TY2014 990 Test Scenario #1

PreparerFirmGrp
> **PreparerFirmEIN** – 00-9000059
> **PreparerFirmName** – Roberts Enterprises
> **PreparerFirmUSAddress** – 645 Salem St, Nixon, NV 89424

MultSoftwarePackagesUsedInd -- no

OriginatorGrp
> **EFIN** – as assigned
> **OriginatorTypeCd** – ERO
> **PractitionerPINGrp**
>>   **EFIN** – as assigned
>>   **PIN** – 15512

PinEnteredByCd – ERO

SignatureOptionCd – Pin Number

ReturnTypeCd – 990

TaxPeriodBeginDt – 1/1/2014
TaxPeriodEndDt – 12/31/2014

Filer
> **EIN** – 00-9000001
> **BusinessName** – Walnut Hospital Inc.
> **BusinessNameControlTxt** -- WALN
> **USAddress** – 655 Bradford St Nixon NV 89424

BusinessOfficerGrp
> **PersonNm** – Penn Oak
> **PersonTitleTxt** -- President
> **PhoneNum** – 775-555-1212
> **EmailAddressTxt** --
> **SignatureDt** – self-select
> **TaxpayerPIN** – self-select
> **DiscussWithPaidPreparerInd** -- Y

PreparerPersonDetail
> **PreparerPersonNm** – Robert R Roberts
> **PTIN** – P09876543
> **PhoneNum** – 775-555-1212
> **EmailAddressTxt** --
> **PreparationDt** – self select
> **SelfEmployedInd** -- Y

binaryAttachmentCnt – 1