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Department of the Treasury

Internal Revenue Service

AMENDED

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)

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

Open to Public Inspection

A	For the	e 2008 cal	endar year, or tax year beginning and ending		
В	Check if applicabl	le Please use IRS	C Name of organization	D Employer identifi	cation number
Г	Addre chang	ess label or	THE PROMISE FOUNDATION INC		
Ē	Name chang	type	Doing Business As	20-5	217323
[]	Initial return	Charles	Number and street (or P.O. box if mail is not delivered to street address) Room/suite		
L	Termii ation	Instruc-	1508 MILITARY CUTOFF ROAD, SUITE 30	910-	799-6901
Ļ	Amen	1	City or town, state or country, and ZIP + 4	G Gross receipts \$	42,139.
L	Applic		WILMINGTON, NC 28043	H(a) Is this a group re	
	pendı	F Nam	ne and address of principal officer:DENISE M. VINCENT	for affiliates?	Yes X No
			8 MILITARY CUTOFF RD., SUITE 302, WILMING	H(b) Are all affiliates inc	cluded? Yes No
1	Tax-ex	empt statu	s: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
		te: ► N/		H(c) Group exemptio	
<u>K</u>	Type of	organizatioi	n: X Corporation	r of formation: 2006 N	A State of legal domicile: NC
P	art I				
ø	1		scribe the organization's mission or most significant activities: $\overline{ ext{THE}}$ $\overline{ ext{CORPO}}$		
Activities & Governance		EXCLU	SIVELY FOR CHARITABLE, SCIENTIFIC, AND E	DUCATIONAL P	URPOSES
Ë	2	Check this	s box 🕨 📖 if the organization discontinued its operations or disposed of moi	re than 25% of its asset	s.
Š	3	Number of	f voting members of the governing body (Part VI, line 1a)	3	4
∞ જ	4	Number of	f independent voting members of the governing body (Part VI, line 1b)	4	4
es	5	Total num	ber of employees (Part V, line 2a)	3-16 5	
Ξ	6	Total num	ber of volunteers (estimate if necessary)	6	
Act	7a	Total gros	s unrelated business revenue from Part VIII, line 13-20-TUTE UNIT	7a	0.
_	b	Net unrela	ted business taxable income from Form 990-T, line 35 ECCIVED	7b	0.
			(100:110	Prior Year	Current Year
<u>o</u>	8	Contributi	ons and grants (Part VIII, line 1h) JUN 0 9 2016		10,664.
ent	9	Program s	ervice revenue (Part VIII, line 2g)		
Revenue	10	Investmen	it income (Part VIII, column (A), lines 3, 4, and 7d) TPR BRANCH		
ш	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 17PADEN		31,475.
			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	·	42,139.
	13	Grants and	d sımılar amounts paid (Part IX, column (A), lines 1-3)		3,578.
	14	Benefits p	aid to or for members (Part IX, column (A), line 4)		
S	15	Salaries, c	ther compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses	16a	Profession	nal fundraising fees (Part IX, column (A), line 11e)		
×	b	Total fund	raising expenses (Part IX, column (D), line 25)		
Ш	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)		26,537.
	18	Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		30,115.
_	19	Revenue I	ess expenses. Subtract line 18 from line 12		12,024.
Net Assets or	3			Beginning of Year	End of Year
set	20	Total asse	ts (Part X, line 16)		512,024.
Ä	21	Total liabil	ities (Part X, line 26)		500,000.
Z	22		s or fund balances. Subtract line 21 from line 20		12,024.
P	art II		ure Block		
			ties of perjury, I declare that I have examined this return, including accompanying schedules and statements le Declaration of preparer (other than officer) is based on all information of which preparer has any knowledgi		ge and belief, it is true, correct,
				ı	
Sig	jn	.			
He	re	' - "	ature of officer	Date	
			N T. VINCENT, REGISTERED AGENT	 	
		Туре	or print name and title	haali if	
Pai	d	Preparer's	Se	(see in:	er's identifying number structions)
_	parer's	signature	er	nployed 🕨 🛄	
	Only	yours if	HORNE HEF	EIN ▶	
	,	self-employe address, and	TIZZZZ OZD OZ BOOTH	_	
_		ZIP + 4	LUCEDALE, MS 39452	Phone no. ▶ 6	01-947-4278
Ma	y the II	RS discuss	this return with the preparer shown above? (see instructions)		X Yes No

ф

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$

) (Revenue \$

4e Total program service expenses ► \$

3,578. (Must equal Part IX, Line 25, column (B))

