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## Form **990-EZ**

Department of the Treasury

Short **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)

Sponsonng organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2008

Open to Public

	Inter	nal Revenu	e Service	<u>'</u>	Ine organization may have to use a copy of this return to satisfy state reporting re	quirements		mspection
	A F	For the	2008 calend	lar year,	or tax year beginning , 2008, and ending			, 20
က	B	Check if ap	plicable	Please	C Name of organization	D Emplo	yer ider	ntification number
2013		Address cl	hange	use IRS label or	KHEDIVE TEMPLE #16	23	!	7536454
2	=	Name cha	•	print or	Number and street (or P.O. box, if mail is not delivered to street address) Room	/suite E Telep	hone nu	
ငာ	=	Initial retur		type. See	P. O. BOX 12692	(	١	
	=	Terminatio Amended		Specific	City or town, state or country, and ZIP + 4			<u> </u>
4000g	=	Application		Instruc- tions.	BIRMINGHAM, AL 35205	F Group		otion
===	=		<del></del>					[7] Cook [7] Annual
				а соп	pleted Schedule A (Form 990 or 990-EZ).	Other (specify)	<b>&gt;</b>	☑ Cash ☐ Accrual
8	,				Hy one)— ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527  In is not a section 509(a)(3) supporting organization and its gross receipts are eation chooses to file a return, be sure to file a complete return.  e 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead on sees, and Changes in Net Assets or Fund Balances (See	Check ▶ 🔽	if the o	rganization is <b>not</b>
.⊑ ō	1	Websit	e: 🕨			required to atta	ch Sch	edule B (Form 990,
등등	) ل	Organiz	ation type (d	check or	ly one) — ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	990-EZ, or 990	-PF).	
Öğ	K	Check ▶	If the or	ganızatio	n is not a section 509(a)(3) supporting organization and its gross receipts a	re normally not	more th	an \$25,000. A return is
$\Omega_{\mathcal{C}}$	, "	not reau	red. but if th	e organi	zation chooses to file a return, be sure to file a complete return.	C Wormany Hot		an \$20,000. A rotall lo
.≘ ≝		Add lines	5b. 6b. and	7b. to lir	e 9 to determine gross receipts: if \$1,000,000 or more, file Form 990 instead of	f Form 990-FZ	<b>▶</b> \$	<del></del>
ည္တင္	R	Add lines art I  1 2 3 4 5a b c 6 a	Revenue	Fyne	nses, and Changes in Net Assets or Fund Balances (See	the instruct	ions fo	or Part I )
JHH C						tile matruot		, r arc 1.)
3		1			, grants, and similar amounts received STATLITE (if)		1	
( <b>O</b> )		2			evenue including government fees and contracts D		2	40405
(O		3		•	and assessments		3	16485
1 1.0		4	Investment	t incom			4	
#E		5a			n sale of assets other than inventory			
45		b	Less: cost	or othe	r basis and sales expenses ACCUUNIS MANAGE 1567			
<b>II</b>		С	Gain or (los	s) from	sale of assets other than inventory (Subtract line 35 from line 3a) (attac	h schedule) .	5c	
*	2	6			nties (complete applicable parts of Schedule G). If any amount is from gaming, check h			
沥	ě	a			t including \$ of contributions	_	1 1	
T.	é		reported o		- I - I	8,625	ŀĺ	
<b>₩</b>	_	۱ ہ	•		ises other than fundraising expenses	4,225	1	
***		b			s) from special events and activities (Subtract line 6b from line 6a		6c	4,400
8.M3	3				1 — 1	1)	<del>"</del>	-1,100
<b>4</b>	3	1			ontory, roos rotario and anovarious	<del></del>	1	
9			Less: cost	_				
C	•	I _			ss) from sales of inventory (Subtract line 7b from line 7a)		7c	
		8	Other reve			CEIVED)	8	
11	5	9	lotal reve	nue. A	dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		9	20,885
-	•	10	Grants and	d simila	amounts paid (attach schedule)		10	
Ω	- 1	11	Benefits pa	aid to o	r for members	V 16'11	11	13,617
$\Box$	nses	12	Salaries, o	ther co	npensation, and employee benefits		12	
3	S	13			and other payments to independent contractors CINCINNATI.		13	
3	Expe	14			utilities, and maintenance		14	200
入	ω	15			ons, postage, and shipping.		15	
×		16			lescribe >		16	3,000
	1	17			Add lines 10 through 16		17	16,817
		18			for the year (Subtract line 17 from line 9)		18	4,068
	Net Assets	Į					· · ·	
	SS	19			d balances at beginning of year (from line 27, column (A)) (must		19	7,470
	4				reported on prior year's return)		20	1,470
	ž	20 21			net assets or fund balances (attach explanation)			44 520
							21	11,538
	176	art II	palance		. If Total assets on line 25, column (B) are \$2,500,000 or more, fil		-	
				•		(A) Beginning of	<del></del>	(B) End of year
	22	Cash	i, savings, a	and inve	estments	7,4	70 22	<del>                                     </del>
	23	Land	and buildi	ngs .			23	<del></del>
	24				<b>&gt;</b>		24	<del></del>
	25					7,4	70 25	11,538
	26						26	
	27	Net:	assets or f	und ha	e ▶) lances (line 27 of column (R) must agree with line 21)	7.4	70 27	11 538

