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## Department of the Treasury Internal Revenue Service

## Application for Recognition of Exemption Under Section 501(a) or for Determination Under Section 120

JMB No. 1545-205 If exempt status is approved this application

viil 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 you. Complete the Procedural Checklist on page 4 of the Instructions.

Part I.—Identification of Applicant (Must be completed by all applicants; also complete appropriate Schedule, Check the appropriate box below to indicate the section under which you are applying: Section 501(c)(2)—Title holding corporations (Schedule A, page 6) b Section 501(c)(4)—Civic leagues, social welfare organizations (including certain war veterans' organizations), or local associations of employees (Schedule B, page 7) Section 501(c)(5)—Labor, agricultural, or horticultural organizations (Schedule C, page 8) c Section 501(c)(6)—Business leagues, chambers of commerce, etc. (Schedule C, page 8) Section 501(c)(7)—Social clubs (Schedule D, page 9) Section 501(c)(8)—Fraternal beneficiary societies, etc., providing life, sick, accident, or other benefits to members (Schedule E, page 11) f Section 501(c)(9)—Voluntary employees' beneficiary associations (Schedule F, page 12) E h 🗀 Section 501(c)(10)—Domestic fraternal societies, orders, etc., not providing life, sick, accident or other benefits (Schedule E, page 11) □ Section 501(c)(12)—Benevolent life insurance associations, mutual ditch or irrigation companies, mutual or cooperative telephone companies, or like organizations (Schedule G, page 13) Section 501(c)(13)—Cemeteries, crematoria, and like corporations (Schedule H, page 14) Section 501(c)(15)—Mutual insurance companies or associations, other than life or marine (Schedule I, page 15) Section 501(c)(17)—Trusts providing for the payment of supplemental unemployment compensation benefits (Schedule J, page 16) m 🗆 Section 501(c)(19)—A post, organization, auxillary unit, etc., of past or present members of the Armed Forces of the United States (Schedule K, page 17) n 🗀 Section 501(c)(20)—Trust/organization for prepaid group legal services (Parts I, II, and Schedule M, page 21) Section 501(c)(25)—Title holding corporations or trusts (Schedule A, page 6) p 🗍 Section 120—Qualified group legal services plans (Parts I, II, and Schedule L, page 19) 1a Full name of organization (as shown in organizing document) 2 Employer identification number (If none, see Specific Instructions) Hubbard College of Administration 95-4302671 1b c/o Name (if applicable) 1c Address (number and street) 3540 Wilshire Blvd. Suite 811 Name and telephone number (including area code) of person to be contacted 1d City or town, county, state, and ZIP code during business hours if more information is needed 90010 Los Angeles, CA. Thomas C. Spring (202 ) 588-8488 Month the annual accounting period ends Date incorporated or formed 6 Activity codes (see back cover) 059 149 December 17, 1990 030 December 31 Did the organization apply for recognition of exemption under this Code section or under any other section of the Code? 🔲 Yes 🛛 🔀 No If "Yes," attach an explanation. If "Yes," state the form number(s), years filed, and internal Revenue office where filed. Check the box for your type of organization. BE SURE TO ATTACH A COMPLETE COPY OF THE CORRESPONDING DOCUMENTS TO THE APPLICATION BEFORE MAILING. a 💢 Corporation—Attach a copy of your Articles of Incorporation, (Including amendments and restatements) showing approval by the appropriate state official; also attach a copy of your bylaws. Exhibits A & B. Trust—Attach a copy of your Trust Indenture or Agreement, including all appropriate signatures and dates. Association—Attach a copy of your Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence that the organization was formed by adoption of the document by more than one person. Include also a copy of your bylaws. If you are a corporation or an unincorporated association that has not yet adopted bylews, 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 accompanyingschedules and attachments, and to the best of my knowledge it is true, correct, and complete. PLEASE SIGN MUESIDENT. HERE (Title or authority of signer) (Date) (Signature)