Section 35-2-722 of the Montana Code Annotated requires a public benefit or religious corporation to provide written notice to the Attorney General of its intent to dissolve at or before the time it delivers articles of dissolution to the Secretary of State. **No assets shall be transferred or conveyed as part of the dissolution process until the earlier of:**

- 20 days after the required written notice has been given to the Attorney General, or
- until the Attorney General has waived the notification requirements in writing.

1. **Name**
   Corporation's legal name: ________________________________

2. **Charitable Purpose**
   Short summary of the corporation's charitable purpose: ________________________________

3. **Articles of Dissolution**
   Have you filed Articles of Dissolution with the Secretary of State?
   - □ Yes If yes, when were they filed? ________________________________
   - □ No If no, please explain: ________________________________

4. **Attach copies of the dissolving corporation’s**
   1) Articles of Incorporation, 2) Bylaws, 3) any Amendments to the Articles of Incorporation or Bylaws, and 4) 990’s for the past three years

5. **Disposition of Assets**
   List recipients and/or intended recipients of the corporation's assets at dissolution (other than creditors) and a summary of each recipient's charitable purpose. Attach additional pages if necessary.

   **NOTE:** You must also attach board minutes or other documentation authorizing the distribution and transfer of assets.
   OR □ Check this box if the corporation never acquired any assets.
<table>
<thead>
<tr>
<th>Recipient</th>
<th>Distributed yet?</th>
<th>Type of Asset</th>
<th>Value of Asset</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: __________________________</td>
<td>□ Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Address: __________________________</td>
<td>□ No</td>
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<tr>
<td>Charitable Purpose: __________________________</td>
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<td>Name: __________________________</td>
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<td>Address: __________________________</td>
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<td>Charitable Purpose: __________________________</td>
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<tr>
<td>Charitable Purpose: __________________________</td>
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</tbody>
</table>

6. **Signature** Under penalties of perjury, I declare that I have examined the information provided on this form, including any attachments, and to the best of my knowledge and belief, it is true, correct and complete.

__________________________
Signature

__________________________
Address

__________________________
Printed Name

__________________________
City/State/Zip

__________________________
Title or relationship to corporation

__________________________
Phone

__________________________
Date