Pa	art III	Statement of Program Service Accom	plishments (See the instr	ructions for Part	II.)		Expenses
Wh	at is the	organization's primary exempt purpose?				(Req	uired for 501(c)(3)
		nat was achieved in carrying out the organization	ation's exempt purposes. In	a clear and conc	ise manner.	and	(4) organizations 4947(a)(1) trusts;
des	cribe the	services provided, the number of persons ber	nefited, or other relevant info	rmation for each p	ogram title.	optio	onal for others.)
28				· · · · · · · · · · · · · · · · · · ·			
		\$ ) If this amount inclu		here	. • 🗆	28a	
29							
		\$) If this amount inclu				29a	
30							
					<u></u>		
		\$ ) If this amount inclu				30a	
31	-	ogram services (attach schedule)					
^^	(Grants		udes foreign grants, check			31a	·
		ogram service expenses (add lines 28a th				32	no for Dort IVA
	art IV	List of Officers, Directors, Trustees, and Key	(b) Title and average	(c) Compensation	d) Contribution		(e) Expense
		(a) Name and address	hours per week		emplóyee benefit j	plans &	account and
			devoted to position	enter -U)	deferred compen	Sation	other allowances
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description of each activity  4 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes  5 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but the organization had income on form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?  b If "Yes," has it filed a tax return on Form 990-T for this year?  36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete Sephicially parts of Schedule N Did the organization is parts of Schedule I Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved  38b   37b   √ 38a Did the organizations. Enter amount of tax imposed on organization engage in any section 4955 ▶  a Section 4911 ▶ section 4912 ▶ section 4912 ▶ section 4915 ▶ section 4915 ▶ section 4912 ▶ section 4912 ▶ section 4915 ▶ Section 4912 ▶	Pai	t V Other Information (Note the statement requirements in the instructions for Part VI.)			
description of each activity  4 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes  5 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on From 990-T, attach a statement explaining you reason for not reporting the income on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?  b If "Yes," has it filed a tax return on Form 990-T for this year?  36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N  7a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ □ 37a □ 37b □ 37b □ 37b □ 37c □ 37b □ 37c □ 37b □ 37c □ 37b □ 37c □ 37c □ 37c □ 37b □ 37c □				Yes	No
attach a conformed copy of the changes  3 If the organization have unrelated business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?  b If "Yes," has it filed a tax return on Form 990-T for this year?  36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 127a	33		33		1
not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.  a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?  b if "Yes," has it filed a tax return on Form 990-T for this year?  358 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N  36 Jay a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 36 Jay a Enter amount of functions are an explained in the instructions. ▶ 36 Jay a Enter amount of text and the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved 38b Jay a Section 501(c)(0) organizations. Enter:  a initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities 39 Jay b Section 501(c)(3) and (4) organizations. Did the organization enders a section 4951 ▶ 39a Jay b Section 4911 ▶ 39a Jay b Section 4912 ▶ 39a Jay b Section 4915 ▶ 39a Jay b Section 4915 ▶ 39a Jay b Section 4915 ▶ 39a Jay b Section 4911 ▶ 39a Jay b Section 4912 ▶ 39a Jay b Section 4915 ▶ 39a Ja	34		34		1
and proxy tax requirements?  b if "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N  3a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ □ 37a □  b Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved □ 38b □ 39a	35				:
Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ [37a]  38b Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved  b If "Yes," complete Schedule L, Part II and enter the total amount involved  38a Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶  b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year under sections 4912, 4955, and 4958  d Enter amount of tax on line 40c reimbursed by the organization a party to a prohibited tax shelter transaction? If "Yes," complete Schedule L, Part I and 40c reimbursed by the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  40b If the states with which a copy of this return is filed. ▶  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  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.  C At any time during the calendar year, did the or	а				
complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a   37b Did the organization brorow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved   38b   39a   39a   39a   39a   39b   39a   39b   39a   39b   39a   39b   39b   39a   39b   39b	b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	<u> </u>	<u> </u>
b Did the organization file Form 1120-POL for this year?  38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved  39 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities  39a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶		complete applicable parts of Schedule N	36		1
