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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)

OMB No 1545-0047 2007

Department of the Treasury Internal Revenue Service(77)

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

Open to Public Inspection

	A	For the 2007 calendar year, or tax year beginning 10/01 , 2007, and	dending 9/	30	, 2	2008
	В	Check if applicable C		D Emp	loyer Identifi	cation Number
		Address change Please uso IRS label The Celebrate Committee Inc		20	-16969	68
		Name change or print 421 George Street #138			phone number	
		See De Pere. WI 54115				
-⊈-		Initial return specific Instruc-				6-7980
⊆		Termination tions,		F meth	ounting lod.	Cash X Accrual
0)	Amended return			Other (specif	y) >
Original		Application pending • Section 501(c)(3) organizations and 4947(a)(1) nonexempt	H and I are not app	licable to se	ection 527 org	ganizations
(T		Application pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A	H (a) Is this a gri	oup return fo	or affiliates?	Yes X No
_		(Form 990 or 990-EZ).	H (b) If 'Yes,' enti	er number of	affiliates -	. – –
Ω	G	Web site: ▶ www.celebratedepere.com	H (C) Are all affil	iates include	ed?	Yes No
Ö	j	Organization type			ee instruction	ns)
		(check only one) ► X 501(c) 3 ◄ (insert no.) 4947(a)(1) or 527	H (d) Is this a se	narate retur	n filed by an	
$\mathcal{G}_{\mathcal{L}}$		Check here ► If the organization is not a 509(a)(3) supporting organization and its			y a group ruli	
43	••	gross receipts are normally not more than \$25,000. A return is not required, but if the	1 Group E	xemption	Number	<u> </u>
SHOO		organization chooses to file a return, be sure to file a complete return.				n is not required
Ö	_	O				90-EZ, or 990-PF)
\mathcal{H}		Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 260, 797.				
	Pa	rt I Revenue, Expenses, and Changes in Net Assets or Fund Ba	iances (See t	ne instr	uctions.	<u> </u>
		1 Contributions, gifts, grants, and similar amounts received:				
	2010	a Contributions to donor advised funds	<u>1</u> a			
	7	b Direct public support (not included on line 1a)	1b 26	5,203.		
	ල	c Indirect public support (not included on line 1a)	1 c			
,	-	' ' ' ' ' ' ' '	1 d		1]	
	ْ ن	e Total (add lines 1d through 1d) (cash \$ 26,203. noncash \$)	· <u>·</u>		1e	26,203.
	딤					20,203.
ι		2 Program service revenue including government fees and contracts (from Part VII	, line 93)		2	
(3 Membership dues and assessments	•		3	
٤	<u>J</u>	4 Interest on savings and temporary cash investments			4	2,832.
8	5	5 Dividends and interest from securities			5	
•	₹	6a Gross rents.	6a			-
Ç		b Less ⁻ rental expenses .	6b			
Q	7)	c Net rental income or (loss) Subtract line 6b from line 6a			6c	
		7 Other investment income (describe	•	`	7	
	R	(A) Securities	(B) Oth	or	 	
	¥	8a Gross amount from sales of assets other		E1		
) E		8a			
	ĴĔ	· · · · · · · · · · · · · · · · · · ·	8ь		1 1	
	`	c Gain or (loss) (attach schedule).	8c			
	J	d Net gain or (loss). Combine line &c, columns (A) and (B)		_	8d	
		9 Special events and activities (attach schedule) If any amount is from gaming, ch	neck here		1	
•	٠	a Gross revenue (not including \$ 26,203. of contributions				
			9a 231	,762.	}	
		b Less, direct expenses other than fundraising expenses		,991.		
		c Net income or (loss) from special events. Subtract line 9b from line 9a	Statement	: 1	9c	75,771.
			0a			···-
4	}	1	0Ь			
	ì	_	<u> </u>		امما	
	•	c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a			0c	
design	4	11 Other revenue (from Part VII, line 103)		٦	1	
-	·	12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			2	104,806.
WAR DE ROM	, -	13 Program services (from line 44, column (B))	•	1	3_	55,948.
	Ž	14 Management and general (from line 44, column (C))		4	4	
	E	15 Fundraising (from line 44, column (D)).		1	5	
	N S	16 Payments to affiliates (attach schedule)		-	6	
	Ě				7	55 040
		17 Total expenses. Add lines 16 and 44, column (A)				55,948.
	Ą	18 Excess or (deficit) for the year Subtract line 17 from line 12]	8	48,858.
	N S E E T T	19 Net assets or fund balances at beginning of year (from line 73, column (A))		1	9	79,262.
	ŦĘ	20 Other changes in net assets or fund balances (attach explanation)		2	0	
	Ś	21 Net assets or fund balances at end of year Combine lines 18, 19, and 20		2	1	128,120.
_	BA	A For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.		TEEA0109L	12/27/07	Form 990 (2007)