Form 990 (2008) THE PROMISE FOUNDATION INC Part IV | Checklist of Required Schedules

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x	
٠,	If "Yes," complete Schedule A	1 2	X	
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		Х
4	public office? If "Yes," complete Schedule C, Part I	4		X
4 5	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
3	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
U	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	i	х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
•	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
• •	If "Yes," complete Schedule D, Parts VI, VII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		х
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes, " complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			٦,
_	If "No", go to question 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		₩
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ð	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	OFF		х
26	prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	20		х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		A
£1	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		х
		Form	990 <i>(</i>	
		OHILL	J J J I	こしつひり

Form 990 (2008) THE PROMISE FOUNDA

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			1
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			ĺ
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L., Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	l		1
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35_		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 0 1a ō b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с X 6a Did the organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). X a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g X h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: N/A Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: N/A 11 a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? **12**a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Page 6

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

<u>sec</u>	tion A. Governing Body and Management			
	,		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_	X	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	'	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a		X
b		8b		X
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	x	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	40-	Х	
		12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12a	Α.	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
	to conflicts?			
	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	х	X
С	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12b	х	X
c 13	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy?	12b 12c 13	х	
c 13 14	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	12b 12c 13	х	
c 13 14 15	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.	12b 12c 13 14	х	X
c 13 14 15	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	12b 12c 13	х	
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c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	12b 12c 13 14	х	X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	12b 12c 13 14	х	X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	12b 12c 13 14 15a 15b	х	X X X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12b 12c 13 14 15a 15b	х	X X X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	12b 12c 13 14 15a 15b	х	X X X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	12b 12c 13 14 15a 15b	х	X X X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b	х	X X X
c 13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done. Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b 16a	х	X X X
c 13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Eition C. Disclosure	12b 12c 13 14 15a 15b 16a	х	X X X
c 13 14 15 a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NC Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availables.	12b 12c 13 14 15a 15b 16a	х	X X X
c 13 14 15 a b 16a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NC Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	12b 12c 13 14 15a 15b 16a	x	X X X
c 13 14 15 a b 16a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **Tion C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ▶NC Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. ■ Own website ■ Another's website ▼ Upon request	12b 12c 13 14 15a 15b 16a	x	X X X
c 13 14 15 a b 16a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **Etion C. Disclosure** List the states with which a copy of this Form 990 is required to be filled **NC** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	12b 12c 13 14 15a 15b 16a 16b	X	X X X
c 13 14 15 a b 16a b	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **Tion C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ▶NC Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and policy interest policy.	12b 12c 13 14 15a 15b 16a 16b	X	X X X

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per	Position (check all that apply)					ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
DENISE M. VINCENT PRESIDENT	1.00			Х				0.	0.	0
BENJAMIN VINCENT VICE PRESIDENT	1.00			х				0.	0.	0
KATHERINE L. VINCENT SECRETARY	1.00			х				0.	0.	0
JON T. VINCENT TREASURER	1.00			х				0.	0.	0
					T	 				
						\vdash				

