

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**€990-EZ** 

artment of the Treasury

## **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

2005

Open to Public Inspection

_			lar year	year, or tax year beginning JANUARY 1 , 2005, and ending		ding Di	DECEMBER 31		, 20 05			
4	Check if a	• •	use IRS PICO CENTER							tification number		
í		label or RICO CENTER								39		
1	Initial retu	- 1	print or	Number and street (or P O	box, if mail is not deliv	vered to street address)	Room/suite <b>E</b>	Telephone number				
4	Final retu	185 PO BOY 444										
ξ.	Amended	i return	Specific Instruc-	City or town, state or count	ry, and ZIP + 4	· - · · · · · · · · · · · · · · · · · ·	F	Group Ex	emot	ion		
<b>.</b>	Application	on pending	tions.	RICO, COLORADO 813	32			Number		<b>&gt;</b>		
ز 9_	● Secti	ion 501(c)(3)	organiz	ations and 4947(a)(1) none	xempt charitable ti	rusts must attach	G Account	ing metho	d: [	Cash Accrual		
<u> </u>			a con	npleted Schedule A (Form	990 or 990-EZ).		Other (s	pecify) 🕨				
		www	W RICC	OCENTER.ORG			H Check ▶	► 🔲 ıft	he or	ganization		
	Websit							equired to				
				nly one)— 🗹 501(c) ( 3 ) ◀		947(a)(1) or 527	<u> </u>			990-EZ, or 990-PF)		
K	Check >	► Light fithe or	ganızatı	on's gross receipts are norm	nally not more than	\$25,000. The organiza	ition need no	t file a reti	M WIT	ith the IRS; but if the		
				a return, be sure to file a co					\$	42.700.47		
	art I			ne 9 to determine gross receip					•	43,766.47		
14				enses, and Changes in		rund Balances	See page		$\neg$			
	1	Contributio	ns, gifts	s, grants, and similar amou	ints received			_1		43,766.47		
	2	Program s	ervice i	revenue including governi	ment fees and co	ntracts	INIT: '	2		<u> </u>		
	3	WICHIDOGGI	iip duce	and assessments		RECEIV	FD	🗀		0		
	4	mvesimem	t incom	ie				4	<u> </u>	, 0		
	5a	Gross amo	ount fro	m sale of assets other the	an inventory .	лов <del>5а в 2</del>	010	0				
Revenue	b	_000.000.	0, 0	or badio aria bares experi		<del></del>		0	- [			
	С (	Gain or (lo	ss) fron	n sale of assets other tha	in inventory (line 5	5a less_line_5b) (atta	ch_schedule	). 5	c	0		
	6	Special eve	ents and	d activities (attach schedule	e). If any amount is	from gaming shed	Mere ►					
	a	Gross reve	enue (no	ot including \$	0 of cont	tributions	4	_				
		reported o	•	•		10-1		0				
	ь	•		nses other than fundraisir		1 1		0				
	C			ss) from special events a				6	င	0		
	7a			ventory, less returns and	•	1 _ 1				,		
	b	Less cost		_	anowarioes .	7b		0				
			_	ss) from sales of inventor	ny (line 7a less line	· · · · <del></del>		7.	c	0		
	8	Othe Reve	SEN.	ED ► NA	ry (mic ra less int	5 70)		8		0		
	9	Total-reve	nue (a	dd lines 1, 3, 4, 5c, 6c,	. 7c. and 8).					43,766.47		
	10			r applunts paid (attach so						5,500.00		
	11	EL MA	and to a					1		0,555.55		
S	ł							12				
enses	12			mpensation, and employe				1:				
ě	13			and other payments to ir								
Ä	14			utilities, and maintenance						0		
_	15	Printing, pu	ublicati	ons, postage, and shippir describe ► <b>TRAINING,</b>	ng			1!		<u>~</u>		
	16 17	Total exec	enses (	add lines 10 through 16\	DUES, INVES I M	ENI FEES		\	_	1,226.51		
				add lines 10 through 16)						6,726.51		
Net Assets	18			for the year (line 9 less I					<del>2</del>  -	37,039.96		
SS	19	Net assets	or fun	nd balances at beginning	of year (from lin	e 27, column (A)) (n	nust agree	with	_	07.005.40		
t A		end-of-yea	ır figure	e reported on prior year's	s return)			19		27,205.16		
Š	20	Other chan	nges in	net assets or fund balance	ces (attach explar	nation)		20		0		
	21			d balances at end of year						64,245.12		
	art II	balance :		s—If Total assets on line		e \$250,000 or more,			d of			
			•	See page 41 of the instruc	•			ning of year	,	(B) End of year		
22	Casl	h, savings, a	and inv	estments			2	7,205.16		64,245.12		
23		d and buildir							23	0		
24	Othe	er assets (de	escribe	► <u>N/A</u>		)			24	0		
25									25	0		
26	Tota	al liabilities (	(describ	De ► N/A	<u>.</u>	)			26	0		
27	Net	assets or fi	und ha	lances (line 27 of column	n (R) must sares	with line 21)	1 2	7 205 16	127	64 245 12		

