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Filing Relief UCP

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)

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form

The exponsion may have to use a copy of this styric to satisfy state recoding requirements.

OMB No 1545-1150 2007

Open to Public

		nue Service		► The organization may have to	use a copy of this retu	m to satisfy	state reporti	ng requireme	nts		Inspection
_			ar year	r, or tax year beginning	June 1st	, 200	7, and end	ding	May 31	lst	, 20 08
_		Check if applicable Please C Name of organization D Emplo								tufication number	
	Address	use IRS label or Appleton North Sports Booster Club, Inc. 39							39		1993039
		ame change print or Number and street (or P.O. box, if mail is not delivered to street address). Room/suite E Telep						E Telepho	ne nu	mber	
Ц	Initial retu		type. See	5000 North Ballard Roa				·	( 920 )		996-0331
$\vdash$	Terminati		Specific						F Group E		
H	Amended	a return on pending	Instruc- tions.	_	y, and Zii + 4				Number		DUON ►
닏			_	Appleton, WI 54913			attach	G Accoun	nting meth		✓ Cash ☐ Accrual
	• Secti	ion 501(c)(3)		ations and 4947(a)(1) nonex		usts must	attacn	1	(specify) ►	UU	▼ Cash
	-		a cui	inpleted Scheddle A (Forms							
			, annle	tonnorthboosterclub.cor	n						rganization
				_					required to		
_				nly one)— 🕢 501(c) ( <b>3</b> ) ◀		17(a)(1) or					990-EZ, or 990-PF)
Κ				on is not a section 509(a)(3) st				ots are norm	nally <b>not</b> mo	ore th	an \$25,000 A return is
_				ization chooses to file a return							
				ne 9 to determine gross receip						▶ \$	89,367
P	art I	Revenue	, Expe	enses, and Changes in	Net Assets or	Fund Ba	lances (	See page	55 of th	ie in:	structions.)
	1	Contributio	ns, gifts	s, grants, and sımılar amoui	nts received .				_	1	
	2	Program s	ervice	revenue including governi	nent fees and con	itracts .				2	
	3	Membersh	ip dues	s and assessments .						3	2,825
	4	Investment	incom	ne						4	4,660
≘	5a	Gross amo	ount fro	om sale of assets other that	an inventory .		5a				
3	ь			er basis and sales evoens			5b				
۹ _				sale of assets		rom lin	e 5a (attac	ch schedule	) 🖳	5c	
∍ã	6		•	d activities (a		ı gami	i <b>ng,</b> checl	k here			
≽ૄં	а	Gross reve		•		ions	0.				
Revenue	_	reported o	•	•			6a		81,882		
		•		enses other t		• •	6b		22,381		
3	1		•	oss) from spe		line 6	b from lin	ne 6a		6c	59,501
-	7a			ventory, less			7a				
	b					•	7b				
Ĺ	C		-	oss) from sales of inventor	v Subtract line 7h	o from line	7a			7c	
5	8	Other reve		•	y Cabilact mic 72	3 110111 11110	,,,,,		, [	8	
	9			add lines 1, 2, 3, 4, 5c, 6c,	. 7c. and 8					9	66,986
_	10			ar amounts paid (attach so						10	· · · · · · · · · · · · · · · · · · ·
	11			or for members		•	•			11	
Ś	1	•		ompensation, and employe	a hanafite	•	•		. –	12	<del></del>
Se	13						• •	•	· · ⊢	13	
Expenses	13			and other payments to in					. –	14	
Ä	14	•	•	, utilities, and maintenance					· · -	15	
	15	Other exp	ublicati	ions, postage, and shippir (describe ► <u>Athletic disl</u>	iy bursements-new	eguipmer	nt.trainine	 g.allowand		16	48,153
	17			Add lines 10 through 16						17	48,153
_				t) for the year. Subtract lin	· · ·					18	18,833
Assets	18		•	•							<del></del>
SS	19			nd balances at beginning						19	113,057
7	20			e reported on prior year's net assets or fund baland		 ation\			· · ⊢	20	
Net	20			nd balances at end of year			20	•	· -	21	131,890
•	art II			s—If Total assets on line				file Form		_	
	en e m	Dalation		See page 60 of the instruc		Ψ	11010		inning of yea		(B) End of year
_	0 0-		•		ŕ			\$ 4, 50gi	113,05		
2				vestments		•				23	
2										24	
2			escribe	₽▶			)		113,05	_	
2		al assets .						<del></del>	1 13,03	26	
2	b Tot	al liabilities	(descri	be ► alances (line 27 of columr	(R) must sarea "	with line 2	1)	<del> </del>	113,05	$\overline{}$	
2				ork Reduction Act Notice, se			·/ · ·	Cat No 10		. 121	Form <b>990-EZ</b> (2007)
	IVal	vy not allu Fi	~~~ ****		, and deputate that	40.10113.		Ju. 110 10			(-50)

