columns 1-3 = Fillable Field</p> <p>5. Date the JCE was Established (mm/dd/yyyy)</p> <p>...</p> <p>[Page 5]</p> <p><i>JCE Mailing Address (and Physical Address when Applicable)</i></p> <p>[] Mailing Address same as Physical Address</p> <p>[new]</p> <p>9. In Care Of Name (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code</p> <p>...</p> <p>13. Is the JCE an affiliated JCE? The term ‘affiliated job-creating entity’ means any job-creating entity that is controlled, managed, or owned by any of the people involved with the regional center or new commercial enterprise under section 203(b)(5)(H)(v). Y/N</p> <p>[new]</p>	<p>5. Date the JCE was Established (mm/dd/yyyy)</p> <p>...</p> <p><i>JCE Mailing Address (and Physical Address when Applicable)</i></p> <p>[] Mailing Address same as Physical Address</p> <p>[] Change of address from approved Form I-956F</p> <p>9. In Care Of Name (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code</p> <p>...</p> <p>13. Is the JCE an affiliated JCE? The term ‘affiliated job-creating entity’ means any job-creating entity that is controlled, managed, or owned by any of the people involved with the regional center or new commercial enterprise under section 203(b)(5)(H)(v). Y/N</p> <p>14. If you answered “Yes” to Item Number 1., list each wholly owned subsidiary along with its date and jurisdiction of formation. If you need additional space, use the space provided in Part 15. Additional Information.</p> <p>[Table, 3 entries] Subsidiary Name Date of Formation Jurisdiction of Formation</p>
<p>Pages 5-6, Part 5. Information about the Project</p>	<p>[Page 5]</p> <p>Part 5. Information about the Project</p>	<p>[Page 5]</p> <p>Part 5. Information About the Project</p>

	<p>You must provide a comprehensive business plan for a specific capital investment project as well as a credible economic analysis regarding estimated job creation that is based upon economically and statistically valid and transparent methodologies.</p> <p>For Items 1-5, select the appropriate box to indicate the type of investment for this project (Check all that apply)</p> <p>...</p> <p>2. <input type="checkbox"/> High Unemployment Area</p> <p>This project is based on an investment in a high unemployment area.</p> <p>[new]</p> <p>[new]</p> <p>[new]</p> <p>A. In addition to the census tract(s) where the NCE is principally doing business identified in Part 3., Item Number 13., list any other directly adjacent census tract(s) that you are requesting to be included in designation as an area of high unemployment (Enter the 11-digit FIPS codes)</p> <p>Table of 2 rows, 5 columns</p> <p>Rows 1-2, Columns 1-5 = Fillable Field</p> <p>[Page 6]</p> <p>B. What is the weighted average of the unemployment rate for the census tracts you are requesting to be designated as an area of high unemployment, based on the labor force unemployment measure for each applicable census tract?</p> <p>C. What is the national average unemployment rate on the filing date of this application?</p> <p>D. What data source(s) and time frames did you use to calculate the unemployment rate for the</p>	<p>You must provide a comprehensive business plan for a specific capital investment project along with an economic impact analysis estimating job creation related to the job-creating activity showing that the project will create full-time employment for not fewer than ten qualifying employees per regional center investor within the timeline identified in the comprehensive business plan.</p> <p>For Item Numbers 1. - 5., select the appropriate box to indicate the type of investment for this project (Check all that apply)</p> <p>...</p> <p>2. <input type="checkbox"/> High Unemployment Area</p> <p>This project is based on an investment in a high unemployment area.</p> <p>A. If this is an amendment, is the area identified below the same as identified in the approved Form I-956F? Yes/No</p> <p>B. If this is an amendment, is the amendment seeking to extend the validity of a high unemployment area designation? Yes/No</p> <p>C. If this is an amendment, is the amendment seeking to modify a previously approved high unemployment area designation? Yes/No</p> <p>D. In addition to the census tract(s) where the NCE is principally doing business identified in Part 3., Item Number 13., list any other directly adjacent census tract(s) that you are requesting to be included in designation as an area of high unemployment (Enter the 11-digit FIPS codes)</p> <p>Table of 2 rows, 5 columns</p> <p>Rows 1-2, Columns 1-5 = Fillable Field</p> <p>E. What is the weighted average of the unemployment rate for the census tracts you are requesting to be designated as an area of high unemployment, based on the labor force unemployment measure for each applicable census tract?</p> <p>F. What is the national average unemployment rate on the filing date of this application?</p> <p>G. What data source(s) and time frames did you use to calculate the unemployment rate for the</p>
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	<p>applicable census tract(s) and the national average unemployment rate?</p> <p>...</p> <p>9. Nature of Activity of Project (for example, furniture manufacturer)</p> <p>10. Primary Included Industries for Project (provide North American Industry Classification System (NAICS) codes)</p> <p>11. Total Number of Estimated Jobs to be Created by the Project. If available, provide a list of NAICS codes, industry name and associated total number of claimed jobs to be created by the investment project.</p> <p>Table of 6 rows, 3 columns</p> <p>Row 1, Column 1 = NAICS Code Row 1, Column 2 = Industry Name Row 1, Column 3 = Claimed Jobs to be Created by Investment Project</p> <p>Rows 2-5, Columns 1-3 = Fillable Field</p> <p>Row 6, Column 1 = Fillable Field Row 6, Column 2 = Total Row 6, Column 3 = Fillable Field</p>	<p>applicable census tract(s) and the national average unemployment rate?</p> <p>...</p> <p>9. Nature of Activity of Project (for example, residential building construction)</p> <p>[deleted]</p> <p>10. Total Number of Estimated Jobs to be Created by the Project.</p> <p>[deleted]</p>
<p>NEW</p>	<p>[new]</p>	<p>[Page X]</p> <p>Part 6. Updated Information About the Project for Incorporation into Associated Investor Petitions to Remove Conditions on Permanent Resident Status</p> <p>Provide any updates made to your comprehensive business plan for a specific capital investment along with an economic impact analysis estimating job creation related to the job-creating activity showing that the project will create full-time employment for not fewer than ten qualifying employees per regional center investor within the timeline identified in the comprehensive business plan.</p> <ol style="list-style-type: none"> 1. Total Cost of the Project 2. Number of EB-5 Investors in the NCE 3. Aggregate Amount of Project Costs Funded by EB-5 Capital 4. Nature of Activity of Project (for example, nonresidential building construction) 5. Total Number of Jobs Created by the Project as of the date of filing:

		<p>6. Total Number of Jobs Actively in the Process of Being Created by the Project as of the date of filing. Provide a breakdown of the total number of claimed jobs actively in the process of being created by the investment project by the job-creating activity associated with such jobs and the anticipated time of completion.</p> <p>[Table, 4 entries, 5th entry: Total Job-Creating Activity Time of Completion Number of Jobs</p>
Pages 7-8, Part 6. Investment and Offering Documents	<p>[Page 7]</p> <p>Part 6. Investment and Offering Documents</p> <p>...</p>	<p>[Page X]</p> <p>Part 7. Investment and Offering Documents</p> <p>...</p>
Page 8, Part 7. Policies and Procedures to Monitor the Issuance of Securities	<p>[Page 8]</p> <p>Part 7. Policies and Procedures to Monitor the Issuance of Securities</p> <p>...</p> <p>3. If no, please describe the policies and procedures in the space provided. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.</p>	<p>[Page X]</p> <p>Part 8. Policies and Procedures to Monitor the Issuance of Securities</p> <p>...</p> <p>3. If no, please describe the policies and procedures in the space provided. If you need extra space to complete this section, use the space provided in Part 15. Additional Information.</p>
Pages 8-9, Part 8. Required Certifications	<p>[Page 8]</p> <p>Part 8. Required Certifications</p> <p>...</p>	<p>[Page X]</p> <p>Part 9. Required Certifications</p> <p>...</p>
Pages 9-11, Part 9. Information About All Persons Involved with the NCE and Affiliated JCE	<p>[Page 9]</p> <p>Part 9. Information About All Persons Involved with the NCE and Affiliated JCE</p> <p>You must identify and provide required attestations and information for all persons involved with the NCE and affiliated JCE.</p> <p>A person involved with an NCE or affiliated JCE includes any person, directly or indirectly, in a position of substantive authority to make operational or managerial decisions over pooling, securitization, investment, release, acceptance, or control or use of any EB-5 capital from immigrant investors. An individual may be in a position of substantive authority if the person serves as a principal, a representative, an administrator, an owner, an</p>	<p>[Page X]</p> <p>Part 10. Information About All Persons Involved with the NCE and Affiliated JCE</p> <p>You must identify and provide required attestations and information for all persons involved with the NCE and affiliated JCE. If this is an amendment, provide the updated information in this Part for all new or previously unidentified persons involved with the NCE and affiliated JCE.</p> <p>A person involved with an NCE or affiliated JCE means any person that is, directly or indirectly, in a position of substantive authority to make operational or managerial decisions for the NCE or affiliated JCE over the pooling, securitization, investment, release, acceptance, or control or use of any funding that was procured under the Regional Center Program. A person is in a position of substantive authority if the person serves as an</p>