Pa	rt III Statement of Program Service Accom	plishments (See page 42	of the instruction	ns.)		Expen	ses	
	it is the organization's primary exempt purpose?				(Rec		501(c)(3)	
Des	cribe what was achieved in carrying out the organiz	ation's exempt purposes. In	a clear and conc	ise manner.	and	4947(a)(	anizations (1) trusts;	
des	cribe the services provided, the number of persons be	nefited, or other relevant info	rmation for each p	rogram title.	optio	onal for c	others.)	
28 Grant awarded to Rico Historical society for historical preservation to preserve and enrich								
the quality of life for Rico residents, visitors and employees.								
(Grants \$ 5,500) If this amount includes foreign grants, check here ▶ □ 28a								
					28a	-	5,500	
<b>29</b> .								
•								
	Grants \$ ) If this amount incl				29a			
30 .								
	Grants \$ ) If this amount incl	udes foreign grants, check	here	<u>. ▶ □</u>	30a			
	Other program services (attach schedule)							
	Grants \$ ) If this amount incl  Fotal program service expenses (add lines 28a th	udes foreign grants, check	here	<u>. ▶ ⊔</u>	31a 32		E 500	
Pa	rt IV List of Officers, Directors, Trustees, and Key	Employees (List each one eve	n if not compensate	d See nage 4		5,500		
	<u> </u>	(B) Title and average	(C) Compensation	(D) Contribution			xpense	
	(A) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred compe		acco other a	unt and Illowances	
DO	NOVAN SPITZMAN, RICO, CO 81332							
		BOARD MEMBER, 1 HR	0		0			
ВА	RB TURRIN, PO BOX 207 RICO, CO 81332	BOARD MEMBER, 1 HR	0		0	0 0		
		BOARD MEMBER, 111K						
NIC	OLE PIETERSE, RICO, CO 81332	BOARD MEMBER, 1 HR	l 0		0		0	
	PRADA DETTE DICO CO 04222	<u> </u>						
.DA	RBARA BETTS, RICO, CO 81332	BOARD MEMBER, 1 HR	0		0		0	
Pa	rt V Other Information (Note the attachm	ent requirement in Gene	ral Instruction V	page 14.)		1	Yes No	
33	Did the organization engage in any activity not pr	-					100 110	
55		· · · · · · · · · · · ·	•	i a detailed		33	🗸	
34	Were any changes made to the organizing or gov			S? If "Yes."	• •			
						34		
35	If the organization had income from business activities,				not	}	İ	
	reported on Form 990-T, attach a statement explaining	your reason for not reporting t	he ıncome on Form	990-T		-		
а	Did the organization have unrelated business gros	ss income of \$1,000 or more	e or 6033(e) notice	e, reporting,	and		<b>✓</b>	
	•					35a 35b	<del></del>	
	If "Yes," has it filed a tax return on Form 990-T f	<u> </u>				350		
36	Was there a liquidation, dissolution, termination, o statement.)		uring the year? (If	"Yes," attac	n a	36	✓	
37a	Enter amount of political expenditures, direct or inc	lirect as described in the in-	structions > 37	a		0		
	Did the organization file Form 1120-POL for this					37ь		
	Did the organization borrow from, or make any loa	-		nplovee <b>or</b> w	ere			
	any such loans made in a prior year and still unp					38a	<b>✓</b>	
b	If "Yes," attach the schedule specified in the line	e 38 instructions and enter						
	involved		<u>38</u>	b		-		
39	501(c)(7) organizations. Enter:							
	Initiation fees and capital contributions included of		20	<del></del>		-		
	Gross receipts, included on line 9, for public use		· · · · · —			1		
4Ua	501(c)(3) organizations. Enter amount of tax imposection 4911 ▶ ; section 4912	<u> </u>	ring the year unde ection 4955 ▶	er: 	0			
b	501(c)(3) and (4) organizations. Did the organization e	engage in any section 4958 e		_	the	40b	✓	
^	year or did it become aware of an excess benefit tra Enter amount of tax imposed on organization ma	• •		•	•	_ <del>100</del>		
C	sections 4912, 4955, and 4958						0	
d	Enter amount of tax on line 40c reimbursed by the		· · ·					

_	•
Pana	

Part V	Oth	er Informa	ation (N	ote th	e attac	chment re	equirement i	n Genera	al Instru	uction	V, page	€ 14.)	(Cont	inued	)	
42a Th	ist the states with which a copy of this return is filed. ► COLORADO  he books are in care of ► ERIN NEER  ocated at ► 27696 HIGHWAY 145, DOLORES, COLORADO  ZIP + 4 ► 81323															
ov ac If ' Se <b>c</b> At If ' <b>43</b> Se	er a finar count)? "Yes," en ee the ins any time "Yes," en ection 494	ter the name tructions for during the ter the name ter the name tructions for during the ter the name truction in the terminal i	nt in a formal in	foreign of the foreign ons and foreign of the forei	country country dilling did the country	y (such as y: ► requirement organizat y: ► ts filing Fo	ion have an in a bank accor- ents for Form non maintain a arm 990-EZ in or accrued du	TD F 90-2 in office of <b>Fo</b>	22.1. outside o	of the U	J.S.?.	r finan	cial	42b		No √
Please Sign Here	and t		er	Tune			is return, including preparer (other th									
Paid Preparei Use Only	Preparer's signature Firm's name (or yours if self-employed),  Preparer's signature Firm's name (or yours if self-employed),							<u> </u>	r's SSN	or PTIN (\$	See Gen	Inst W)				
· -													F	orm <b>99</b>	0-EZ	(2005)

### SCHEDULE A

(Form 990 or 990-EZ)

## Organization Exempt Under Section 501(c)(3)

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

Department of the Treasury Internal Revenue Service

Supplementary Information—(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ 2005

OMB No 1545-0047

Name of the organization Employer identification number **RICO CENTER** 20 5827289 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.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation employee benefit plans & account and other than \$50,000 per week devoted to position deterred compensation allowances N/A Total number of other employees paid over \$50,000. 0 Part II-A 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 N/A Total number of others receiving over \$50,000 for Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation N/A Total number of other contractors receiving over 0

\$50,000 for other services .

_		•
Pag	е	4

Part III		Statements About Activities (See page 2 of the instructions.)							
1	att or	empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities   (Must equal amounts on line 38, rt VI-A, or line i of Part VI-B)	1		✓				
	Org org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of a lobbying activities							
2	sul wit	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or the any taxable organization with which any such person is affiliated as an officer, director, trustee, majority oner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)							
а	Sa	le, exchange, or leasing of property?	2a		1				
b		nding of money or other extension of credit?	2b		1				
C		rnishing of goods, services, or facilities?	2c		1				
d	Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		<b>✓</b>				
e	Tra	ansfer of any part of its income or assets?	2e		✓				
3а		you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how u determine that recipients qualify to receive payments.)	3a		1				
b	Do	you have a section 403(b) annuity plan for your employees?	3b		<b>✓</b>				
C	Du	ring the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		<b>✓</b>				
4a		d you maintain any separate account for participating donors where donors have the right to provide advice on			✓				
h		e use or distribution of funds?	4a 4b		1				
				L					
Pai	1 IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)	İ						
The	orga	anization 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	닏	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).							
8	님	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 state ▶			<b>-</b>				
10	Ц	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Sect (Also complete the <b>Support Schedule</b> in Part IV-A.)							
11a	Z	An organization that normally receives a substantial part of its support from a governmental unit or from the gene 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	ral pub	lic. Se	ection				
11b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)							
12	Ц	An organization that normally receives: (1) more than 33%% of its support from contributions, membership fees, from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 from gross investment income and unrelated business taxable income (less section 511 tax) from businesse organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)	⅓% of	ıts su	pport				
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and suppresseribed in: (1) lines 5 through 12 above, or (2) sections 501(c)(4), (5), or (6), if they meet the test of sections the box that describes the type of supporting organization: Type 1 Type 2		)(2). C					
		Provide the following information about the supported organizations. (See page 6 of the instructions	.)						
		(a) Name(s) of supported organization(s)  (b) Line	numb n abov						
			.,						
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instruc	tions.)						

