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# SCANNED MAR 1 2 2011

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2008

Open to Public Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2008 calendar year, or tax year beginning April 1 2008, and ending 20 09 March 31 Employer identification number C Name of organization Humanitarian Service Project B Check if applicable use IRS Doing Business As 3187979 Address change 36 Number and street (or P O box if mail is not delivered to street address) orint or Room/surte Telephone number Name change type. (630)221-8340 Initial return 465 Randy Road City or town, state or country, and ZIP + 4 ☐ Termination Carol Stream, IL 60188-2119 Amended return G Gross receipts \$ 1,043,978 F Name and address of principal officer: Karole Kettering H(a) Is this a group return for affiliates? Yes No Application pending 465 Randy Road, Carol Stream, IL 60188-2119 H(b) Are all affiliates included? Yes No If "No," attach a list. (see instructions) Website: ▶ www.humanitarianservice.org H(c) Group exemption number ▶ Type of organization. ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 1982 M State of legal domicile: 1L Part I Summary Briefly describe the organization's mission or most significant activities: To relieve the suffering and humiliation that poverty brings to Senior Citizens and Children throughout DuPage and Kane Counties. Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. 3 Number of voting members of the governing body (Part VI, line 1a). 4 2 Number of independent voting members of the governing body (Part VI, line 1b) 5 17 6 1,000 6 Total number of volunteers (estimate if necessary) . . . 7a 0 7a Total gross unrelated business revenue from Part VIII, line 12, column (C). b Net unrelated business taxable income from Form 990-T, line 34. 0 Current Year 1,258,594 1,035,366 Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . . . 10,240 8,612 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . Other revenue (Part VIII, column (A) lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0 Total revenue—add lines 8, Brough 11 (must equal Part VIII, column (A), line 12) 1,268,834 1,043,978 13 Grants and Smitar emounts paid (Rart IX, column (A), lines 1-3) . 768,716 664,672 14 Benefits paid to or for members (PA) X, column (A), line 4) . . . O 0 15 Salaries other compensation (Athployee benefits (Part IX, column (A), lines 5–10)
16a Professional funeraising fees (Part IX, column (A), line 11e) 172,570 180,819 b Total funeraising expenses (Part IX Toolumn (D), line 25) ▶ 160.345 157,716 1,101,631 1,003,207 19 Revenue less expenses. Subtract line 18 from line 12 167,203 40,771 90 Beginning of Year End of Year 2,235,036 2,277,181 20 Total assets (Part X, line 16) . 1,375 Total liabilities (Part X. line 26) Net assets or fund balances. Subtract line 21 from line 20 2,235,036 2,275,806 Part II Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here reasurer Type or print name and title Date Preparer's identifying number Preparer's self-(see instructions) signature employed ▶ □ Paid Preparer's Firm's name (or yours EIN Use Only if self-employed) address, and ZIP + 4 Phone no ► ( May the IRS discuss this return with the preparer shown above? (see instructions) No Yes [

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2008)

Pai	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: To relieve the suffering and humiliation that poverty brings to Senior Citizens and Children throughout DuPage and Kane Counties of Illinois.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 432,467 including grants of \$ ) (Revenue \$ 457,014) Christmas Offering: Serving needy families, children, and seniors in the DuPage and Kane County areas through
	deliveries of fresh fruit and vegetables, frozen meat, non-perishable food, personal care items, and gifts of toys, games, books, and clothes. 150 Families, 1,500 Children, and 115 Seniors Served.
	040 074
4b	(Code: ) (Expenses \$ 249,274 including grants of \$ ) (Revenue \$ 261,875 )  Senior Citizen Project: Serving needy senior citizens in DuPage and Kane Counties with monthly deliveries of
	fresh fruit and vegetables, frozen meat, non-perishable food, personal care items, and gifts.
	115 Seniors Served every month.
4c	(Code: ) (Expenses \$ 205,322 including grants of \$ ) (Revenue \$ 169,545 )
	Children's Birthday Project: Serving needy children in DuPage and Kane Counties with annual deliveries of presents
	on their birthday, including educational games, toys, and books. 1,100 Children Served.
	•
	Other program services. (Describe in Schedule O.) (Expenses \$ 48,618 including grants of \$ ) (Revenue \$ 43,534 )
4e	Total program service expenses ► \$ 935.681 (Must equal Part IX, Line 25, column (B).)