	<p>officer, a board member, a manager, an executive, a general partner, a fiduciary, an agent, or in a similar position at the NCE or JCE, respectively.</p> <p>[Page 10]</p> <p>...</p> <p>If you need extra space to complete this section or have more than one additional individual to list, use the space provided in Part 14. Additional Information.</p> <p>...</p>	<p>administrator, a board member, a general partner, a limited partner, a manager, an officer, an owner, or in a similar position at the NCE or affiliated JCE, respectively. An agent, fiduciary, or representative may be in a position of substantive authority if their position in the NCE or affiliated JCE authorizes them to provide input or oversight of the use of any regional center investor capital obtained under the Regional Center Program.</p> <p>...</p> <p>If you need extra space to complete this section or have more than one additional individual to list, use the space provided in Part 15. Additional Information.</p> <p>...</p>
<p>Pages 11-12, Part 10. Fund Administration</p>	<p>[Page 11]</p> <p>Part 10. Fund Administration</p> <p>1. Has the NCE and/or affiliated JCE set up a separate account for the deposit and maintenance of all capital investment from alien investors for the offering and project described in this application, including amounts held in escrow? Y/N</p> <p>2. If yes, provide the name of the bank (or other financial institution) and account number for each separate account set up by the NCE and/or affiliated JCE.</p> <p>[Page 12]</p> <p>3. Has the NCE and/or affiliated JCE retained a fund administrator to administer all investment capital deposited and maintained in the separate account(s)? Y/N</p> <p>4. Is the fund administrator a certified public accountant, attorney or broker-dealer or investment adviser registered with the Securities and Exchange Commission? Y/N</p> <p>5. Provide the full legal name and contact information for the fund administrator</p> <p>6. Provide the title, relevant certification, bar and/or registration number of the fund administrator</p> <p>7. Is the NCE and/or affiliated JCE controlled by or under common control of an investment adviser or broker-dealer that is registered with the Securities and Exchange Commission? Y/N</p>	<p>[Page X]</p> <p>Part 11. Fund Administration</p> <p>1. Provide the name of the bank (or other financial institution) and account number for each separate account set up by the NCE and/or affiliated JCE for the deposit and maintenance of all capital investment from alien investors for the offering and project described in this application, including amounts held in escrow?</p> <p>[deleted]</p> <p>2. Has the NCE and/or affiliated JCE retained a fund administrator to administer all investment capital deposited and maintained in the separate account(s)? Y/N</p> <p>3. Is the fund administrator a certified public accountant, attorney or broker-dealer or investment adviser registered with the Securities and Exchange Commission? Y/N</p> <p>4. Provide the full legal name and contact information for the fund administrator</p> <p>5. Provide the title, relevant certification, bar and/or registration number of the fund administrator</p> <p>6. Is the NCE and/or affiliated JCE controlled by or under common control of an investment adviser or broker-dealer that is registered with the Securities and Exchange Commission? Y/N</p>

	<p>8. Provide the full legal name and contact information for the registered investment adviser or broker-dealer</p> <p>9. Provide the title and registration number of the registered investment adviser or broker-dealer</p>	<p>7. Provide the full legal name and contact information for the registered investment adviser or broker-dealer</p> <p>8. Provide the title and registration number of the registered investment adviser or broker-dealer</p>
<p>Pages 12-13, Part 11. Statement, Contact Information, Declaration, and Signature of the Authorized Individual</p>	<p>[Page 12]</p> <p>Part 11. Statement, Contact Information, Declaration, and Signature of the Authorized Individual</p> <p>...</p> <p>B. The interpreter named in Part 12. has read to me every question and instruction on this application, and my answer to every question, in [Fillable Field], a language in which I am fluent, and I understood everything.</p> <p>...</p> <p>At my request, the preparer named in Part 13, [Fillable Field], prepared this application for me based only upon information I provided or authorized.</p> <p>...</p>	<p>[Page X]</p> <p>Part 12. Statement, Contact Information, Declaration, and Signature of the Authorized Individual</p> <p>...</p> <p>B. The interpreter named in Part 13. has read to me every question and instruction on this application, and my answer to every question, in [Fillable Field], a language in which I am fluent, and I understood everything.</p> <p>...</p> <p>At my request, the preparer named in Part 14., [Fillable Field], prepared this application for me based only upon information I provided or authorized.</p> <p>...</p>
<p>Page 14, Part 12. Interpreter's Contact Information, Certification, and Signature</p>	<p>[Page 14]</p> <p>Part 12. Interpreter's Contact Information, Certification, and Signature</p> <p>...</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in Part 11., Item B. in Item Number 1., and I have read to the authorized individual in the identified language every question and instruction on this application and his or her answer to every question. The authorized individual informed me that he or she understands every instruction, question, and answer on the application, including the Authorized Individual's Declaration, and has verified the accuracy of every answer.</p> <p>...</p>	<p>[Page X]</p> <p>Part 13. Interpreter's Contact Information, Certification, and Signature</p> <p>...</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in Part 12., Item B. in Item Number 1., and I have read to the authorized individual in the identified language every question and instruction on this application and his or her answer to every question. The authorized individual informed me that he or she understands every instruction, question, and answer on the application, including the Authorized Individual's Declaration, and has verified the accuracy of every answer.</p> <p>...</p>
<p>Pages 15-16, Part 13. Contact Information, Declaration, and Signature of the Person Preparing This Form, if</p>	<p>[Page 15]</p> <p>Part 13. Contact Information, Declaration, and Signature of the Person Preparing This Form, if Other Than the Authorized Individual</p> <p>Provide the following information about the preparer. If the same individual acted as your</p>	<p>[Page X]</p> <p>Part 14. Contact Information, Declaration, and Signature of the Person Preparing This Form, if Other Than the Authorized Individual</p> <p>Provide the following information about the preparer. If the same individual acted as your</p>

Other Than the Authorized Individual	interpreter and your preparer, that person should complete both Part 11. and Part 12. ...	interpreter and your preparer, that person should complete both Part 13. and Part 14. ...
Page 17, Part 14. Additional Information	[Page 17] Part 14. Additional Information ...	[Page 17] Part 15. Additional Information ...