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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25	NONE		
26 Other salaries and wages	26			
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30	6,747.		6,747.
31 Accounting fees	31	20,241.	13,494.	6,747.
32 Legal fees	32			
33 Supplies	33			
34 Telephone	34	58.		58.
35 Postage and shipping	35	389.	97.	195.
36 Occupancy	36	4,894.	3,670.	1,224.
37 Equipment rental and maintenance	37			
38 Printing and publications	38	8,418.	8,418.	
39 Travel	39			
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42			
43 Other expenses not covered above (itemize) TMT 1	43a	3,414.	3,414.	
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	44,161.	29,093.	8,224.

Joint Costs. Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 25 of the instructions)What is the organization's primary exempt purpose? **PROMOTE EDUCATIONAL OPPORTUNITIES**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a PROMOTE EDUCATIONAL OPPORTUNITIES	
(Grants and allocations \$ _____)	29,093.
b	
(Grants and allocations \$ _____)	
c	
(Grants and allocations \$ _____)	
d	
(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	29,093.

Part IV Balance Sheets (See page 25 of the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	569,464.	45	521,840.
	46 Savings and temporary cash investments		46	
	47a Accounts receivable	47a		
	b Less allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments - securities (attach schedule) ☐ Cost ☐ FMV		54	
	55a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation (attach schedule)	55b	55c	
56 Investments - other (attach schedule)		56		
57a Land, buildings, and equipment basis	57a			
b Less accumulated depreciation (attach schedule)	57b	57c		
58 Other assets (describe ☐)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	569,464.	59	521,840.	
Liabilities	60 Accounts payable and accrued expenses	6,688.	60	NONE
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ☐)		65	
66 Total liabilities (add lines 60 through 65)	6,688.	66	NONE	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	562,776.	67	521,840.
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	562,776.	73	521,840.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	569,464.	74	521,840.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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a	Total revenue, gains, and other support per audited financial statements . . . ▶	a		a	Total expenses and losses per audited financial statements ▶	a	
b	Amounts included on line a but not on line 12, Form 990			b	Amounts included on line a but not on line 17, Form 990		
(1)	Net unrealized gains on investments . . \$ _____			(1)	Donated services and use of facilities \$ _____		
(2)	Donated services and use of facilities \$ _____			(2)	Prior year adjustments reported on line 20, Form 990 \$ _____		
(3)	Recoveries of prior year grants \$ _____			(3)	Losses reported on line 20, Form 990 \$ _____		
(4)	Other (specify) _____ \$ _____			(4)	Other (specify) _____ \$ _____		
	Add amounts on lines (1) through (4) ▶	b			Add amounts on lines (1) through (4) . . ▶	b	
c	Line a minus line b ▶	c		c	Line a minus line b ▶	c	
d	Amounts included on line 12, Form 990 but not on line a :			d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$ _____			(1)	Investment expenses not included on line 6b, Form 990 . . . \$ _____		
(2)	Other (specify) _____ \$ _____			(2)	Other (specify) _____ \$ _____		
	Add amounts on lines (1) and (2) . . ▶	d			Add amounts on lines (1) and (2) . . ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e		e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions)

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? **►** ☐ Yes ☒ No
If "Yes," attach schedule - see page 28 of the instructions

Part VI Other Information (See page 28 of the instructions)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . .	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? . . . If "Yes," attach a conformed copy of the changes	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . .	78 a	X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . .	78 b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . .	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . .	80 a	X
b If "Yes," enter the name of the organization: _____ and check whether it is ☐ exempt or ☐ nonexempt		
81 a Enter direct and indirect political expenditures. See line 81 instructions. . . . 81 a		
b Did the organization file Form 1120-POL for this year? . . .	81 b	N/A
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? . . .	82 a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) . . . 82 b		N/A
83 a Did the organization comply with the public inspection requirements for returns and exemption applications? . . .	83 a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? . . .	83 b	N/A
84 a Did the organization solicit any contributions or gifts that were not tax deductible? . . .	84 a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . .	84 b	N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? . . .	85 a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? . . .	85 b	N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c Dues, assessments, and similar amounts from members . . . 85 c		N/A
d Section 162(e) lobbying and political expenditures . . . 85 d		N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . . . 85 e		N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e) . . . 85 f		N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? . . .	85 g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? . . .	85 h	N/A
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 . . . 86 a		N/A
b Gross receipts, included on line 12, for public use of club facilities . . . 86 b		N/A
87 501(c)(12) orgs Enter a Gross income from members or shareholders . . . 87 a		N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . 87 b		N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX . . .	88	X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ☐ NONE , section 4912 ☐ NONE , section 4955 ☐ NONE		
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction . . .	89 b	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ☐ N/A		
d Enter Amount of tax on line 89c, above, reimbursed by the organization . . . ☐ N/A		
90 a List the states with which a copy of this return is filed ☒ FLORIDA		
b Number of employees employed in the pay period that includes March 12, 2004 (See instructions) . . . 90 b		
91 The books are in care of ☒ DENISE MINCEY-MILLS Telephone no ☐ _____ Located at ☒ 1111 PARK CENTRE BLVD, SUITE 202 ZIP + 4 ☐ 33169		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year . . . 92		N/A

Form 990 (2004)

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))					
105 Total (add line 104, columns (B), (D), and (E))					

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer <i>Carrie P. Meek</i>		Date <i>July 12, 2010</i>	
Paid Preparer's Use Only	Preparer's signature <i>[Signature]</i>		Date <i>6/22/10</i>	Check if self-employed ☐
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN	Preparer's SSN or PTIN (See Gen. Inst. W)
	MARCUMRACHLIN, A DIV OF MARCUM LLP		11-1986323	
	ONE SE THIRD AVENUE, 10TH FLOOR MIAMI, FL 33131		Phone no	305 377-4228

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2004

Name of the organization

THE CARRIE MEEK FOUNDATION, INC.