Pai	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<b>✓</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and 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 on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8_		1
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		1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
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, VIII, IX, or X as applicable	11	✓	
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	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	3	14a		<b>\</b>
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		✓
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		✓
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		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II	17		1
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		1
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓
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		✓
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	✓	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		✓
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. If "No," go to question 25.	24a	-	<del>-/-</del>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	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		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a 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 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	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		1

Pa	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 indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		1
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		1
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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓_	<u></u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,

Form **990** (2008)

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
<b>2a</b>	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  2a 17			
h	Statements, filed for the calendar year ending with or within the year covered by this return 2a 17  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
J	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		·	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)?	4a		1
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?	<u>5a</u>		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Did the organization solicit any contributions that were not tax deductible?	_6a		<b>✓</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			İ
	<b>509(a)(3) supporting organizations.</b> 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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	_9b_		<u> </u>
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII line 12			
a	middlett tode and daptar dottinations included on tark vin, into the contract of the contract			
_ b	aross receipts, moraced on rorm 556, rait vin, line 12, for public dec of club facilities			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	ł		
	amound add or received ment atoms,	12a		

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

	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			
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	✓	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<b>√</b>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<b>√</b>
6	Does the organization have members or stockholders?	6		<b>√</b>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		✓
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<b>√</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			i
а		8a	1	
	Each committee with authority to act on behalf of the governing body?	8b	<b>√</b>	
	Does the organization have local chapters, branches, or affiliates?	9a		1
	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	✓	
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	-	<u> </u>
sec	tion B. Policies			
	r		Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	<b>✓</b>	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	Too, (			,
	describe in Schedule O how this is done	12c		✓
13	describe in Schedule O how this is done  Does the organization have a written whistleblower policy?	13	<b>√</b>	<b>✓</b>
14	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?		✓ ✓	<b>✓</b>
	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	13	<b>√</b>	<b>✓</b>
14 15	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:	13 14	<b>√</b>	
14 15 a	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?	13 14 15a	<b>√ √</b>	✓ ✓
14 15 a	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?	13 14	√ √ √	
14 15 a b	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)	13 14 15a	✓ ✓	
14 15 a b	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	13 14 15a 15b	✓ ✓	<b>V</b>
14 15 a b	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?	13 14 15a	✓ ✓	
14 15 a b	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	13 14 15a 15b	✓ ✓	<b>V</b>
14 15 a b	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	13 14 15a 15b	✓ ✓	<b>V</b>
14 15 a b	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?	13 14 15a 15b	✓ ✓	<b>V</b>
14 15 a b 16a b	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	13 14 15a 15b 16a	<b>V</b>	<b>V</b>
14 15 a b 16a b	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?  List the states with which a copy of this Form 990 is required to be filed   List the states with which a copy of this Form 990 is required to be filed	13 14 15a 15b 16a	✓ / · · · · · · · · · · · · · · · · · ·	<b>V</b>
14 15 a b 16a b	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?  List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c))	13 14 15a 15b 16a	✓ / · · · · · · · · · · · · · · · · · ·	<b>V</b>
14 15 a b 16a b	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?  List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply.	13 14 15a 15b 16a	✓ / · · · · · · · · · · · · · · · · · ·	<b>V</b>
14 15 a b 16a b Sec	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?  List the states with which a copy of this Form 990 is required to be filed ▶  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website ☑ Another's website ☑ Upon request	13 14 15a 15b 16a 16b	only)	<b>V</b>
14 15 a b 16a b	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?  List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply.	13 14 15a 15b 16a 16b	only)	<b>V</b>
14 15 a b 16a b Sec	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?  List the states with which a copy of this Form 990 is required to be filed ▶  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply.  □ Own website ☑ Another's website ☑ Upon request	13 14 15a 15b 16a 16b	only)	<b>V</b>
14 15 a b 16a b Sec	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 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c) available for public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website Dupon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict or	13 14 15a 15b 16a 16b	only)	<b>V</b>