Part III Statement of Program Service Accomplishments (See page 60 of the instructions.)							ses	_
What is the organization's primary exempt purpose? Sports Booster Activities and (4) or							r 501(c)(3) anizations	
describe the services provided, the number of persons benefited, or other relevant information for each program title.							(1) trusts, others)	
	ANSBC helps provide additional sporting equipn student athletic needs. The club contributes to a dance and school events such as Homecoming a							
9	Grants \$ ) If this amount incli	▶ □	28a		70,754	4		
		29a						
	Grants \$ ) If this amount incli				254			_
30 .			• • • • • • • • • • • • • • • • • • • •					
i	Grants \$ ) If this amount incli	udes foreign grants, check	here	▶ □	30a			
	Other program services (attach schedule)							_
		udes foreign grants, check			31a			
	Total program service expenses. Add lines 28a th				32		70,754	4_
Pa	rt IV List of Officers, Directors, Trustees, and Key	(B) Title and average	n if not compensate (C) Compensation	d. See page 6 (D) Contributio			Expense	-
	(A) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper	plans &	acce	ount and allowances	_
	nce Biskupic	Dunaidant Dinastas 2			0			
	405 E. Rossevelt, Appleton, WI President, Director - 2 0							<u>0</u>
	Jim Clemmons 4909 N Redcrestted Ct, Appleton, WI V. Pres., Director - 2 0						(	0
	Jeff Badger 11 Overland Circle, Appleton, WI Treasurer, Director - 2 0						(	0_
	deen Morgan 20 Wellington, Appleton, WI	Secretary,Director - 2	0		0		(	0
	rt V Other Information (Note the statemen	nt requirement in Genera	I Instruction V.)			<b>,</b> -	Yes No	_
33	Did the organization make a change in its activitied detailed statement of each change	es or methods of conductir	ng activities? If "Y	es," attach a	l	33	1	
34	Were any changes made to the organizing or gov					34		
35	attach a conformed copy of the changes If the organization had income from business activities, s				not			
	reported on Form 990-T, attach a statement explaining y	your reason for not reporting t	he income on Form	990-T				
а	Did the organization have unrelated business gros proxy tax requirements?	s income of \$1,000 or mor	e or 6033(e) notice	e, reporting,	and	35a		
b	If "Yes," has it filed a tax return on Form 990-T for					35b		_
36							✓	
37a	Enter amount of political expenditures, direct or inc		structions. ► 37	a	0	_		
b	Did the organization file Form 1120-POL for this	year?				37b	<b>✓</b>	F
38a	Did the organization borrow from, or make any loa any such loans made in a prior year and still unpa					38a	✓	
b	If "Yes," attach the schedule specified in the line							Í
_	involved			b				ĺ
39	501(c)(7) organizations. Enter.	line o	30					ĺ
	Initiation fees and capital contributions included of Gross receipts, included on line 9, for public use		39 39	-				