Section A. Officers, Directors, T		T										(F)	
Name and title	Average	ŀ	1	•				Reportable			Es		d
	hours per week	H		all 1				compensation from the organization	from related organization	d s	com	other pensat	tion
		Individual trustee	Institutional truste	Officer	Key employee	Highest compensi employee	Former	(W-2/1099-MISC)	•	,	org: and	anızatı d relate	on ed
						·							
										_			
							_						
		_	-			_							
			_		_			<u> </u>		_			
1_1	<u> </u>				L_	Ļ							0.
	se in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0			<u> </u>	L		
	·						_	 				Yes	No
			e, ke	y en	ıplo	yee,	or h	nighest compensated ei	nployee on		3		Х
r any individual listed on line 1a, is the :	sum of reportab	le c						-	the organization		4		Х
any person listed on line 1a receive of	r accrue compe	nsat	ion 1						ices rendered to				Х
	duic a for sacri	pers											
,	compensated in	dep	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of con	npens	ation t	rom	
(A) Name and busines	ss address							(B) Description of s	services				n
							_	- 					
							1						
											· 	<u> </u>	
							-+						
t t	tal tal number of individuals (including tho mpensation from the organization If the organization list any former office a 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the drelated organizations greater than \$1 dray person listed on line 1a receive or any person listed on line 1a receive or organization? If "Yes," complete Scheder B. Independent Contractors Implete this table for your five highest organization. (A)	Name and title Average hours per week tal tal number of individuals (including those in 1a) who re mpensation from the organization if the organization list any former officer, director or true 1a? If "Yes," complete Schedule J for such individual in any individual listed on line 1a, is the sum of reportate direlated organizations greater than \$150,000? If "Yes if any person listed on line 1a receive or accrue compete organization? If "Yes," complete Schedule J for such in B. Independent Contractors mplete this table for your five highest compensated in erganization.	Name and title Average hours per week Double of the per week Doub	Name and title Average hours per week Average hours Average hours Average hours	Name and title Average hours per week Average hours	Name and title Average hours per week Average hours	Name and title Average hours per week Average hours	Name and title Average hours per week Average hours	Name and title Average hours per week Position (check all that apply) as a significant per week Average hours per week Position (check all that apply) as a significant per week Position that apply as a significant per week Average hours per week Position (check all that apply) as a significant per week Ital position (w.2/1099-MISC) Average hours per week Ital number of individuals (including those in 1a) who received more than \$100,000 in reportable mpensation from the organization is any former officer, director or trustee, key employee, or highest compensated et a 1a? If "Yes," complete Schedule J for such individual rany individual listed on line 1a, is the sum of reportable compensation and other compensation from the related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual and responsible to the person listed on line 1a receive or accrue compensation from any unrelated organization for server organization? If "Yes," complete Schedule J for such person B. Independent Contractors In Independent Contractors	Name and title Average hours per week Position (check all that apply) Position (check all that apply) Position (check all that apply) Position (the compensation from the companization (W-2/1099-MISC) Ital (W-2/1099-MISC) Ital (W-2/1099-MISC) Ital number of individuals (including those in 1a) who received more than \$100,000 in reportable mpensation from the organization of reportable somepensation and other compensated employee on 1a's if "Yes," complete Schedule J for such individual rany individual stated on line 1a, is the sum of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation and other compensation from the organization of reportable compensation from any unrelated organization for services rendered to organization? If "Yes," complete Schedule J for such person Is Independent Contractors mplete this table for your five highest compensated independent contractors that received more than \$100,000 of corganization.	Name and title Average hours per week Description (check all that apply) per week Description (check all that apply) per week Description (check all that apply) per week Description (check all that apply) per week Description (check all that apply) Description (w.2/1099-MISC) Description (w.2/1099-M	Name and trile Average hours per week Average hours per week at that apply) Average hours per week Average hours per week at that apply) Average hours per week has a per week or a per week per	Name and title Average hours per lead to the compensation from the organization from th

Pa	rt VI	II Statement of Revenue				
		•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts Its	1 a	Federated campaigns 1a				
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b				
s, g	c	Fundraising events 1c				
ar g		d Related organizations				
S, S		Government grants (contributions)				
ie iei	f	All all the second second			:	
돌	•	similar amounts not included above 1f 10,664.				
들		Noncash contributions included in lines 1a-1f \$				
9 8		Total. Add lines 1a-1f	10,664.			
\rightarrow		Business Code			*****	
	0 -					
Š	2 a		·			
ie g	b					
E S	C			·		
Page 1	_	d				
Program Service Revenue	6			_		
-	f					
\rightarrow		g Total. Add lines 2a-2f	<u> </u>			
l	3	investment income (including dividends, interest, and				
		other similar amounts)				
- 1	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
l		(i) Real (ii) Personal				
	6 a				j	
	t	b Less: rental expenses				
		c Rental income or (loss)	21 475	21 475		<u> </u>
		d Net rental income or (loss)	31,475.	31,475.		
	7 8	a Gross amount from sales of (i) Secunties (ii) Other				
		assets other than inventory	4			
	ı	b Less: cost or other basis				
		and sales expenses	1		1	
	•	c Gain or (loss)	100	<u> </u>		
		d Net gain or (loss)				ļ
ne	8 8	a Gross income from fundraising events (not				
ent		including \$ of				
ev.		contributions reported on line 1c) See				
Other Reven		Part IV, line 18]			
Ę	ı	b Less: direct expenses b				
U		Net income or (loss) from fundraising events				
	9 (a Gross income from gaming activities. See				
		Part IV, line 19 a			}	
	1	b Less: direct expenses b				
	,	c Net income or (loss) from gaming activities			<u> </u>	
	10	a Gross sales of inventory, less returns				
		and allowances a				
		b Less: cost of goods sold b				
		c Net income or (loss) from sales of inventory			<u> </u>	<u> </u>
		Miscellaneous Revenue Business Code				
	11	a				
		b				
	1	С		<u> </u>	<u> </u>	
		d All other revenue				
	ŀ	e Total. Add lines 11a-11d				
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	42,139	31,475	. 0.	0.
8320 02-0						Form 990 (2008)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must compl	_			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	ļ			
	See Part IV, lines 15 and 16	3,578.	3,578.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		ļ		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	5,678.		5,678.	
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	3,283.		3,283.	
12	Advertising and promotion	513.		513.	
13	Office expenses	326.		326.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	380.		380.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	6,751.		6,751.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	MANAGEMENT FEES	6,000.		6,000.	
b	EVENT SET-UP AND DISMAN	1,200.		1,200.	
С	OTHER FOUNDATION EXPENS	835.		835.	
d	UTILITIES	733.		733.	
е	MAINTENANCE & REPAIR	490.		490.	
f	All other expenses	348.		348.	
25	Total functional expenses. Add lines 1 through 24f	30,115.	3,578.	26,537.	0.
26	Joint Costs. Check here I If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		İ		
	educational campaign and fundraising solicitation				
		···			Fa 000 (0000)