any such loans made in a prior year and still unpaid at the start of the period covered by this return?  ## Yes," complete Schedule L, Part II and enter the total amount involved  ## Section 501(c)(7) organizations. Enter:  ## Initiation fees and capital contributions included on line 9  ## Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  ## section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  ## section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  ## section 4911 ▶			37b		<b>/</b>
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b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶					
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 secess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I  c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Enter amount of tax on line 40c reimbursed by the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8866-T.  41 List the states with which a copy of this return is filed. ▶  21P + 4  242a The books are in care of ▶  Located at ▶  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account?)  If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year . ▶ 43  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		initiation loop and capital contributions included on the S	┥ '		١,
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶  b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I  c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  12 Is the states with which a copy of this return is filed. ▶  21P + 4  b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account?)  If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  143  Yes No.  Ye		areas resolves, medical cir mile of the public des of olds facilities	┥ '	'	
during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I  C Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Enter amount of tax on line 40c reimbursed by the organization.  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T.  41 List the states with which a copy of this return is filed.  42 The books are in care of ▶  Located at ▶  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year.  ▶ 43 List the states with which a copy of the organization within the meaning of section 512(b)(13)? If  Yes No.		section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
L, Part I  C Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  List the states with which a copy of this return is filed. ▶  Telephone no. ▶ (  Located at ▶  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43   Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ  45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	b			•	
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e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  List the states with which a copy of this return is filed. ▶  List the states with which a copy of this return is filed. ▶  Located at ▶  Located at ▶  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43  Yes No.  Yes No.  Yes No.  10 the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ.  11 Telephone no. ▶	C	Enter amount of tax imposed on organization managers or disqualified persons during			
transaction? If "Yes," complete Form 8886-T.  List the states with which a copy of this return is filed. ▶  Telephone no. ▶ (	d	Enter amount of tax on line 40c reimbursed by the organization ▶	.	!	
Telephone no. ► ( )  Located at ►	е		40e		1
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over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	42a		. <i>}</i> 		
account)?  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.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶  42b  ✓  42b  ✓  42c  ✓  42c  ✓  42c  ✓  42c  ✓  43c  ✓  44c  ✓  45  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶  45  Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	b			Voc	Na
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.  C At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year			42h	163	
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If "Yes," enter the name of the foreign country:   Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year   43  Yes Note the instructions for exceptions and filing requirements for Form 990-EZ in lieu of Form 1041—Check here and enter the name of the foreign country:   Yes Note the instructions for exceptions and filing requirements for Form 990-EZ in lieu of Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		,			-
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and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43  Yes No.  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		If "Yes," enter the name of the foreign country: ▶			
Yes Note  44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	43			٠	▶ □
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ.  44   45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		and enter the amount of tax-exempt interest received or accrued during the tax year			
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ.  44   45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If				Vac	No
Form 990-EZ	44	Did the organization maintain any denor advised funded if #Vee 7 Farm 000 must be completed in the of		165	140
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	44	· · · · · · · · · · · · · · · · · · ·	44		1
	45				
			45	<u> </u>	<b>V</b>