Employer identification number

35-2159943

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ►	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ►	NONE	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2004

JSA

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1	X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3a Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	757,633.	14,770.			772,403.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	757,633.	14,770.			772,403.
24 Line 23 minus line 17	757,633.	14,770.			772,403.
25 Enter 1% of line 23	7,576.	148.			
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 NOT APPLICABLE					
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					
c Total support for section 509(a)(1) test. Enter line 24, column (e)					
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					
e Public support (line 26c minus line 26d total)					
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2003) _____ (2002) _____ (2001) _____ (2000) _____ b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2003) _____ (2002) _____ (2001) _____ (2000) _____ c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					772,403.
d Add: Line 27a total _____ and line 27b total _____					
e Public support (line 27c total minus line 27d total)					772,403.
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					772,403.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					100.0000 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					%
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15					

Part V Private School Questionnaire (See page 7 of the instructions.)**NOT APPLICABLE**(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.) ----- ----- -----	31	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) ----- ----- -----		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**Check ☐ **a** if the organization belongs to an affiliated group Check ☐ **b** if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . .	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) . . .	37	
38	Total lobbying expenditures (add lines 36 and 37) . . .	38	
39	Other exempt purpose expenditures . . .	39	
40	Total exempt purpose expenditures (add lines 38 and 39) . . .	40	
41	Lobbying nontaxable amount Enter the amount from the following table -		
	If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 . . . \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 . . . \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41) . . .	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 . . .	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 . . .	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions)

		Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total	
Lobbying nontaxable						
45 amount						
Lobbying ceiling amount						
46 (150% of line 45(e)) . .						
47 Total lobbying expenditures						
Grassroots nontaxable						
48 amount						
Grassroots ceiling amount						
49 (150% of line 48(e)) . .						
Grassroots lobbying						
50 expenditures						

Part VI-B Lobbying Activity by Nonelecting Public Charities**NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h) . . .			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

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FORM 990, PART II - OTHER EXPENSES

PROGRAM

SERVICES

DONATIONS

OTHER

TOTALS

2,087.

1,327.

3,414.

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CARRIE MEEK 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	DIRECTOR & PRESIDENT 1.0	NONE	NONE	NONE
MARTY PINKSTON 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	DIRECTOR & VP 1.0	NONE	NONE	NONE
RICKART GLASGOW 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	DIRECTOR & TREASURER 1.0	NONE	NONE	NONE
ALETHA PLAYER 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
CHARLES WELLONS 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
CRAIG BARKLEY 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
CYNTHIA STAFFORD	BOARD MEMBER 1	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
1111 PARK CENTRE BLVD				
MIAMI GARDENDS, FL 33169				
DAVID WILSON	BOARD MEMBER	NONE	NONE	NONE
1111 PARK CENTRE BLVD	1			
MIAMI GARDENDS, FL 33169				
DR. CRAIG WILSON	BOARD MEMBER	NONE	NONE	NONE
1111 PARK CENTRE BLVD	1			
MIAMI GARDENDS, FL 33169				
GEORGE YAP	BOARD MEMBER	NONE	NONE	NONE
1111 PARK CENTRE BLVD	1			
MIAMI GARDENDS, FL 33169				
GUYLENE BERRY	BOARD MEMBER	NONE	NONE	NONE
1111 PARK CENTRE BLVD	1			
MIAMI GARDENDS, FL 33169				
DEAN HARRY HOFFMAN	BOARD MEMBER	NONE	NONE	NONE
1111 PARK CENTRE BLVD	1			
MIAMI GARDENDS, FL 33169				
HUGH WESTBROOK	BOARD MEMBER	NONE	NONE	NONE
1111 PARK CENTRE BLVD	1			

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES
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NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
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MIAMI GARDENDS, FL 33169				
JERRY RUSHIN 1111 PARK CENTRE BLVD	BOARD MEMBER 1	NONE	NONE	NONE
MIAMI GARDENDS, FL 33169				
LUCIA DAVIS-RAIFORD 1111 PARK CENTRE BLVD	BOARD MEMBER 1	NONE	NONE	NONE
MIAMI GARDENDS, FL 33169				
MARGARITA OLLETT 1111 PARK CENTRE BLVD	BOARD MEMBER 1	NONE	NONE	NONE
MIAMI GARDENDS, FL 33169				
MARIE ETINNE 1111 PARK CENTRE BLVD	BOARD MEMBER 1	NONE	NONE	NONE
MIAMI GARDENDS, FL 33169				
MIKE ABRAMS 1111 PARK CENTRE BLVD	BOARD MEMBER 1	NONE	NONE	NONE
MIAMI GARDENDS, FL 33169				
REV. DARRYL BAXTER 1111 PARK CENTRE BLVD	BOARD MEMBER 1	NONE	NONE	NONE
MIAMI GARDENDS, FL 33169				

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
RHONDA WIMBERLY 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
VINCENT BROWN 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
YOLANDA CASH-BROWN 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
DENISE MINCEY-MILLS 1111 PARK CENTRE BLVD MIAMI GARDENDS, FL 33169	BOARD MEMBER 1	NONE	NONE	NONE
GRAND TOTALS		NONE	NONE	NONE