Par	τχ.	Balance Sheet		(A) Beginning of year		(B) End of yea	ar
	1	Cash - non-interest-bearing			1	10,	059.
İ	2	Savings and temporary cash investments			2		448.
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, d	rectors, trustees, key				
		employees, or other related parties. Complete F	art II of Schedule L		5		
	6	Receivables from other disqualified persons (as	defined under section			1	
		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete			İ	
		Part II of Schedule L			6		
sts	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			8		0.4.4
⋖	9	Prepaid expenses and deferred charges			9	<u></u>	044.
	10a	Land, buildings, and equipment: cost basis	10a 499,473	<u>-</u>			
	b	Less accumulated depreciation. Complete				400	477
		Part VI of Schedule D	10b	0.		499,	473.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line			12	<u></u>	
	13	Investments - program-related. See Part IV, line	11		13		
	14	Intangible assets			14	 	
	15	Other assets. See Part IV, line 11		0.	15	512	,024.
	16	Total assets. Add lines 1 through 15 (must equ	ial line 34)	<u> </u>	16	312,	, 024.
	17	Accounts payable and accrued expenses			17 18		
	18	Grants payable			19		
	19	Deferred revenue			20		
	20	Tax-exempt bond liabilities	shadula D		21		
ties	21 22	Escrow account liability. Complete Part IV of So Payables to current and former officers, director				<u> </u>	
Liabilities	22	highest compensated employees, and disqualif			[]		
Ë		of Schedule L	ica persona. completo i are ii		22		
	23	Secured mortgages and notes payable to unrel	ated third parties		23		
	24	Unsecured notes and loans payable	and a me parases		24	500	,000.
	25	Other liabilities, Complete Part X of Schedule D			25		·
	26	Total liabilities. Add lines 17 through 25		0.	26	500	,000.
		Organizations that follow SFAS 117, check h	ere and complete				
S		lines 27 through 29, and lines 33 and 34.					
nces	27	Unrestricted net assets			27	L	
ala	28	Temporarily restricted net assets			28		
ğ	29	Permanently restricted net assets			29		
Ξ		Organizations that do not follow SFAS 117, or	check here 🕨 🗓 and				
9		complete lines 30 through 34.				ĺ	_
ets	30	Capital stock or trust principal, or current funds		0.			0.
Net Assets or Fund Bala	31	Paid-in or capital surplus, or land, building, or e	quipment fund	0.			0.
et '	32	Retained earnings, endowment, accumulated in	ncome, or other funds	0.			,024
Z	33	Total net assets or fund balances		0.			,024
_	34	Total liabilities and net assets/fund balances		0.	34	512	,024
Pa	rt XI	Financial Statements and Reporting	<u> </u>				es No
1	Acco	ounting method used to prepare the Form 990:	X Cash Accrual	Other			
2a		e the organization's financial statements compile				} 	X
b		e the organization's financial statements audited				2b	X
С		es" to lines 2a or 2b, does the organization have			e audı	l l	,,
		ew, or compilation of its financial statements and				2c	<u> </u>
За		result of a federal award, was the organization re	equired to undergo an audit or a	audits as set forth in the Sin	gle Au		٠,
		and OMB Circular A-133?	_			3a	X
b	If "Y	es," did the organization undergo the required a	idit or audits?			3b	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008
Open to Public Inspection

