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Form **990-EZ**

Department of the Treasury  
Internal Revenue Service

**Short Form**

**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

**2004**

**Open to Public Inspection**

**A** For the 2004 calendar year, or tax year beginning July 1, 2004, and ending June 30, 20 05

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

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59289 \*\*\*AGTO\*\*SCH 5--DIGIT 85283  
 EXPERIENCE PLUS INC I  
 1338 E STEAMBOAT BEND DR P109 R  
 TEMPE AZ 85283-2142 B 40 S

**D** Employer identification number  
86 : 0166541

**E** Telephone number  
( 480 ) 838-7629

**F** Group Exemption Number . . . ►

Counting method:  Cash  Accrual  
 Other (specify) ► **Liquidation**

**I** Website: ►

**J** Organization type (check only one) —  501(c) ( 3 ) ◀ (insert no)  4947(a)(1) or  527

**K** Check  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ► \$ 54

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 37 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	36
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule).	5c	
	6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
6b	Less: direct expenses other than fundraising expenses	6b		
6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c		
8	Other revenue (describe ► <b>Sale of Assets; Misc. change found</b> )	8	18	
9	<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	54	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	628
	14	Occupancy, rent, utilities, and maintenance	14	60
	15	Printing, publications, postage, and shipping	15	25
	16	Other expenses (describe ►)	16	
	17	<b>Total expenses</b> (add lines 10 through 16)	17	713
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	-659
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	-9226
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	<b>Net assets or fund balances at end of year</b> (combine lines 18 through 20)	21	-9885

**Part II Balance Sheets**—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 40 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	6157	22 0
23 Land and buildings		23
24 Other assets (describe ► <b>Prepaid Expenses</b> )	2620	24 0
25 <b>Total assets</b>	8777	25 0
26 <b>Total liabilities</b> (describe ► <b>Accounts Payable; DES Payable</b> )	18003	26 -9885
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	-9226	27 -9885

SCANNED APR 12 2010

STATUTE UNIT RECEIVED  
APR 05 2010

RECEIVED  
MAR 31 2010  
OGDEN, UT

0506

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