Ρ	age	3
•	-90	•

Par	t V	Other Information (Note the statement red	quirement in General Instruc	ction v.) (Cont	inuea)		
40a		<i>)(3) organizations.</i> Enter amount of tax imposed on 4911 ▶; section 4912 ▶ _				G	/aal Nia
	year o	(3) and (4) organizations Did the organization engagor did it become aware of an excess benefit transac	tion from a prior year? If "Yes,"	attach an explar		40b	res No √
	the ye			<b>-</b>			:
d	Enter	amount of tax on line 40c reimbursed by the org	ganization , , , , , , ,	. •			*;
	transa	ganizations. At any time during the tax year, was action?				40e	✓
41	List th	ne states with which a copy of this return is filed.					
42a		ooks are in care of ▶			no. ▶ ( 4   ▶		
b	over a accou	s," enter the name of the foreign country. >	s a bank account, securities a	ccount, or othe	r financial	42b	/es No
С	At any	he instructions for exceptions and filing requirem y time during the calendar year, did the organiza s," enter the name of the foreign country.				42c	✓
43		on 4947(a)(1) nonexempt charitable trusts filing Founter the amount of tax-exempt interest received	or accrued during the tax year	·	▶   43	•	. ▶□
Plea Sign Here		Under penalties of perjury, I declare that I have examined the and belief, it is true, correct, and complete. Declaration of Signature of officer  David Holloway, Treasurer (2010)  Type or print name and title	nis return, including accompanying sch preparer (other than officer) is based of	edules and stateme on all information o Date	ents, and to the f which prepare	best of my er has any	knowledge knowledge
Paid Prepa	ror's	Preparer's signature	Date	Check if self- employed ▶	Preparer's SSN	or PTIN (See	Gen Inst X)
Use (	1	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN Phone no	<b>&gt;</b> ( )		
				·	F	orm <b>990</b> -	<b>EZ</b> (2007)

# Filing Relief VCP

### **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 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

2007

OMB No 1545-0047

Name of the organization Employer identification number 1993039 39 Appleton North Sports Booster Club, Inc. Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions. List each one. If there are none, enter "None.") (e) Expense account and other (d) Contributions to (a) Name and address of each employee paid more (b) Title and average hours employee benefit plans & (c) Compensation than \$50,000 per week devoted to position deferred compensation allowances None Total number of other employees paid over \$50,000 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 None

Total number of others receiving over \$50,000 for professional services

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
None		
Total number of other contractors receiving over \$50,000 for other services		

	-
Dago	

Par	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)		<b>/</b>
	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	400	
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.)		
а	Sale, exchange, or leasing of property?		✓
b	Lending of money or other extension of credit?		✓
С	Furnishing of goods, services, or facilities?		✓
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? 2d		1
е	Transfer of any part of its income or assets?		✓
3а	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)		✓
b	Did the organization have a section 403(b) annuity plan for its employees?		✓
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement 3c		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . 3d		✓_
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g		<b>√</b>
	Sid the diganization make any taxable distributions should be settled 1999.		<del>_</del>
С	Did the organization make a distribution to a donor, donor advisor, or related person?		<u> </u>
d	Enter the total number of donor advised funds owned at the end of the tax year		0
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year .		0
f	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 amounts in such funds or accounts		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		0

Pa	rt  \	Reason for Non-Private	e Foundation	Status (See pages 4	through 8 c	of the instruc	tions.)
l cer	tıfy	that the organization is not a priva		•		plicable box)	
5		A church, convention of churches	s, or association of	of churches Section 170	D(b)(1)(A)(ı)		
6		A school Section 170(b)(1)(A)(II)	(Also complete Pa	art V)			
7	7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)						
8		A federal, state, or local government	ent or governmen	ital unit Section 170(b)(	1)(A)(v)		
9		A medical research organization of and state ▶				(A)(III) Enter th	ne hospital's name, city
10		An organization operated for the b (Also complete the <b>Support Scheo</b>		or university owned or o	perated by a go	overnmental un	it Section 170(b)(1)(A)(iv
11a		An organization that normally rece 170(b)(1)(A)(vi) (Also complete the			a governmenta	l unit or from th	ne general public Section
11b		A community trust Section 170(b	o)(1)(A)(vi) (Also co	omplete the Support So	hedule in Part	t IV-A)	
12	<b>✓</b>	An organization that normally rece from activities related to its charit- from gross investment income ar organization after June 30, 1975	able, etc , function and unrelated busi	ns—subject to certain ex ness taxable income (le	xceptions, and ss section 511	(2) no more the tax) from bus	nan 331/3% of its support
13		An organization that is not contri- requirements of section 509(a)(3)					and otherwise meets the
		☐ Type II ☐ Type II	□Туре	III-Functionally Integrat	ed [	Type III-Othe	er
		Provide the following info	rmation about th	ne supported organizat	ions. (See pag	e 8 of the inst	ructions)
Na	me(	(a) s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the si organization the sup organi	d) upported on listed in oporting zation's documents?	(e) Amount of support
					Yes	No	
Tota	1						
· ota	٠,	· · · · · · · · · · · · · · · · · · ·			· · · · ·	▶	
14		An organization organized and op	perated to test for	public safety Section 5	509(a)(4) (See	page 8 of the i	nstructions)

