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Form 990

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

2007

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

A For the 2007 calendar year, or tax year beginning August 1, 2007, and ending July 31, 2008

B Check if applicable  
 Address change  
 Name change  
 Initial return  
 Termination  
 Amended return  
 Application pending

Please use IRS label or print or type.  
See Specific Instructions.C Name of organization  
**Christian Youth Theater Houston**Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**P. O. Box 2110**City or town, state or country, and ZIP + 4  
**Spring, Tx 77383**

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: ► [www.cythouston.org](http://www.cythouston.org)J Organization type (check only one) ►  501(c) ( 3 ) □ (insert no.)  4947(a)(1) or  527K Check here ►  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► **162,790**D Employer identification number  
**56 2604290**E Telephone number  
**( 832 ) 338-5869**F Accounting method:  Cash  Accrual  
 Other (specify) ►

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates?  Yes  No

H(b) If "Yes," enter number of affiliates ►

H(c) Are all affiliates included?  Yes  No  
(If "No," attach a list. See instructions.)H(d) Is this a separate return filed by an organization covered by a group ruling?  Yes  No

I Group Exemption Number ►

M Check ►  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1	Contributions, gifts, grants, and similar amounts received:		
a	Contributions to donor advised funds	1a	
b	Direct public support (not included on line 1a)	1b	<b>13,932</b>
c	Indirect public support (not included on line 1a)	1c	
d	Government contributions (grants) (not included on line 1a)	1d	
e	Total (add lines 1a through 1d) (cash \$ noncash \$ )	1e	<b>13,932</b>
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	<b>140,168</b>
3	Membership dues and assessments	3	
4	Interest on savings and temporary cash investments	4	
5	Dividends and interest from securities	5	
6a	Gross rents	6a	
b	Less: rental expenses	6b	
c	Net rental income or (loss). Subtract line 6b from line 6a		
7	Other investment income (describe ►)	7	
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
b	Less: cost or other basis and sales expenses	8a	
c	Gain or (loss) (attach schedule)	8b	
d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8c	
9	Special events and activities (attach schedule). If any amount is from gaming, check here ► <input type="checkbox"/>	8d	
a	Gross revenue (not including contributions reported on line 9b) of	9a	
b	Less: direct expenses other than fundraising expenses	9b	
c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c	
10a	Gross sales of inventory, less returns and allowances	10a	
b	Less: cost of goods sold	10b	
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c	
11	Other revenue (from Part VII, line 103)	11	<b>8,690</b>
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	<b>162,790</b>
13	Program services (from line 44, column (B))	13	<b>132,369</b>
14	Management and general (from line 44, column (C))	14	<b>29,059</b>
15	Fundraising (from line 44, column (D))	15	
16	Payments to affiliates (attach schedule)	16	
17	Total expenses. Add lines 16 and 44, column (A)	17	<b>161,428</b>
18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	<b>1,362</b>
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	<b>8039</b>
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	<b>9041</b>

910 1782

**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 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
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22a			
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22b			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	25,735	21,550	4,185
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b			
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c			
26	Salaries and wages of employees not included on lines 25a, b, and c	26	33,661	32,451	1,210
27	Pension plan contributions not included on lines 25a, b, and c	27			
28	Employee benefits not included on lines 25a - 27	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	7,169	6,317	852
34	Telephone	34	100		100
35	Postage and shipping	35	1,449		1,449
36	Occupancy	36	26,877	26,877	
37	Equipment rental and maintenance	37			
38	Printing and publications	38	5,972	5,472	500
39	Travel	39			
40	Conferences, conventions, and meetings	40	6,851		6,851
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42			
43	Other expenses not covered above (itemize):				
a	Liability Insurance	43a	710		710
b	Bank/Credit Card Merchant fees	43b	1,305		1,305
c	Advertising	43c	3,194	3,194	
d	Professional/Organizational expenses	43d	1,125		1,125
e	Production expenses related to shows	43e	36,508	36,508	
f	Licensing expenses	43f	10,772		10,772
g		43g			
44	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	161,428	132,369	29,059

**Joint Costs.** Check ►  if you are following SOP 98-2.

Are 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 the instructions.)**

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.

What is the organization's primary exempt purpose? ►	Education/training in the theater arts	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others )
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.)		
<b>a</b> Weekly after-school classes offering instruction in voice, drama, dance and specialty theater topics culminating in a performance showcase at the end of each 10 week session. Each session, students audition for and perform in a broadway style musical production performed for the general public. Approx 350 students participated in a total of three sessions.		
(Grants and allocations \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	104,775
<b>b</b> Week long summer camps with daily clinics in voice, drama and dance, culminating in a showcase performance for the community featuring highlights from a broadway musical. Approx. 400 students participated in a total of five camps.		
(Grants and allocations \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	27,594
<b>c</b>		
(Grants and allocations \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b>		
(Grants and allocations \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule)		
(Grants and allocations \$	) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ►		132,369

**Part IV Balance Sheets (See the instructions.)**

		(A) Beginning of year		(B) End of year
<b>Note:</b> Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.				
<b>Assets</b>				
45	Cash—non-interest-bearing . . . . .	8,564	45	14,913
46	Savings and temporary cash investments . . . . .		46	
47a	Accounts receivable . . . . .	2763		
b	Less: allowance for doubtful accounts . . . . .	47b 0	47c	2763
48a	Pledges receivable . . . . .	48a		
b	Less: allowance for doubtful accounts . . . . .	48b	48c	
49	Grants receivable . . . . .		49	
50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .		50a	
b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) . . . . .		50b	
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	
54a	Investments—publicly-traded securities . . . . .	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a	
b	Investments—other securities (attach schedule) . . . . .	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b	
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, including program-related investments (describe ► . . . . .)		58	
59	<b>Total assets (must equal line 74). Add lines 45 through 58 . . . . .</b>	8,564	59	17,676
<b>Liabilities</b>				
60	Accounts payable and accrued expenses . . . . .	525	60	2,402
61	Grants payable . . . . .		61	
62	Deferred revenue . . . . .		62	5873
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	<b>Total liabilities. Add lines 60 through 65 . . . . .</b>	525	66	8275
<b>Net Assets or Fund Balances</b>				
Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
67	Unrestricted . . . . .	8,039	67	9,401
68	Temporarily restricted . . . . .		68	
69	Permanently restricted . . . . .		69	
Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> 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	<b>Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)</b> . . . . .	8,039	73	9,401
74	<b>Total liabilities and net assets/fund balances. Add lines 66 and 73</b>	8,039	74	17,676

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)**

a Total revenue, gains, and other support per audited financial statements . . . . .	a	N/A
b Amounts included on line a but not on Part I, line 12:		
1 Net unrealized gains on investments . . . . .	b1	
2 Donated services and use of facilities . . . . .	b2	
3 Recoveries of prior year grants . . . . .	b3	
4 Other (specify): . . . . .	b4	
Add lines b1 through b4 . . . . .		
c Subtract line b from line a . . . . .	c	
d Amounts included on Part I, line 12, but not on line a:		
1 Investment expenses not included on Part I, line 6b . . . . .	d1	
2 Other (specify): . . . . .	d2	
Add lines d1 and d2 . . . . .		
e Total revenue (Part I, line 12) Add lines c and d . . . . . ►	e	

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

a Total expenses and losses per audited financial statements . . . . .	a	N/A
b Amounts included on line a but not on Part I, line 17:		
1 Donated services and use of facilities . . . . .	b1	
2 Prior year adjustments reported on Part I, line 20 . . . . .	b2	
3 Losses reported on Part I, line 20 . . . . .	b3	
4 Other (specify): . . . . .	b4	
Add lines b1 through b4 . . . . .		
c Subtract line b from line a . . . . .	c	
d Amounts included on Part I, line 17, but not on line a:		
1 Investment expenses not included on Part I, line 6b . . . . .	d1	
2 Other (specify): . . . . .	d2	
Add lines d1 and d2 . . . . .		
e Total expenses (Part I, line 17). Add lines c and d . . . . . ►	e	

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Jane Halford, 423 Enchanted River Spring, Tx 77388	Artistic Director, Board Member 30 hrs/week	11,000		
Jim Halford, 423 Enchanted River Spring, Tx 77388	Teacher, Board Member 10 hrs/week	2,050		
Marilyn Henderson, 34522 Jimmy Lane Pine Hurst, Tx 77362	Coordinator, Board Member 15 hrs/wk	8500		
Nancy Lassiter, 19426 Enchanted Stream Dr. Spring, Tx 77388	Business Manager 10 hrs/week	4,185		
Kent Major, 259 N Maple Glade Circle The Woodlands, Tx 77382	Board Chair, 5 hrs/week	0		
Lisa Broussard, 24010 Hampton Oaks, Spring, Tx 77389	Board Member, 3 hrs/week	0		
Andre Broussard, 24010 Hampton Oaks, Spring, Tx 77389	Board Member, 3 hrs/week	0		
Ginger Russell, 9902 Woodland Blvd Magnolia, Tx 77354	Board Member, 3 hrs/week	0		
John Romain, 46 Lost Pond Circle The Woodlands, Tx 77381	Board Member, 3 hrs/week	0		



Part VI Other Information (continued)		Yes	No
82a	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?	82a	✓
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.)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a	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	88a	✓
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	✓
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0	89a	
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	89b	✓
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization	89d	
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	✓
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	✓
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	
90a	List the states with which a copy of this return is filed ► N/A	90b	N/A
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b	N/A
91a	The books are in care of ► Robin Adamo Located at ► c/o CYT Houston, P. O. Box 2110, Spring, Tx	Telephone no. ► ( 832 ) 338-5869 ZIP + 4 ► 77383	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ►	91b	✓
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

**Part VI Other Information (continued)**

			Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ►	91c	✓	
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		

**Part VII Analysis of Income-Producing Activities (See 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:					38,276
a Class registration/tuition					48,249
b Ticket sales					47,030
c Summer camp registration/tuition					6,613
d Production fees					
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 Sale of concessions					3486
b Souvenirs					983
c Advertising					3893
d Tour Group fees					328
e					
104 Subtotal (add columns (B), (D), and (E))					148,858
105 Total (add line 104, columns (B), (D), and (E)) ►					148,858

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See 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).
93	The organization trains students in the theater arts through classes, summer camps and productions/performances
103	Misc. sales of concessions, souvenirs and advertising in our programs allows us to provide scholarships to students in need. Tour group fees fund public appearances to educate the public about our program

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See 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).

**Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).**

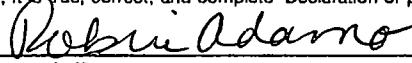
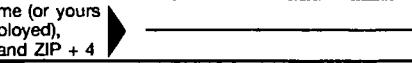
106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.			Yes	No
				✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.			Yes	No
				✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?			Yes	No

<b>Please Sign Here</b>	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			
		Date 11/16/09		
	Signature of officer Robin Adamo	Type or print name and title Business Manager		
<b>Paid Preparer's Use Only</b>	Preparer's signature 	Date 11/16/09	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. X)
	Firm's name (or yours if self-employed), address, and ZIP + 4 		EIN 11-16109	
			Phone no ( )	