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
2a Grants paid from donor advised funds (attach sch)					
(cash \$					
non-cash \$					
If this amount includes	1 1				
foreign grants, check here	22a				
2b Other grants and allocations (att sch) See St (cash \$ 52,198.	-# 2				
non-cash \$)					
If this amount includes					
foreign grants, check here	22 b	52,198.	52,198.		
3 Specific assistance to individuals (attach schedule)	23				
Benefits paid to or for members	24				
(attach schedule)	24				
5a Compensation of current officers, directors, key employees, etc. listed	05				,
in Part V-A	25a	0.	0.	0.	(
b Compensation of former officers, directors, key employees, etc. listed					,
in Part V-B	25 b	0.	0.	0.	
included above, to disqualified persons (as					
defined under section 4958(f)(1)) and persons described in section					
4958(c)(3)(B) .	25 c	0.	0.	0.	
Salaries and wages of employees not included on lines 25a, b, and c	26				
Pension plan contributions not included on lines 25a, b, and c	27				
8 Employee benefits not included on lines 25a - 27	28				
9 Payroll taxes .	. 29				
Professional fundraising fees .	30				
1 Accounting fees .	31	400.	400.		
2 Legal fees	32	1,771.	1,771.		
3 Supplies 4 Telephone	34		Σ, / / Σ .		
5 Postage and shipping	35	80.	80.		
6 Occupancy	36				
7 Equipment rental and maintenance	37				
B Printing and publications	38				
Travel	39				
O Conferences, conventions, and meetings	40			1	
1 Interest	41				
Depreciation, depletion, etc (attach schedule) . Other expenses not covered above (itemize)	42			-	
a Dept of Financial Instit	43a	10.	10.		_
b Service Fees	43b	229.	229.		
c US Treasury	43c	1,260.	1,260.		
d	43d				
e	43e				
f	43f				
g	43 g				
4 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	55,948.	55,948.	0.	
int Costs. Check If you are following					

		1		
Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44 55,948	. 55,948.	0.	0.
Joint Costs. Check If you are following	SOP 98-2			
Are any joint costs from a combined educational				► Yes X No
If 'Yes,' enter (i) the aggregate amount of these	e joint costs \$; (ii) the a	imount allocated to Progr	am services
\$; (iii) the amount all	llocated to Management and	general \$, and (iv) the	e amount allocated
to Fundraising \$.				
BAA	TEEA0102L	08/02/07		Form 990 (2007)

	Tentace comm			20 10	<u> </u>	aye J
Part III Statement of F	Program Service	ce Accomplishments ((See the instructions.)			
Form 990 is available for public organization. How the public p please make sure the return is	erceives an organi	zation in such cases may be	e determined by the informat	ion presented or	uts return. Therefor	e,
What is the organization's prin All organizations must describ clients served, publications iss izations and 4947(a)(1) nonexi	nary exempt purpo le their exempt pur sued, etc. Discuss a empt charitable tru	se? See Statemer pose achievements in a clear achievements that are not mosts must also enter the amo	1t 3 ar and concise manner State leasurable (Section 501(c)(3 ount of grants and allocations	e the number of b) and (4) organ- to others)	Program Service Expe (Required for 501(c)(3) (4) organizations ar 4947(a)(1) trusts, bi optional for others	and nd ut
			al Charities donat			
			s. The organizati			_
		local charities to table objectives.	be used to furth	<u>er the</u>		
(Grants and allocations	\$	52,198.) If this amour	nt includes foreign grants, ch	eck here	55,9	48.
	 					