	: You may use the worksheet in the instructions						ccounting.
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2003	(c) 2002	(d) 200		(e) Total
15	Gifts, grants, and contributions received (Do						
	not include unusual grants. See line 28.).						
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	1,534.24	0	0		0	1,534.24
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	41,009.79	0	0		0	41,009.79
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	42,544.03	0	0		0	42,544.34
24	Line 23 minus line 17	42,544.03	0	0		0	42,544.03
25	Enter 1% of line 23	425,44	0	0		0	
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	n (e), line 24 .     ,	▶	26a	850.88
b	Prepare a list for your records to show the name governmental unit or publicly supported organizations.	ation) whose tota	gifts for 2001 th	rough 2004 exce	eded the	OCP	0
_	amount shown in line 26a. Do not file this list with	=				26b 26c	42,544.03
d	Total support for section 509(a)(1) test: Enter lin Add. Amounts from column (e) for lines: 18					200	42,044.00
u		0	26b	0		26d	1,534.24
е		· · · · · ·				26e	41,009.79
f	Public support percentage (line 26e (numera	tor) divided by li	ne 26c (denomi	nator))	<b>.</b>	26f	96 %
27	Organizations described on line 12: a For person," prepare a list for your records to show to not file this list with your return. Enter the	the name of, and	total amounts rec	eived in each yea			
	(2004) (2003)						
b	For any amount included in line 17 that was received show the name of, and amount received for each y (Include in the list organizations described in lines 5 the difference between the amount received and amounts) for each year	rear, that was mor through 11b, as w the larger amount	e than the larger of vell as individuals.) described in (1) of	of (1) the amount Do not file this li or (2), enter the s	on line 25 fo st with you um of these	or the ye r return. e differe	ear or <b>(2)</b> \$5,000. After computing nces (the excess
	(2004) (2003)		. (2002)	•	(2001) .		
С	Add Amounts from column (e) for lines: 15				•	27c	
d		and line 27b total				27d	
е	Public support (line 27c total minus line 27d tot					27e	
f	Total support for section 509(a)(2) test: Enter ar	nount from line 2	3, column (e) .	. ► 27f		] [	
g	Public support percentage (line 27e (numera	tor) divided by li	ne 27f (denomin	ator))	▶	27g	%
h	Investment income percentage (line 18, colu	mn (e) (numerate	or) divided by lir	ne 27f (denomin	ator)}. ▶	27h	<u>%</u>

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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 bnef

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Pa	Private School Questionnaire (See page 7 of the instructions.)  (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,	29	Yes	No
	other governing instrument, or in a resolution of its governing body?	29		<b></b> -
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?	31		
	If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
а	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		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c		<u> </u>
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:			
а	Students' nghts or privileges?	33a		
b	Admissions policies?	33Ь		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurncular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement)	<u> </u>		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		<u> </u>
b	Has the organization's right to such aid ever been revoked or suspended?	34b		

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 . . .

Pa	Int VI-A Lobbying Expenditures by El (To be completed ONLY by an				e instructions.)	
Che	eck ▶ a ☐ if the organization belongs to an affilia				and "limited control	" provisions apply
	Limits on Lobbyii	-			(a) Affiliated group totals	(b) To be completed for ALL electing
	(The term "expenditures" mea			36	<del>                                      </del>	organizations
36	Total lobbying expenditures to influence public	· · ·		· · ·  -==	<del> </del>	
37 38	Total lobbying expenditures to influence a legis	• •		• • •	<del>                                     </del>	
39	Total lobbying expenditures (add lines 36 and 3 Other exempt purpose expenditures	• • •				
40	Total exempt purpose expenditures (add lines		-			
41	Lobbying nontaxable amount. Enter the amount	•				
••		obbying nontaxa	-		İ	
	Not over \$500,000 20%				ļ	
	Over \$500,000 but not over \$1,000,000 . \$100,6					
	Over \$1,000,000 but not over \$1,500,000 . \$175,000	000 plus 10% of th	e excess over \$1,0	000,000 } 41		
	Over \$1,500,000 but not over \$17,000,000. \$225,0	000 plus 5% of the	e excess over \$1,5	500,000		
		0,000				
42	Grassroots nontaxable amount (enter 25% of I					
43	Subtract line 42 from line 36. Enter -0- if line 4					·
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than li	ne 38	· · ·   44	1	<u> </u>
	Caution: If there is an amount on either line 43	3 or line 44, you r	nust file Form 47	<sub>20.</sub>		
_		eraging Perior				
	(Some organizations that made a section	n 501(h) election	do not have to d	complete all of the		pelow.
	See the instructions for	or lines 45 throug	n 50 on page 1	or the instruction	ons.)	
		Lob	bying Expenditu	res During 4-Y	ear Averaging P	eriod
	Calendar year (or	(a)	(b)	(c)	(d)	(e)
	fiscal year beginning in) ▶	2005	2004	2003	2002	Total
45	Lobbying nontaxable amount					
46	Lobbying ceiling amount (150% of line 45(e))					
47	Total lobbying expenditures					
48	Grassroots nontaxable amount					
49	Grassroots ceiling amount (150% of line 48(e))					
50	Grassroots lobbying expenditures					
_	Lobbying Activity by Nonelectification (For reporting only by organization)			Part VI-A) (See	nage 11 of th	ne instructions )
Dur						
	ing the year, did the organization attempt to influence public opinion on a legislative in				any Yes No	Amount
	Volunteers		am, amougn ano	455 61.		
b	Paid staff or management (Include compensati		eported on lines	c through h.)		7
c		•	•			
d						
е	Publications, or published or broadcast statem	ents			_	
f	Grants to other organizations for lobbying purp	ooses				
g	Direct contact with legislators, their staffs, gov	emment officials,	or a legislative b	oody		
h	•	=	•			+
i	Total lobbying expenditures (Add lines c through f "Yes" to any of the above, also attach a state	gh <b>h.</b> ) :ement giving a d	etailed description	on of the lobbyin	L g activities.	<u> </u>

Par	t VII			ransfers To and Transace page 12 of the instruction		Relationships	With	Nonc	harit	able
<b>i</b> 1			-	indirectly engage in any of the	_	-			d in s	ection
а		• •		to a noncharitable exempt orga		5 1 5			Yes	No
_		•	· · · · · · ·					51a(i)		
	• • •						•	a(ii)		
b		er transactions:					•			
	(i)	Sales or exchange	es of assets with a	noncharitable exempt organizat	tion			b(i)		
	(ii)	=		itable exempt organization				b(ii)		
	(iii)			ner assets				b(iii)		
	(iv)	Reimbursement a	rrangements					b(iv)	ļ	
	(v)	Loans or loan gua	arantees					b(v)		L
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations				b(vi)	<u> </u>	<u> </u>
C	Sha	ring of facilities, eq	uipment, mailing li	sts, other assets, or paid emplo	yees			С		
d	goo	ds, other assets, o	r services given by	' complete the following schedule y the reporting organization. If the n column (d) the value of the good	he organization	n received less that	n fair n			
	e no.	(b) Amount involved	Name of nonc	(c) chantable exempt organization	Description o	(d) f transfers, transaction	s, and sh	naring arr	angem	ents
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				<del> </del>				-		
					1			<del></del>		
	des	cribed in section 50	-	affiliated with, or related to, on other than section 501(c)(3)) or its:				☐ Ye:	s [	] No
		(a)		(b)		(c)				
		Name of organiz	ation	Type of organization		Description of re	iationship	)		
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