Page	4

Part VI	(2008)						Page
rait VI	Section 501(c)(3) organizations only. and complete the tables for lines 50 ar		organizations	must	answer questi	ons 46-	-49
<b>46</b> Did t	he organization engage in direct or indirect po	olitical campaign activitie	s on behalf of	or in o	opposition to		es No
	lidates for public office? If "Yes," complete So	·				46	
	he organization engage in lobbying activities?					47	
	e organization operating a school as describe	, , , , , ,	•	•		48 49a	
	he organization make any transfers to an exer	•	•			49a	
<b>50</b> Com	plete this table for the five highest compensation received more than \$100,000 of compensation	ted employees (other tha	n officers, dire	ctors,	trustees and key er "None."		ees) wh
(a)	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensa	en	(d) Contributions to apployee benefit plans & deferred compensation	accou	pense nt and owances
			<del></del>				
			<u> </u>				
Total num!	ber of other employees paid over \$100,000 ▶		<del> </del>				
		ted independent contract	ors wno each	receiv	eo more than \$1	00,000	of
	pensation from the organization. If there is not  (a) Name and address of each independent contractor positions.	ne, enter "None."			of service	(c) Comp	
	pensation from the organization. If there is not	ne, enter "None."					
	pensation from the organization. If there is not	ne, enter "None."					
	pensation from the organization. If there is not	ne, enter "None."					
	pensation from the organization. If there is not	ne, enter "None."					
	pensation from the organization. If there is not	ne, enter "None."					
	pensation from the organization. If there is not	ne, enter "None."					
comp	pensation from the organization. If there is not	ne, enter "None."					
comp	censation from the organization. If there is not	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomp	panying schedule:	b) Type	of service	(c) Comp	ensation
comp	ber of other independent contractors each rec	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomp	panying schedule:	b) Type	of service	(c) Comp	ensation
Comp	ber of other independent contractors each rec	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomp	panying schedule:	b) Type	of service	(c) Comp	ensation
Comp	ber of other independent contractors each red  Under penalties of penury, I declare that I have examinated belief, it is true, correct, and complete. Declaration	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomp	panying schedule:	b) Type	of service	(c) Comp	ensation
Total num	ber of other independent contractors each recondend in the contractor produced in the contractor of the contractors and belief, it is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete. Declaration of the contractors is true, correct, and complete is true, correct, and correct is true, correct, and correct is true,	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomp	panying schedule:	and stainformat	of service	(c) Comp	ensation knowledg knowledg
Total num Sign Here	the dependent contractor particles of other independent contractor particles of other independent contractors each recommendation of other independent contractors each recommendation of other independent contractors each recommendation of other particles of perjury, I declare that I have examine and belief, it is true, correct, and complete. Declaration of officer  Lyndon Gilliam, Illustrious Potentate Type or print name and title.  Preparer's signature	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomply of preparer (other than office	panying scheduler is based on all	and stanformat  Dat	of service  stements, and to the kilon of which prepare	(c) Comp	ensation knowledg knowledg
comp	ber of other independent contractors each recondend belief, it is true, correct, and complete. Declaration Signature of officer  Lyndon Gilliam, Illustrious Potentate Type or print name and title.  Preparer's signature	ne, enter "None."  aid more than \$100,000  ceiving over \$100,000  ed this return, including accomply of preparer (other than office	Danying scheduler of its based on all	a and stainformation  Dat  if  yed  EIN	of service	(c) Comp	ensation knowledg knowledg