(Grants and allocations	 \$) If this amour	nt includes foreign grants, ch	eck here ►		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
					1	
(Grants and allocations) If this amour	nt includes foreign grants, ch	eck here ►		
				-		
			nt includes foreign grants, ch	eck here ►		
e Other program services						
(Grants and allocations	\$) If this amour	nt includes foreign grants, ch	eck here 🟲 🗌		

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

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55, 948. Form **990** (2007)

Not	e: W	here required, attached schedules and amounts within plumn should be for end-of-year amounts only	the de	scription		(A) Beginning of year		(B) End of year
	45	Cash – non-interest-bearing			,	29,195.	45	48,122.
	46	Savings and temporary cash investments				50,067.	46	80,000.
	47 a	Accounts receivable	47 a					
	b	Less allowance for doubtful accounts	47b				-47· c —	
	_							
	48 a	Pledges receivable	48 a					
	b	Less allowance for doubtful accounts	48b				48 c	
	49	Grants receivable .				· · · · · · · · · · · · · · · · · · ·	49	
	50 a	Receivables from current and former officers, directors employees (attach schedule)	s, truste	es, and ke	у	····	50 a	
Δ	b	Receivables from other disqualified persons (as define and persons described in section 4958(c)(3)(B) (attach	d under	section 49 ule)	958(f)(1))		50 b	
S	51 a	Other notes and loans receivable	_					
ASSETS	_	(attach schedule)	51 a			ı		
Š		Less allowance for doubtful accounts	51 b	- -			51 c	
		Inventories for sale or use		•	•		52 53	
		Prepaid expenses and deferred charges		Cost	□FMV		54a	
		Investments – publicly-traded securities		Cost	HFMV		54b	
		Investments — other securities (attach sch) Investments — land, buildings, & equipment basis	55 a	∐ Cosi				
	oo a	investments – land, buildings, & equipment basis	33 a					
		Less accumulated depreciation (attach schedule)	55 b		-		55 c	
		Investments – other (attach schedule)	1 1				56	
	57 a	Land, buildings, and equipment basis.	57 a					
		Less. accumulated depreciation (attach schedule)	57 b				57 c	
	58	Other assets, including program-related investments						
		(describe •)	70.060	58	100 100
		Total assets (must equal line 74) Add lines 45 throug	h 58			79,262.	59	128,122.
	60	Accounts payable and accrued expenses		•			60	
	61	Grants payable				<u> </u>	62	
Į	62	Deferred revenue					02	
A B	63	Loans from officers, directors, trustees, and key employees (attach schedule)					63	
Ĭ	64a	Tax-exempt bond liabilities (attach schedule).					64a	
E S	b	Mortgages and other notes payable (attach schedule).	_	•			64b	
Š	65	Other liabilities (describe - See Statement	4)		65	2.
	66	Total liabilities. Add lines 60 through 65	<u>. </u>			0.	66	2.
N	Orga	,	nd com	plete lines	67			
Ĕ	_	through 69 and lines 73 and 74.				70.000	67	120 120
_	67	Unrestricted				79,262.	68	128,120.
ANNULLO	68	Temporarily restricted					69	
	69	Permanently restricted anizations that do not follow SFAS 117, check here	· 🗇 .	and comple	ite lines		03	
O R	Urga	70 through 74	LJ°	and comple	ac mica			
£	70	Capital stock, trust principal, or current funds					70	
FUZD	70 71	Paid-in or capital surplus, or land, building, and equip	ment fi	ınd .			71	
B	72	Retained earnings, endowment, accumulated income,					72	
Ä					arough			
BALAZCES	73	Total net assets or fund balances. Add lines 67 throug 72 (Column (A) must equal line 19 and column (B) m	ıust equ	ual line 21).	irough	79,262.	73	128,120.
3	74	Total liabilities and net assets/fund balances. Add line	es 66 ar	nd 73		79,262.	74	128,122.