Name of the organization

THE PROMISE FOUNDATION INC Employer identification number 20-5217323

Parti	neasun	IOI FUDIIC CIIAI	ity Status (Ali Organiz	auons mu	si complet	e uns pari) (See Insi	iractions)				
The organ	ızatıon is not a	private foundation	because it is: (Please ch	eck only o	ne organiz	ation.)						
1 🛄	A church, cor	nvention of churche	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2 🗀	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🔲			ital service organization o									
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pıtal descr	nbed in se	ction 170	(b)(1)(A)(iii	i). Enter th	ne hospital	's nam	ie,
	city, and stat	e:										
5	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governr	mental uni	t describe	d in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II.)									
6	A federal, sta	ite, or local governm	nent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).					
7	An organizati	on that normally red	ceives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general p	ublic desc	rıbed ı	n
	section 170(b)(1)(A)(vi). (Comple	ete Part II)									
8	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 X	An organizati	on that normally rec	ceives: (1) more than 33 1	1/3% of its	support fr	rom contri	butions, m	nembershij	p fees, and	d gross red	ceipts	from
	activities rela	ted to its exempt fu	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of its	support f	rom gross	ınvest	ment
	income and u	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization a	fter June 3	0, 197	′ 5.
	See section	509(a)(2). (Complete	e the Part III.)									
10	An organizati	on organized and o	perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	l). (see ins	tructions)			
11	An organizati	on organized and o	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carry	y out the p	ourposes o	f one	or
	more publicly	supported organization	ations described in secti	on 509(a)([.]	1) or section	on 509(a)(2	2) See sec	tion 509(a	a)(3). Che	ck the box	that	
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	11h.						
	a Type I		_ /:	• • •	e III - Func	-	_			Type III - C		
e X	By checking	this box, I certify tha	at the organization is not	controlled	I directly o	r indirectly	by one o	r more disc	qualified p	ersons oth	er tha	i.D
		•	than one or more publicly		_				9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a wri	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	III e				
	supporting o	rganızatıon, check t	his box									X
g	-		organization accepted ar									
	(i) A perso	n who directly or inc	directly controls, either al	one or tog	ether with	persons o	described	ın (ıi) and (III) below,		Yes	No
	-	• •	supported organization?							11g(i)		
			n described in (i) above?							11g(ii)		
		•	a person described in (i) o							11g(iii)		
h	Provide the f	ollowing information	about the organizations	the organ	ization sup	oports.						
			(12) T	1						·		
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) Is organizatio	the	(vii) Am	ount o	f
orga	anization		(described on lines 1-9		sted in your document?			(i) organız U.S	ed in the	sup	port	
			above or IRC section	Yes	No	Yes	No	Yes	I No			
			(see instructions))	163	140	163	110	103	110			
		ļ					!					
				-			}		 			
									1 1			
				<u> </u>					 			
		1					ŀ					
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						ŀ		1				
					}		 	 	 			
Total				1]						
Total	Trivoor Act	d Denomicada Dad	I uction Act Notice, see t	l bo lnataria	tions for !	Form 000	<u> </u>	Cobodel	0 A (For	1 990 or 99	M_E71	2000
	-rivacy Act ar	iu raperwork nedl	JULION ACT NOTICE, SEE T	กษากรษนC	LIVIIS IUT I	- JI III 99U.	•	JUILEGAI	CW (LAIN	1 330 01 95	~~c∠)	

Support Schedule for C (Complete only if you checked				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Section A. Public Support					1 (1000	45.7.1
Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and		1				
membership fees received. (Do not						
ınclude any "unusual grants.")					 	
2 Tax revenues levied for the organ-			1	1		
ization's benefit and either paid to					İ	
or expended on its behalf					 	ļ
3 The value of services or facilities					1	1
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 - 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included				1		
on line 1 that exceeds 2% of the		1		1		
amount shown on line 11,						
column (f)						
6 Public Support. Subtract line 5 from line 4			<u> </u>		<u> </u>	L
Section B. Total Support		T		1	1	1
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4				ļ <u>.</u>		
8 Gross income from interest,						
dividends, payments received on			İ			
securities loans, rents, royalties						
and income from similar sources		ļ				
Net income from unrelated business		ļ				
activities, whether or not the						
business is regularly carried on						
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)			<u> </u>		<u> </u>	
11 Total support. Add lines 7 through 10		<u> </u>		<u> </u>	- I	<u> </u>
12 Gross receipts from related activities,	•	•			12	
13 First five years. If the Form 990 is for	=	's first, second, th	ird, fourth, or fifth	tax year as a secti	on 501(c)(3)	
organization, check this box and stor					 	
Section C. Computation of Publ					144	
14 Public support percentage for 2008 (I			, column (t))		15	
15 Public support percentage from 2007			l 10 and la	- 14 in 22 1/20/ or	<u> </u>	ox and
16a 33 1/3% support test - 2008. If the c				9 14 IS 33 1/3% OF	more, check this b	lox and ⊾
stop here. The organization qualifies		-		d line 15 in 22 1/2	0/ or more check!	this box
b 33 1/3% support test - 2007. If the c				id line 15 is 33 1/3	% or more, check	unis box ►□
and stop here. The organization qual				10 1010-	and line 14 in 100	∕ or more
17a 10% -facts-and-circumstances tes						
and if the organization meets the "fac					art iv now the orga	inization
meets the "facts-and-circumstances"					.47	▶ ∟
b 10% -facts-and-circumstances tes						
more, and if the organization meets the						ie _ [
organization meets the "facts-and-circ	cumstances" test	. The organization	qualities as a pub	olicly supported or	ganization	▶⊨