	e: You may use the worksheet in the instructions endar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 200		(e) Total
15	Gifts, grants, and contributions received (Do						
	not include unusual grants See line 28).				İ		
16	Membership fees received	5310	<u> </u>				5310
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	93919					93919
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.	5214					<b>5214</b>
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	104443					104443
24	Line 23 minus line 17						
25	Enter 1% of line 23						
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	nn (e), line 24	▶	26a	
	Prepare a list for your records to show the nan governmental unit or publicly supported organia amount shown in line 26a <b>Do not file this list w</b>	ne of and amount zation) whose tota	t contributed by al gifts for 2003 ti	each person (ot hrough 2006 exc	her than a beeded the	26b	
С	Total support for section 509(a)(1) test. Enter li	-				26c	
d	Add Amounts from column (e) for lines 18		19			26d	
e f	Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numera				<b>&gt;</b>	26e 26f	%
27	Organizations described on line 12: a For person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and	total amounts red	ceived in each ye	were receive ear from, eac	ed from h "disqi	a "disqualified ualified person"
	(2006) 0 (2005)		. (2004)		(2003) .	••	
b	For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year  (2006) 0 (2005)	ved from each per year, that was mo 5 through 11b, as v the larger amount	rson (other than "ore than the larger well as individuals, t described in (1)	disqualified perso of (1) the amoun ) Do not file this or (2), enter the	ns"), prepare t on line 25 fo list with your sum of these	a list fo or the ye r return. differer	r your records to ear or (2) \$5,000 After computing noes (the excess
					(2003) .		••••••
С	<sub>17</sub> 93919 <sub>20</sub>	and line 27h tota	21	<del></del>	•	27c	99229
d	Add Line 27a total0	and line 27b tota	J	0	▶	27d	00220
е	Public support (line 27c total minus line 27d to					27e	99229
f	Total support for section 509(a)(2) test: Enter a				104443		25 -
9 h	Public support percentage (line 27e (numera Investment income percentage (line 18, colu	ator) divided by I ımn (e) (numerat	line 27f (denomi tor) divided by li	nator)) . ine 27f (denomi	▶ inator)). ▶	27g 27h	95 % 5 %
28	Unusual Grants: For an organization describe prepare a list for your records to show, for ea description of the nature of the grant <b>Do not</b> to	ch year, the nam	e of the contribu	utor, the date ar	nd amount o	f the gr	

Part V Private School Questionnaire (See page 9 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, other governing instrument, or in a resolution of its governing body?	29	es N	<u>o</u>
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		
		1		
00	Does the second of the fill of the second of			- -
32 a	Does the organization maintain the following  Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		ima.
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		
đ	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' rights or privileges?	33a	_	_
b	Admissions policies?	33b	-	_
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 extracurricular activities?	33h	a line	
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
24~	Does the organization receive any financial aid or accietance from a governmental agency?	34a		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	774		_
b	Has the organization's right to such aid ever been revoked or suspended?	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	+	
_	of hot 1700 to 00, 1070 2 0 0 007, covering radial hondiscrimination. It is attach an explanation .	33		