BAA

P	art IV-A Reconciliation of Revenuent instructions.)		l Statements wit			irn (See the
а	Total revenue, gains, and other support	ner audited financial statemer	nts		а	N/2
b	Amounts included on line a but not on P				-	11/1
_	1Net unrealized gains on investments		ь1			
	2Donated services and use of facilities		b2			
	3Recoveries of prior year grants		b3			
	40th (+ ()					
			b4			
	Add lines b1 through b4				ь	}
С	Subtract line b from line a		•		С	
d	Amounts included on Part I, line 12, but	not on line a:				
	1 Investment expenses not included on Pa	art I, line 6b	d1			
	2Other (specify)					
			d2			
	Add lines d1 and d2				d	
е	Total revenue (Part I, line 12) Add lines	s c and d .		•	е	
P	art IV-B Reconciliation of Expens	ses per Audited Financi	al Statements wi	th Expenses per	Re	turn
а	Total expenses and losses per audited f	inancial statements.			а	N/A
b	Amounts included on line a but not on P	art I, line 17:				
	1 Donated services and use of facilities		b1			
	2Prior year adjustments reported on Part	I, line 20	b2			
	3Losses reported on Part I, line 20		b3			
	4Other (specify)					
			b4			
	Add lines b1 through b4	· · · · · ·			b	
С	Subtract line b from line a .				С	
d	Amounts included on Part I, line 17, but	not on line a:				
	1 Investment expenses not included on Pa	art I, line 6b .	d1			
	2Other (specify).	-				
			d2			
	Add lines d1 and d2				d	
е	Total expenses (Part I, line 17). Add line			<u> </u>	е	<u> </u>
P	art V-A Current Officers, Directo or key employee at any time du	rs, Trustees, and Key E	mployees (List ea e not compensated) (ch person who was a See the instructions)	n of	fficer, director, trustee,
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benef plans and deferre compensation pla	ed	(E) Expense account and other allowances
		_	1			
		4	_		_	
<u>Se</u>	ee Statement 5		0	•	0.	0.
		-{		1		
		_				
		-{				
		_				
				 		
		-		1		
		4		1		
		 		 -		
		-				
		4				
						
		4				

Form 990 (2007) The Celebrate Committee			20-1696	968	F	age 6	
Part V-A Current Officers, Directors, Tru	istees, and Key Er	nployees (continue			Yes	$\overline{}$	
75 a Enter the total number of officers, directors, and trustees po	ermitted to vote on organization	on business at board meetings	▶ 7				
b Are any officers, directors, trustees, or key em listed in Schedule A, Part I, or highest compen A, Part II-A or II-B, related to each other throu identifies the individuals and explains the relat	sated professional and the family or business re	other independent cont	ractors listed in Schedu	ees ile 75 b		x I	
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization'							
If 'Yes.' attach a statement that includes the in				<u>► 75 c</u>	 	_X	
d Does the organization have a written conflict of	finterest policy?			75 c	ı x		
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, director during the year, list that person below a the instructions)	or, trustee, or kev empl	ovee received compens	ation or other benefits (described b	celow)		
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	account	xpense and ot vances	ther	
None							
				:			
D 111 011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					T.:-		
Part VI Other Information (See the inst	ructions.)				Yes	No	
76 Did the organization make a change in its activity if 'Yes,' attach a detailed statement of each change in its activity in the change in	ange .	• •		76	ļ	X	
77 Were any changes made in the organizing or g		ut not reported to the IR	S?	77	├	X	
If 'Yes,' attach a conformed copy of the change		an mana di mina Alaa		, 70.] !	vI	
78a Did the organization have unrelated business of bif 'Yes,' has it filed a tax return on Form 990-T		or more during the year	r covered by this return?	78a 78b		X A	
79 Was there a liquidation, dissolution, terminatio year? If 'Yes,' attach a statement				79	-	X	
80a Is the organization related (other than by assormembership, governing bodies, trustees, office	ers, etc, to any other ex	or nationwide organizatempt or nonexempt or	tion) through common anization?	80 a		х	
b If 'Yes,' enter the name of the organization ▶		neck whether it is	xempt or Inonexer	·	1		
81 a Enter direct and indirect political expenditures	(See line 81 instruction	<u> </u>	xempt ornonexer	0.			
b Did the organization file Form 1120-POL for thi	s year?			81 b		X	
BAA				Forn	n 990 ((2007)	