Se	ction A. Public Support					n you ansoned the so	
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and		<u> </u>				
	membership fees received. (Do not	1					
	ınclude any "unusual grants.")		ļ			4,914.	4,914.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513	ı I					
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf				ļ		
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total, Add lines 1 · 5	**		<u> </u>		4,914.	4,914.
	a Amounts included on lines 1, 2, and		-				
	3 received from disqualified persons	1					
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
•	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						4,914.
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6					4,914.	4,914.
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					31,475.	31,475.
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					[
	Add lines 10a and 10b					31,475.	31,475.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
12	assets (Explain in Part IV.)						36,389.
	Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	the erganization	's fire, second thi	rd fourth or fifth t	av vear as a secti	on 501(c)(3) organiz	·····
	check this box and stop here			iu, iouitii, or iiitii t			▶ X
	ction C. Computation of Publ						
15	Public support percentage for 2008 (I	ine 8, column (f) c	divided by line 13,	column (f))		15	%
	Public support percentage from 2007					16	%
<u>Se</u>	ction D. Computation of Inves	stment Incom	ne Percentage	<u> </u>		, .,	
	Investment income percentage for 20	•	• • •			17	.00_%
	Investment income percentage from 2		•			18	%
19	a 33 1/3% support tests - 2008. If the						7 is not
ı	more than 33 1/3%, check this box a 33 1/3% support tests - 2007. If the		-				▶
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The org	anızatıon qualıfies	as a publicly supp	oorted organization	▶□
20	Private foundation. If the organization	n did not check a	ı box on line 14, 19	a, or 19b, check t	his box and see ir	nstructions	

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

THE PROMISE FOUNDATION INC

Employer identification number 20-5217323

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	Is or Accounts. Complete if the				
	organization answered "Yes" to Form 990, Part IV, lin	e 6.					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds				
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No				
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may b	e used only				
	for charitable purposes and not for the benefit of the donor	or donor advisor or other impermissible p	private benefit? Yes No				
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).					
	Preservation of land for public use (e.g., recreation or	oleasure) Preservation of an h	istorically important land area				
	Protection of natural habitat	Preservation of certi	fied historic structure				
	Preservation of open space						
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a co	nservation easement on the last day				
	of the tax year.						
			Held at the End of the Year				
а	Total number of conservation easements	2a					
b	Total acreage restricted by conservation easements		2b				
C	Number of conservation easements on a certified historic sti	ructure included in (a)	2c				
d	Number of conservation easements included in (c) acquired		2d				
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organization during the taxable				
	year ▶						
4	Number of states where property subject to conservation easement is located						
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, violations,					
_	enforcement of the conservation easements it holds?		Yes No				
6	Staff or volunteer hours devoted to monitoring, inspecting, a	·					
7	Amount of expenses incurred in monitoring, inspecting, and						
8	Does each conservation easement reported on line 2(d) about a service 170/b/4/00/v/3	ve satisfy the requirements of section 17					
9							
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for						
	conservation easements.	LIONS III Idricial Statements triat describe	s the organization's accounting for				
Pa	t III Organizations Maintaining Collections of	f Art. Historical Treasures, or C	Other Similar Assets.				
	Complete if the organization answered "Yes" to Form		5 7				
1a	If the organization elected, as permitted under SFAS 116, no	of to report in its revenue statement and	balance sheet works of art, historical				
	treasures, or other similar assets held for public exhibition, e						
	the footnote to its financial statements that describes these		, p, m, m				
b	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures				
_	or other similar assets held for public exhibition, education,	•					
	these items:		7, 4 4 5				
	(i) Revenues included in Form 990, Part VIII, line 1		> \$				
	(ii) Assets included in Form 990, Part X		▶ \$ 499,473				
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ	·				
-	the following amounts required to be reported under SFAS 1						
а	Revenues included in Form 990, Part VIII, line 1		▶ \$				
b	Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·	> \$				
		•					

Pa	t III Organizations Maintaining Co	ollections of Ar	rt, His	torical Tr	easures, or C	Other	Simil	ar Asse	ts (conti	nued))
3	3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all										
	that apply):										
а											
b	Scholarly research	е		Other							
C	X Preservation for future generations										
4	Provide a description of the organization's col	lections and explai	n how ti	ney further t	he organızatıon's	exemp	ot purpo	se in Par	t XIV.		
5	During the year, did the organization solicit or	receive donations of	of art, h	storical trea	sures, or other s	mılar a	ssets		_		
	to be sold to raise funds rather than to be mai								Yes	X	. No
Par	Trust, Escrow and Custodial reported an amount on Form 990, Part		. Comp	lete if organi	zation answered	"Yes"	to Form	990, Par	t IV, line 9	9, or	
1a	Is the organization an agent, trustee, custodia	in or other intermed	lary for	contribution	ns or other assets	not in	cluded		_		_
	on Form 990, Part X?							L	Yes	L.	No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the fo	llowing	table:							
	Amount										
C	c Beginning balance										
d	d Additions during the year 1d										
e	e Distributions during the year										
f	Ending balance						11				
	Did the organization include an amount on Fo	rm 990, Part X, line	217						」Yes	<u> </u>	_ No
	If "Yes," explain the arrangement in Part XIV.	· · · · · · · · · · · · · · · · · · ·	1 83 7			-		·			
Pai	t V Endowment Funds. Complete if								1		
	<u> </u>	(a) Current year	(b) i	rior year	(c) Two years ba	ck (a)	Three y	ears back	(e) Four	years	back
1a	Beginning of year balance								ļ		
b	Contributions								<u> </u>		
	Investment earnings or losses							· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	Grants or scholarships					-					
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance				<u> </u>				L		
2	Provide the estimated percentage of the year	end balance held a									
a	Board designated or quasi-endowment		_%								
	Permanent endowment	%									
	Term endowment ▶%	-									
3a	Are there endowment funds not in the posses	sion of the organiza	ation th	at are neid a	ina administered	tor the	organiz	ation	Г		_
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
L	(ii) related organizations		- Caba	dula DO					3a(ii)		
	If "Yes" to 3a(ii), are the related organizations	•							3b		L
Dai	Describe in Part XIV the intended uses of the tVI Investments - Land, Buildings				Part Y Iron 10						
T ai	Description of investment					(a) Don	rooto		(d) Dool	c volu	
	Description of investment	(a) Cost or of basis (investing		, , -	(other)	(c) Deb	reciatio	"	(d) Bool	(valu	Ð
10	Land	2233 (11103111			8,643.				339	8 6	43.
	Buildings	 			0,830.		··				$\frac{43.}{30.}$
	· ·			10	0,000			-+	10	<i>,</i> , 0	50.
	Leasehold improvements							 +-			
ď	Equipment Other										
<u>e</u> Total	. Add lines 1a-1e. (Column (d) should equal For	m 000 Part V call	mn /D1	line 10/c) \					490	9 4	73.
TOTAL	. Add intes Ta-Te. [Columnit (d) should equal For	m 330, <u>Fait ∧, COlU</u>	ин (D),	re 10(c))				Schedule			
									- \· · · · · · · · · · · · · · · · · · ·		

Part VII Investments - Other Securities.	See Form 990 Part X line			<u> </u>		
(a) Description of security or category		- 12.	(c) Method of valua	tion:		
(including name of security)	(including name of security) (b) Book value		Cost or end-of-year market value			
Financial derivatives and other financial products				······································		
Closely-held equity interests						
Other						
	1					
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)						
Part VIII Investments - Program Related.	See Form 990, Part X, lir	ne 13.				
(a) Description of investment type	(b) Book value		(c) Method of valua st or end-of-year mark			
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)	>					
Part IX Other Assets. See Form 990, Part X, Irr						
(8	a) Description			(b) Book value		
						
		····				
	<u> </u>					
 						
	<u> </u>					
						
Total. (Column (b) should equal Form 990, Part X, col (B)						
Part X Other Liabilities. See Form 990, Part 3	X, line 25.	(b) Amount	1			
		(b) Amount	.]			
Federal income taxes			4			
			4			
			4			
			1			
			4			
			4			
			4			
			4			
			4			
			4			
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25)	····	<u> </u>			

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	o Financial Stat	tements		<u></u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		42,139.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		30,115.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		12,024.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)		8		
9	Total adjustments (net). Add lines 4-8		9		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		12,024.
Pa	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With Reve	nue per f	Return	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a]	
b	Donated services and use of facilities	2b]	
С	Recovenes of prior year grants	2c]]	
d	Other (Describe in Part XIV)	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		7	
С	Add lines 4a and 4b			4c	
_5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Staten	nents With Exp	enses pei	r Return	
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		_	
b	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c		_	
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	_4b			
C	Add lines 4a and 4b			4c	
_5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		. <u></u>	5	
Pa	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part art XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	III, lines 1a and 4, P	art IV, lines	Ib and 2b; Pa	urt V, line 4; Part
					····

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

THE PROMISE FOUNDATION INC

Employer identification number 20-5217323

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
WITH THE INTENT OF PROVIDING FINANCIAL ASSISTANCE TO IMPROVE THE					
HEALTH, EDUCATION, AND WELFARE OF DISADVANTAGED, UNDERPRIVELEGED,					
NEGLECTED, OR ABUSED CHILDREN, AND, INCLUDING, FOR SUCH PRUPOSES, THE					
MAKING OF SCHOLARSHIPS, GRANTS OR DISTRIBTUIONS TO CERTAIN QUALIFYING					
INDIVIDUALS AND TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS					
DESCRIBED IN SECTIONS 501(C)(3),170(C),2055(A) AND 2522(A) OF THE CODE					
(OR OF THE CORRESPONDING PROVISIONS OF ANY FUTURE UNITED STATES					
INTERNAL REVENUE LAW).					
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:					
INCLUDING, FOR SUCH PRUPOSES, THE MAKING OF SCHOLARSHIPS, GRANTS OR					
DISTRIBTUIONS TO CERTAIN QUALIFYING INDIVIDUALS AND TO ORGANIZATIONS					
THAT QUALIFY AS EXEMPT ORGANIZATIONS DESCRIBED IN SECTIONS					
501(C)(3),170(C),2055(A) AND 2522(A) OF THE CODE (OR OF THE					
CORRESPONDING PROVISIONS OF ANY FUTURE UNITED STATES INTERNAL REVENUE					
LAW).					
FORM 990, PART VI, SECTION A, LINE 2: INFORMATION AVAILABLE UPON REQUEST.					
FORM 990, PART VI, SECTION A, LINE 3: INFORMATION AVAILABLE UPON REQUEST.					
FORM 990, PART VI, SECTION A, LINE 8A: UPON REQUEST.					
FORM 990, PART VI, SECTION A, LINE 8B: INFORMATION UPON REQUEST.					
TOTAL PROTEST OF DESIGNATION OF THE PROPERTY OF THE PROPERTY.					

SCHEDULE O

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

THE PROMISE FOUNDATION INC

Employer identification number 20-5217323

FORM 990, PART VI, SECTION A, LINE 10: COPY OF FORM 990 PRESENTED TO
GOVERNING BODY PRIOR TO FILING FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C: EACH DIRECTOR, PRINCIPAL OFFICER

AND MEMBER OF A COMMITTEE ACTING WITH BOARD-DELEGATED POWERS, SHALL, UPON

COMMENCEMENT OF HIS OR HER EMPLOYMENT OR TERM OF OFFICE, AND ANNUALLY

THEREAFTER, SIGN A STATEMENT, CERTIFYING THAT THE PERSON: (1) RECEIVED A

COPY OF THE CONFLICTS OF INTEREST POLICY; (2) HAS READ AND UNDERSTANDS THE

POLICY; (3) AGREES TO COMPLY WITH THE POLICY; AND (4) UNDERSTANDS THAT THE

CORPORATION IS A CHARITABLE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS

TAX EXEMPT STATUS, IT MUST ENGAGE PRIMARILY IN ACTIVITES WHICH ACCOMPLISH

ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

IF THE BOARD OF DIRECTORS OR A COMMITTEE HAS REASONABLE CAUSE TO BELEIVE
THAT AN INTERSTED PERSON HAS FAILED TO DISCLOSE A FINANCIAL INTEREST OR
NON-FINANCIAL INTEREST, IT SHALL INFORM SUCH PERSON OF THE BASIS FOR SUCH
RELIEF AND AFFORD THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE
TO DISCLOSE. IF, AFTER HEARING THE RESPONSE OF THE INTERESTED PERSON AND
MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED UNDER THE
CIRCUMSTANCES, THE BOARD OF DIRECTORS OR COMMITTEE DETERMINES THAT THE
PERSON HAS, IN FACT, FAILED TO DISCLOSE A FINANCIAL INTEREST OR
NON-FINANCIAL INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND
CORRECTIVE ACTION.

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.