-				c
м	a	3€	•	τ

Pa	rt VI-A Lobbying Expenditures by Ele (To be completed ONLY by an					instructions	.)
Che	ck ▶ a ☐ if the organization belongs to an affilia					"limited control	" provisions apply
	Limits on Lobbyir (The term "expenditures" mear	-				(a) Affiliated group totals	(b) To be completed for all electing organizations
26	Total lobbying expenditures to influence public	<u>.</u>			36		
36 37	Total lobbying expenditures to influence a legis		, ,,		37		
38	Total lobbying expenditures to influence a legis	= =	cobbying)		38		
39					39		
40	Total exempt purpose experioritures (add lines 3			i	40		
41	Lobbying nontaxable amount Enter the amount						
71		bbying nontaxa	•				
		of the amount on					
	Over \$500,000 but not over \$1,000,000 . \$100,0			00.000			
		000 plus 10% of the		1	41		
		000 plus 5% of the					
	Over \$17,000,000 \$1,000	•					
42	Grassroots nontaxable amount (enter 25% of li	ne 41)			42		
43	Subtract line 42 from line 36 Enter -0- if line 4	2 is more than lir	ne 36		43		
44	Subtract line 41 from line 38 Enter -0- if line 4	1 is more than lir	ne 38, , , ,	]	44		<u> </u>
	Caution: If there is an amount on either line 43	or line 44 vou n	nust file Form 47	20			
	4-Year Ave (Some organizations that made a section See the instructions for	or lines 45 throug	do not have to d	complete all 3 of the instr	uctions	s)	· <del></del>
	Calendar year (or	(a)	(b)	(c)		(d)	(e)
	fiscal year beginning in) ▶	2007	2006	2005		2004	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						
Pa	rt VI-B Lobbying Activity by Nonelect (For reporting only by organization)			Part VI-A) (	See p	page 14 of th	ne instructions.)
	ng the year, did the organization attempt to influmpt to influence public opinion on a legislative m		-		ling an	y Yes No	Amount
а							
b	Paid staff or management (Include compensation				).		
¢	Media advertisements	<del>-</del>					
d	Mailings to members, legislators, or the public		•			.   _	
е	Publications, or published or broadcast statem						
f	Grants to other organizations for lobbying purp						
g	Direct contact with legislators, their staffs, gove		or a legislative b	ody			
h	Rallies, demonstrations, seminars, conventions	, speeches, lectu	res, or any other	means	•		<del> </del>
i	Total lobbying expenditures (Add lines c through	jh <b>h.</b> )		 			1

Page	7
raye	•

Part VII	Information Reg	arding Transfers	To and	Transactions	and	Relationships	With	Noncharitable
	<b>Exempt Organiza</b>	ations (See page 14	4 of the ir	nstructions.)				
			-					

51			•		e following with any other organization 527, relating to political organization		ed in s	ection	
_							Yes	No	
а		-	orting organization	to a noncharitable exempt orga	anization of	51a(i)	Ħ	l	
		Cash				a(ii)	<u> </u>		
	٠.	Other assets .	•	• -		<u> </u>	†		
b		er transactions				b(i)		ľ	
		(i) Sales or exchanges of assets with a noncharitable exempt organization							
	(ii)			itable exempt organization .		b(ii)	+		
	(iii)		, equipment, or oth			b(iii)	-		
	(iv)	Reimbursement ai	rrangements			b(iv)		<del> </del>	
	(v)	Loans or loan gua	rantees			b(v)			
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations		b(vi)	ļ		
С	Sha	iring of facilities, eq	uipment, mailing lis	sts, other assets, or paid emplo	oyees	С	L		
d	goo	ds, other assets, or	r services given by	the reporting organization. If	e Column (b) should always show the the organization received less than fa ds, other assets, or services received.	fair market air market	value value	of the in any	
	a)	(b)		(c)	(d)				
Line		Amount involved	Name of nonc	charitable exempt organization	Description of transfers, transactions, ar	nd sharing ari	rangem	ents	
	-								
			·						
						4. 4.			
								•	
	des	cribed in section 50 (es," complete the	01(c) of the Code (d	other than section 501(c)(3)) or	ne or more tax-exempt organization in section 527?		s [	No	
(a)  Name of organization			ation	Type of organization	Description of relation	nship			
			· · · · · · · · · · · · · · · · · · ·						
								-	
						· ·			
						<del></del>			
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				1	1				