Form 990 (2007) The Celebrate Committee Inc	20-1696968	3	F	age 7
Part VI Other Information (continued)			Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?	at no charge or at	82 a		Х
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 N/A			
83a Did the organization comply with the public inspection requirements for returns and exemptio		83a	Х	1
b Did the organization comply with the disclosure requirements relating to quid pro quo contrib	utions?	83b	X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?	· · · · · · · · · · · · · · · · · · ·	84a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such condition tax deductible?	ontributions or gifts were	84 Ь	N,	/A
85 a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		85 a	N,	/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N,	/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the waiver for proxy tax owed for the prior year.	e organization received a			
c Dues, assessments, and similar amounts from members	85c N/A		•	
d Section 162(e) lobbying and political expenditures	85 d N/A			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A	_		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	N,	A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason dues allocable to nondeductible lobbying and political expenditures for the following tax year?	nable estimate of · ·	85 h	N,	/A
86 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on	100 1 37/3	1		İ
line 12	86a N/A N/A	1		
b Gross receipts, included on line 12, for public use of club facilities 87 501(c)(12) organizations. Enter. a Gross income from members or shareholders	87a N/A	[
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	87b N/A			
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable of	L	1		
or an entity disregarded as separate from the organization under Regulations sections 301 77 If 'Yes,' complete Part IX	01-2 and 301 7701-3?	88 a		Х
b At any time during the year, did the organization, directly or indirectly, own a controlled entity section 512(b)(13)? If 'Yes,' complete Part XI	within the meaning of	88 ь		X
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year un				
section 4911 ► 0. ; section 4912 ► 0. , section				
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 exceeduring the year or did it become aware of an excess benefit transaction from a prior year? If explaining each transaction	s benefit transaction 'Yes,' attach a statement	89Ъ		Х
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	ne ► 0.			
d Enter Amount of tax on line 89c, above, reimbursed by the organization	▶ 0.			
e All organizations At any time during the tax year, was the organization a party to a prohibite	d tax shelter transaction?	89e		<u>X</u>
f All organizations. Did the organization acquire a direct σ indirect interest in any applicable in	surance contract?	89f		X
g For supporting organizations and sponsoring organizations maintaining donor advised funds organization, or a fund maintained by a sponsoring organization, have excess business holdi	Did the supporting ngs at any time during			
the year? 90 a List the states with which a copy of this return is filed ► None	! 	89 g		X
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions)	Į.	90 b		0
91 a The books are in care of ► Gerard Ambrosius Telephone no	· ·			
Located at ► 421 George St #138 De Pere WI	ZIP + 4 ► <u>54115</u>			
b At any time during the calendar year, did the organization have an interest in or a signature financial account in a foreign country (such as a bank account, securities account, or other fi	or other authority over a		Yes	No
financial account in a foreign country (such as a bank account, securities account, or other fill If 'Yes,' enter the name of the foreign country		91 Ь		Х
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Financial Accounts	oreign Bank and			<u> </u>
BAA		Form	990 ((2007)

Part VI Other Information (continu					Ye	
c At any time during the calendar year, did	-	n maintain an offic	ce outside of the Unit	ed States?	91 c	X
If 'Yes,' enter the name of the foreign co						
92 Section 4947(a)(1) nonexempt chantable				1 1	N/A	>
and enter the amount of tax-exempt inter Part VII Analysis of Income-Producing				▶ 92		N/A
Tart VII Analysis of income-Froducing		ousiness income		tion 512, 513, or 514		
Note: Enter gross amounts unless					(E)	
otherwise indicated	Business code	(B) Amount	Exclusion code	Amount	Related or ex- function inc	
93 Program service revenue						
a	1					
b		· 				
С						
d						
e						
f Medicare/Medicaid payments						
g Fees & contracts from government agencies.						
94 Membership dues and assessments.						
95 Interest on savings & temporary cash invmnts					2,	832.
96 Dividends & 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 pers prop						
99 Other investment income						
100 Gain or (loss) from sales of assets other than inventory						
101 Net income or (loss) from special events					75,	771.
102 Gross profit or (loss) from sales of inventory.						
103 Other revenue a						
b						
С						
d						
e		<u></u>				
104 Subtotal (add columns (B), (D), and (E))			_11_			603.
105 Total (add line 104, columns (B), (D), a		10 D-41				603.
Note: Line 105 plus line 1e, Part I, should equal Part VIII Relationship of Activities t			Evennt Burnese	c (See the instru	ctions \	
Explain how each activity for which of the organization's exempt purpo	n income is repo ises (other than	orted in column (E, bv providina fund) of Part VII contribut s for such purposes)	ed importantly to the	accomplishmen	t
101 The event provides en				funds for loc	al chariti	es.
						
						-
					· 	
Part IX Information Regarding Tax		iaries and Dis				
(A)	(B)		(C)	(D)	(E)	
Name, address, and EIN of corporation,	Percentage o		of activities	Total	End-of-ye	ar
partnership, or disregarded entity	ownership inter			Income	assets	
N/A	- 	%				
		90				
		8				
Part X Information Regarding Tra	nsfers Asso		rsonal Renefit C	ontracts (See the	e instruction	s)
a Did the organization, during the year, receive any ful						No
b Did the organization, during the year, pay			•			No
Note: If 'Yes' to (b), file Form 8870 and Fol				· · · · · · · · · · · · ·	L E.	J
BAA		<u> </u>	·	TEEA0108L 12/27/0	7 Form 990	(2007)

Form 990 (2007) The Celebrate Committee Inc

20-1696968

Page 8

				Yes
06 D	old the reporting organization make any transfers t Yes,' complete the schedule below for each contro	to a controlled entity as defined	I in section 512(b)(13) of the (
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transf
3				
	Totals			3
		1 12 Table 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A VINTE TO THE COURT OF THE COURT	Yes
7 Di	id the reporting organization receive any transfers 'es,' complete the schedule below for each contro	s from a controlled entity as defiled entity	fined in section 512(b)(13) of	the Code? If
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transf
		·		
_ L	· · · · · · · · · · · · · · · · · · ·			
		· -		
	Totals			
 Diran		以 12 分数20 00 加加拉	covering the interest, rents, re	Yes oyalties, and
ase n	Totals d the organization have a binding written contract injuries described in question 107 above? Under penalties of perjury, I declare that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of the true, and true that I have examined this true.	tin effect on August 17, 2006, of the companying schedulin officer) is based on all information of the companying schedulin officer) is based on all information of the companying schedulin officer) is based on all information of the companying schedulin officer) is based on all information of the companying schedulin officers in the companying scheduling schedul	les and statements, and to the best of which preparer has any knowledge	oyalties, and
ase n e	d the organization have a binding written contract inuities described in question 107 above? Under penalties of perjury, I declare that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and complete Declaration of preparer (other that I have examined this true, correct, and correct that I have examined this true, correct, and correct this true, correct that I have examined this true, correct that	tin effect on August 17, 2006, (s return, including accompanying schedulin officer) is based on all information of the participant of the partici	les and statements, and to the best of which preparer has any knowledge Q - 1 - 1 - 1 Date	oyalties, and my knowledge and belief, it is
ase nee	d the organization have a binding written contract inuities described in question 107 above? Under penalties of perjury, I declare that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer (other that I have examined this true, correct and complete Declaration of preparer).	tin effect on August 17, 2006, of return, including accompanying schedulin officer) is based on all information of vices. Date 12,	les and statements, and to the best of which preparer has any knowledge Q - 1 - Date	oyalties, and my knowledge and belief, it is 7 - 2010 Preparer's SSN or PTIN (Signification X) N/A

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

Supplementary Information — (See separate instructions.)

2007

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

Name of the organization			Employer identification	number
The Celebrate Committee Inc			20-1696968	
Part I Compensation of the Five Hig	ghest Paid Employees Ot	her Than Officer	s, Directors, a	nd Trustees
(See instructions. List each or (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 and deferred compensation	(e) Expense account and other allowances
None				
			· · · · · · · · · · · · · · · · · · ·	
Total number of other employees paid over \$50,000				
Part II — A Compensation of the Five Hig (See instructions. List each or	ghest Paid Independent C ne (whether individuals or	contractors for P firms). If there a	rofessional Se are none, enter	rvices 'None.')
(a) Name and address of each independent contra	actor 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 Hig (List each contractor who perf firms. If there are none, enter	formed services other than	n professional se		r individuals or
(a) Name and address of each independent contri	actor paid more than \$50,000	(b) Type	of service	(c) Compensation
None				
		-		
Total number of other contractors receiving over \$50,000 for other services.	(

Schedule A (Form 990 or 990-EZ) 2007 The Celebrate Committee Inc 20	-1696968_		Page 2
Part III Statements About Activities (See instructions.)		Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any a 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 > \$ N/A	ittempt		
(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	. 1	<u> </u>	X
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 tobbying activities	the	ļ	ļ
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 taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)	with any		
a Sale, exchange, or leasing of property?		a	Х
b Lending of money or other extension of credit?	21	b	X
c Furnishing of goods, services, or facilities?	20	c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	20	d	X
e Transfer of any part of its income or assets?	20	•	<u>X</u>
3a 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)	3:	a	X
b Did the organization have a section 403(b) annuity plan for its employees?	3	b	<u>x</u>
c 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	30	<u> </u>	X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3	<u>d</u>	<u>x</u>
4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g If 'No,' complete 4f and 4g	e lines	a	X
b Did the organization make any taxable distributions under section 4966?	4	b N	A_
c Did the organization make a distribution to a donor, donor advisor, or related person?	4	c N	γA
d Enter the total number of donor advised funds owned at the end of the tax year	-		N/A
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	-		N/A
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advise 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.	:d ▶		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.

Sche	dule A (Form 990 or 990-EZ) 2007	The Celebrate Comm	nittee Inc		20-16969	968 Pag	је 3
Par	t IV Reason for Non-Priva	ate Foundation Status (See instructions.)				
l cert	ify that the organization is not a privi	ate foundation because it is: (F	Please check only ONE app	licable box)			
5	A church, convention of churche	es, or association of churches.	Section 170(b)(1)(A)(i).				
6	A school. Section 170(b)(1)(A)(i	ı). (Also complete Part V.)					
7	A hospital or a cooperative hosp	oital service organization Secti	ion 170(b)(1)(A)(iii).				
8	A federal, state, or local govern	ment or governmental unit Se	ction 170(b)(1)(A)(v)				
9	A medical research organization and state ►	n operated in conjunction with a	a hospital Section 170(b)(1)(A)(III) Ent i	er the hospital	s name, city,	
10	An organization operated for the (Also complete the Support Sch	e benefit of a college or univers nedule in Part IV-A)	sity owned or operated by a	governmen	tal unit Sectio	n 170(b)(1)(A)(ıv)
11 a	An organization that normally re Section 170(b)(1)(A)(vi) (Also of	eceives a substantial part of its complete the Support Schedule	support from a governmen e in Part IV-A)	tal unit or fr	om the general	public	
11 b	A community trust Section 170	(b)(1)(A)(vi) (Also complete th	e Support Schedule in Part	IV-A)			
12	An organization that normally refrom activities related to its cha from gross investment income a organization after June 30, 1975	ritable, etc, functions – subjec and unrelated business taxable	t to certain exceptions, and income (less section 511 t	(2) no more ax) from bus	than 33-1/3% Inesses acquir	of its support	
13	An organization that is not contrequirements of section 509(a)(rolled by any disqualified perso 3). Check the box that describe	ons (other than foundation rest the type of supporting or	managers) a ganization	nd otherwise m	neets the	
	Type I Type II	X Type III-Functio		Type III			
		e the following information ab		tions. (See	nstructions)		
	(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support	
				Yes	No		
	Statement 6						
Tota					•	42,89	8.
	_	enerated to test for sublication	ty Section 500(a)(4) (5	instruction-	`		
<u>14</u> BAA	An organization organized and	oberated to feet for boolic safe	ty. Occiloit 303(8)(4) (388			990 or 990-EZ) 2	007

Schedule A (Form 990 or 990-EZ) 2007 The Celebrate Committee Inc 20-1696968 Page 4 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar year (or fiscal year (e) Total beginning in) Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 15 N/A 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 Gross income from interest, dividends, amts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975 19 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 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 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 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 column (e), line 24 26 a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26 b c Total support for section 509(a)(1) test. Enter line 24, column (e) 26 c d Add: Amounts from column (e) for lines: 26 d 26 e e Public support (line 26c minus line 26d total). f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 잏 26 f 27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: _____(2005) _____(2004) _____(2004) _____(2003) ____ bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year ____ (2005) _ _ _ _ c Add: Amounts from column (e) for lines 16 and line 27b total 27 d d Add. Line 27a total 27 e e Public support (line 27c total minus line 27d total) f Total support for section 509(a)(2) test Enter amount from line 23, column (e) q Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27 g

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, 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 brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15 N/A

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

27h

용

Гаг	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
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		
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? If 'Yes,' please describe, if 'No,' please explain. (If you need more space, attach a separate statement)	31		
	Does the organization maintain the following: a 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		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	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			
	a Students' rights or privileges?	33a		
	b Admissions policies?	33 b		
	c Employment of faculty or administrative staff?	33 c		
	d Scholarships or other financial assistance?	33 d		
	e Educational policies?	33e		
	f Use of facilities?	33f		
	g Athletic programs?	33 g		
	h Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement)	_ _ _ _		
-		34		
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34a	 	-
	b Has the organization's right to such aid ever been revoked or suspended?	34 b		_
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	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		
_	Cohodula A /Forms	~~ ~	^^ = 7	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

