

Internal Revenue Service  
District Director

Department of the Treasury

Date: MAR 16 1992

WOMENS ECONOMIC VENTURES OF SANTA BARBARA  
1216 STATE ST 610  
SANTA BARBARA, CA 93101

Employment Identification Number:  
95-3674624  
Person to Contact:  
ECMF Coordinator  
Contact Telephone Number:  
(213) 894-2339  
Internal Revenue Code Section: 501(c)(3)

Dear Taxpayer:

Thank you for submitting the information shown below or on the enclosure. We have made it a part of your file.

The changes indicated do not adversely affect your exempt status and the exemption letter issued to you continues in effect.

Please let us know about any future change in the character, purpose, method of operation, name or address of your organization. This is a requirement for retaining your exempt status.

Thank you for your cooperation.

Sincerely yours,



Item Changed

From

To

(NAME)

THE SANTA BARBARA WOMEN'S  
COMMUNITY CENTER

(SEE ABOVE)

Internal Revenue Service  
District Director

Department of the Treasury

Date: OCT 10 1984

Person to Contact  
Taxpayer Service Representative  
Contact Telephone Number:  
(800) 424-1040

EIN:  
95-3674624

Santa Barbara Women's Community  
Building  
423 West Victoria  
Santa Barbara, CA 93101

Dear Applicant:

Based on the information you recently submitted, we have classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Internal Revenue Code because you are an organization described in section 509(a)(1) and 170(b)(1)(A)(vi).

Your exempt status under section 501(c)(3) of the Code is still in effect.

This classification is based on the assumption that your operations will continue as you have stated. If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status.

Because this letter could help resolve any questions about your foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,

  
District Director



STATE OF CALIFORNIA

FRANCHISE TAX BOARD

P.O. BOX 1286

RANCHO CORDOVA, CA. 95741-1286

April 13, 1995

In reply refer to  
340:G :MPS

WOMEN'S ECONOMIC VENTURES OF SANTA BARBARA  
1136 E MONTECITO ST  
SANTA BARBARA CA 93103

Purpose : CHARITABLE-EDUCATIONAL  
Code Section : 23701d  
Form of Organization : Corporation  
Accounting Period Ending: December 31  
Organization Number : 1085238 WE3VO

This letter confirms your previous exemption from state franchise or income tax under the provisions of the Revenue and Taxation Code section indicated above. In confirming your exempt status, we have made no examination of your current activities. If the organization has changed its operation, character, or purpose since exemption was originally granted, that change must be reported immediately to this office.

You may be required to file Form 199 (Exempt Organization Annual Information Return) on or before the 15th day of the 5th month (4 1/2 months) after the close of your accounting period. See annual instructions with forms for requirements.

You are not required to file state franchise or income tax returns unless you have income subject to the unrelated business income tax under Section 23731 of the Code. In this event, you are required to file Form 109 (Exempt Organization Business Income Tax Return) by the 15th day of the 5th month (4 1/2 months) after the close of your annual accounting period.

M SIMON  
EXEMPT ORGANIZATION UNIT  
CORPORATION AUDIT SECTION  
Telephone (916) 845-4171

RTF: