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## **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treesury

Internal Revenue Service

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

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

Name of the organization		Employer ide	ntification number	
East Kentucky Rescue, Inc		·	20-0176178	
Part I Compensation of the Five High				and Trustees
(See page 1 of the instructions. I	List each one. If there a	re none, enter "N	lone.")	
(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 ▶	0			
Part II-A Compensation of the Five High				
(See page 2 of the instructions L		individuals or firn	ns) If there are no	one, enter "None ")
(a) Name and address of each independent contractor p	paid more than \$50,000	(b) Type	of service	(c) Compensation
NONE				·
Total number of others receiving over \$50,000 for professional services	o			
Part II-B Compensation of the Five High				
(List each contractor who perform			vices, whether inc	dividuals or
firms. If there are none, enter "No				
(a) Name and address of each independent contractor p	aid more than \$50,000	(b) Type	of service	(c) Compensation
NONE				
***************************************				
Total number of other contractors receiving over \$50,000 for other services	0		<b>-</b>	

Schedule A (Form 990 or 990-EZ) 2007

(HTA)

c Did the organization make a distribution to a donor, donor advisor, or related person?

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year .

Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year . .

d Enter the total number of donor advised funds owned at the end of the tax year .

Pari	IV	Reason for Non-Private	Foundation S	tatus (See pages 4 thre	ough 8 of the	instructions)			
certify that the organization is not a private foundation because it is: (Please check only ONE applicable box )  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 hospi	tal service organiz	ation Section 170(b)(1)(A)(i	н)				
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 a	X	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.)							
11 b		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)							
12	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)								
		Provide the following inf	ormation about	the supported organization	ations. (See p	age 8 of the inst	tructions )		
Namo	(a) ime(s) of supported organization		(b)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	organization listed in		(e) Amount of support		
					Yes	No			
								ō	
								0	
								0	
								0	
			<del> </del>					0	
Total					L			0	
14									

	irt IV-A . Support Schedule (Complete only						
	te: You may use the worksheet in the instructions	for converting f			hod of a	ccounti	ng.
_	lendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2	003	(e) Total
15	Gifts, grants, and contributions received (Do						
	not include unusual grants. See line 28.)	1,375	1,000	28,368		380	31,123
16	Membership fees received						0
17	Gross receipts from admissions, merchandise	j					
	sold or services performed, or furnishing of						
	facilities in any activity that is related to the						
	organization's charitable, etc., purpose						0
18	Gross income from interest, dividends,						
	amounts received from payments on securities		•			1	
	loans (section 512(a)(5)), rents, royalties,					į	
	income from similar sources, and unrelated		,			1	
	business taxable income (less section 511 taxes) from businesses acquired by the						
	organization after June 30, 1975	ļ				- 1	0
19	Net income from unrelated business				<b>-</b> -		0
	activities not included in line 18						О
20	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on		1	'		- 1	
	its behalf					ĺ	0
21	The value of services or facilities furnished to						
	the organization by a governmental unit						
	without charge. Do not include the value of		İ			ĺ	
	services or facilities generally furnished to the						
	public without charge						0
22	Other income. Attach a schedule. Do not		ł			ĺ	
	include gain or (loss) from sale of capital assets						0
23	Total of lines 15 through 22	1,375	1,000	28,368		380	31,123
24	Line 23 minus line 17	1,375	1,000	28,368		380	31,123
25	Enter 1% of line 23	14	10	284		- 4	
26	_		amount in column		<b>&gt;</b>	26a	622
	Prepare a list for your records to show the name of an					1	
	governmental unit or publicly supported organization) amount shown in line 26a. Do not file this list with y						
	Total support for section 509(a)(1) test Enter line 24,			SO EXCESS AITIOUIII		26b	23,693
	I Add Amounts from column (e) for lines 18	19			. •	26c	31,123
`	22	26		 33		26d	23,693
•	Public support (line 26c minus line 26d total)		20,0	<del>50</del>		26e	7,430
	Public support percentage (line 26e (numerator) di	vided by line 26d	(denominator))			26f	23 87%
27	Organizations described on line 12: a For am				ved from		
•	prepare a list for your records to show the name of, an						
	file this list with your return. Enter the sum of such	amounts for each	year <sup>.</sup>				-
	(2006) (2005)		(2004)		(2003)		
ı	For any amount included in line 17 that was received f						
	to show the name of, and amount received for each ye	ear, that was more	than the larger o	f (1) the amount o	n line 25	for the y	ear or (2)
	\$5,000 (Include in the list organizations described in li						
	After computing the difference between the amount re	ceived and the lar	ger amount descri	ibed in (1) or (2), e	enter the	sum of th	nese
	differences (the excess amounts) for each year						
	(2006)		(2004)		(2003)		.,
,	Add Amounts from column (e) for lines 15	16					
•	17 20				_	27c	0
c	Add Line 27a total and	line 27h total		<del>-</del> '		27d	0
e	Public support (line 27c total minus line 27d total)					27e	- 0
f	Total support for section 509(a)(2) test. Enter amount (	from line 23. colur	nn (e)	-   27f	_	-10	
	Public support percentage (line 27e (numerator) di				<b>&gt;</b>	27g	0 00%
	Investment Income percentage (line 18, column (e)	• •	•		<b></b>	27h	0 00%
28	Unusual Grants: For an organization described in line	10, 11, or 12 that	received any unu	sual grants during	2003 thi	ough 20	06aprepare a at a
	a list for your records to show, for each year, the name	of the contributor	, the date and am	ount of the grant.	and a bri	of descri	ption of
	the nature of the grant. Do not file this list with your	return. Do not inc	lude these grants	in line 15			