	(To be complete	penditures by Elect d ONLY by an eligible org	ganization that filed Fo	orm 5768)	uructions)		. <u></u>		N/A		
nec	ck - a If the organiz	ation belongs to an affilia	ted group Check	►b If y	ou checke	d 'a' and 'l	imited control' provisions apply				
Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred)							(a) (b) ated group totals To be completed for all electorganization				
6	Total lobbying expenditu	res to influence public opi	nion (grassroots lobb	yıng)	36						
7		res to influence a legislati	·-		37						
8		res (add lines 36 and 37)			38						
9	Other exempt purpose e	xpenditures			39						
0	Total exempt purpose ex	φenditures (add lines 38 a	and 39)		40						
1	Lobbying nontaxable am	ount Enter the amount from	om the following table	e –							
	If the amount on line 40		bbying nontaxable an								
	Not over \$500,000		f the amount on line 4	1							
	Over \$500,000 but not over \$1,0	•	plus 15% of the excess ov								
	Over \$1,000,000 but not over \$		plus 10% of the excess ov		- 41						
	Over \$1,500,000 but not over \$		plus 5% of the excess ove	r \$1,500,000							
	Over \$17,000,000		•		40						
_		mount (enter 25% of line	•		42		_				
13 14		e 36. Enter -0-			43			+			
-		mount on either line 43 or		Form 4720	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
			Lobbying Expend			veraging F	eriod				
	Calendar year (or fiscal year	(a) 2007	(b) 2006	(c) 2005	;		(d) (e) 2004 Total		(e) Total		
 15	beginning in) ► Lobbying nontaxable										
_	amount	4 1 8	٦ ,								
16 	(150% of line 45(e))				, ,						
 	Total lobbying expenditures .										
18	Grassroots non- taxable amount										
19	Grassroots ceiling amount (150% of line 48(e))	* 1,1	*								
	Grassroots lobbying expenditures										
<u>ar</u>	TVI-B Lobbying Actions of CFor reporting of	ctivity by Nonelectinally by organizations that o	i g Public Chariti did not complete Part	es VI-A) (See in	structions.)			N/A		
urı	ng the year, did the organ	ization attempt to influence	ce national, state or le	ocal legislation	n, including		Yes	No	Amount		
ter	mpt to influence public op	inion on a legislative mat	ter or referendum, thr	ougn the use	OT:						
	a Volunteers .										
b Paid staff or management (Include compensation in expenses reported on lines c through h.)							<u> </u>				
	c Media advertisements		•		•		<u> </u>				
d Mailings to members, legislators, or the public.									· · · · · · · · · · · · · · · · · · ·		
	• •	ed or broadcast statement		•			<u> </u>	+	<u> </u>		
	•	ations for lobbying purpose		melativa badi	,		<u> </u>	+			
		lators, their staffs, govern , seminars, conventions, s						\dashv			
	n railles, demonstrations	, seminars, conventions, s	specules, lectules, of	any other me	-ai 13						
	Total Johnson augo-dit.	iroc (add lines a through l	h)				1	- 1			
		ures (add lines c through l ove, also attach a stateme		escription of t	he lohhvin	o activities	<u></u>				

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

51 Did the	e reporting organization of	directly or inc	directly engage in any of the following	g with any other organization describeng to political organizations?	ed in section	501(:)			
			a noncharitable exempt organization			Yes	No			
(i) Ca	_				51 a (i)		X			
(ii) O	ther assets.				a (ii)		X			
b Other	transactions									
• • •	•		ncharitable exempt organization.		b (i)-		<u>-X-</u> -			
(ii)Pi	b (ii)		X							
(iii)Re	b (iii)		<u>X</u>							
` '	eimbursement arrangeme oans or loan guarantees	ents.			b (iv) b (v)		X			
• •	•	membershi	p or fundraising solicitations		b (vi)		<u>X</u>			
			ts, other assets, or paid employees	· ·	c c		X			
d If the the go	answer to any of the abounds, other assets, or servansaction or sharing arra	ve is 'Yes,' o vices given t ngement, sh	complete the following schedule. Columble to the reporting organization. If the oliow in column (d) the value of the go	umn (b) should always show the fair r rganization received less than fair ma ods, other assets, or services receive	market value i arket value i	of n				
(a)	(b)		(c)	(d)	(d)					
Line no	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, an	d sharing arran	igement	s 			
N/A										
					.		-			
			2							
						····				
	organization directly or in ibed in section 501(c) of t s,' complete the following		liated with, or related to, one or more her than section 501(c)(3)) or in secti	e tax-exempt organizations on 527?	► Ye	s X	No			
<u> </u>	(a)	301100010	(b)	(c)		_				
	Name of organization		Type of organization	Description of relati	onship ————					
N/A										
-/-										
										
-			-							
										
		_								
				<u> </u>						