Par	Lobbying Expenditures by Electing (To be completed ONLY by an eligible				ctions.)	
Check					ted control" provis	sions apply
Limits on Lobbying Expenditures  (The term "expenditures" means amounts paid or incurred.)					(a) Affiliated group totals	(b) To be completed for all electing
26	Total lobbying expenditures to influence public opinion (gra			36		organizations
36 37	Total lobbying expenditures to influence a legislative body			. 37		
38	Total lobbying expenditures (add lines 36 and 37)			. 38	0	
39	Other exempt purpose expenditures			39		
40	Total exempt purpose expenditures (add lines 38 and 39)			40	0	0
41	Lobbying nontaxable amount Enter the amount from the fo			75		. <u> </u>
7.		ying nontaxable	amount is—			
	Not over \$500,000 20% of th					
			excess over \$500,000	,		
	Over \$1,000,000 but not over \$1,500,000 \$175,000	•	•			
			cess over \$1,500,00			
	Over \$17,000,000	0				
42	Grassroots nontaxable amount (enter 25% of line 41)			42	0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is more that	an line 36 .		43	0	0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than	an line 38		44	0	0
	Caution: If there is an amount on either line 43 or line 44,	you must file Fort	n 4720			· · · · · · · · · · · · · · · · · · ·
	(Some organizations that made a section 50 See the instructions for lin	es 45 through 50	on page 13 of the in	structions)	<u> </u>	
		LODD	ing Expenditures	During 4-1e	ar Averaging P	erioa 
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45	Lobbying nontaxable amount					0
46	Lobbying ceiling amount (150% of line 45(e))					0
47	Total lobbying expenditures					0
48	Grassroots nontaxable amount					0
49	Grassroots ceiling amount (150% of line 48(e))					0
50	Grassroots lobbying expenditures					0
Par	VI-B Lobbying Activity by Nonelecting Po					
	(For reporting only by organizations that	at did not com	olete Part VI-A) (	See page 14	of the instruct	ions.)
_	the year, did the organization attempt to influence national			у	Yes No	Amount
	at to influence public opinion on a legislative matter or refere	andam, urough u	ie use oi.		l x	
a	Volunteers	 ses reported on li	nes e through h \			
	b Paid staff or management (Include compensation in expenses reported on lines c through h.)					
_	d Mailings to members, legislators, or the public					
	man and a second a					
	f Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body					
	Direct contact with legislators, their stairs, government unic Rallies, demonstrations, seminars, conventions, speeches,				X	
	Railies, demonstrations, seminars, conventions, speeches, Fotal lobbying expenditures (Add lines c through h.)				<del>                                     </del>	0
•	f "Yes" to any of the above, also attach a statement giving		tion of the lobbying a	 ictivities	L	
	. 100 to any or the above, also attach a statement giving		J. J		chedule A /Form 99	IO or 990 EZ\ 2007