## Part VII 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.

☐ Check this box if the organization did not co	ompensate	any o	offic	er,	dire	ctor,	trus	stee, or key em	ıployee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	Posit	ion (	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Karole Kettering Exec. Dir./Pres.	44	1		1				41,750	0	0
Floyd Kettering Treasurer	8	1		1				0	0	0
Cheryl McGarrity Director	2	1						0	0	0
Maureen Beal		•		<del>                                     </del>					_	
Director	1	1				İ		0	0	0
									_	

Pa	T VII Section A. Officers, Directors, True		/ Emp	loy			d Higi	hes			ntinue		
	(A)	(B)	04	(	•	C)	AL-A		(D)	(E)	_	(F)	
	Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fr org	stimated mount of other opensation the ganization direlated anizations	<b>)</b>
									=======================================				
1b	Total	• • • •					٠	▶	41,750	0			0
2	Total number of individuals (including those organization ▶ 0	e in 1a) wh	o rec	eive	ed n	nore	e than	\$1		rtable compens	ation	from th	е
					•							Yes N	Vо
3	Did the organization list any former office employee on line 1a? If "Yes," complete S	r, director	or tru for su	uste	e, k indi	key vidu	emplo	oyee	e, or highest c	ompensated	3		<b>√</b>
4	For any individual listed on line 1a, is the s the organization and related organizations	um of repo	ortabl	ес	omp	ens	sation						
5	individual	or accrue		oen:	satio	 on f	rom a	anv	unrelated org		4		<u> </u>
	services rendered to the organization? If "	es," comp	olete S	Sch	edu	le J	for s	uch	person	<u> </u>	5		✓_
	ction B. Independent Contractors					<u> </u>			<del></del>				
1	Complete this table for your five highest cocompensation from the organization.	mpensate	a ina	epe 	nae	nt c	ontra	ctor	s that received	more than \$10	JO,000	: ot 	
	(A) Name and business add	ress							(B) Description of se	ervices	(C Compe		
No	ne						]						
		<del></del>							<del> </del>				
2	Total number of independent contractors compensation from the organization ▶ 0		hose	in ·	1) w	ho	receiv	/ed	more than \$10	00,000 in			

Part	: VII	Statement of Rev	venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d	Federated campaigns Membership dues Fundraising events . Related organizations Government grants (contril All other contributions, gifts, g and similar amounts not include	butions). 1c 1d 1e 1rants,	1,035,366				
a di di	a	Noncash contributions include		622,395				
ರ್ಷ			· · · · · · · · · · · · · · · · · · ·	<u> </u>	1,035,366			
Program Service Revenue	2a b c			Business Code				
Program S	e f	All other program service						
	3	Income from investment of	f tax-exempt bond	🕨	8,612			8,612
	b	Gross Rents	(i) Real	(ii) Personal				
	l	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	С	Less cost or other basis and sales expenses . Gain or (loss) .						
_	I	Net gain or (loss)		<u>►</u>				<del></del>
r Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18	d on line 1c).			:		
Other		Less: direct expenses Net income or (loss) fro		vents •		·	· · · · · · · · · · · · · · · · · · ·	<b>-</b>
J		Gross income from gami See Part IV, line 19	ing activities.	vents				
		Less: direct expenses.  Net income or (loss) fro	bl	ities ►				
	b	Gross sales of invereturns and allowances Less: cost of goods sol Net income or (loss) from	a	ory ▶				
		Miscellaneous Reve		Business Code				
		All other revenue						
	1	Total. Add lines 11a-11 Total Revenue. Add lin			-			1
		9c, 10c, and 11e		<del>•</del>	1,043,978	0	0	8,612

#### Part IX Statement of Functional Expenses

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

	Section 501(c)(3) and 50 All other organizations must complete colu				C), and (D).
	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	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	664,672	664,672		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	41,750	20,875	15,875	5,000
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	0	o	0	0
7	persons described in section 4958(c)(3)(B) Other salaries and wages	113,718	87,585	11,133	15,000
-	Pension plan contributions (include section 401(k)				
8	and section 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	13,501	10,375	1,982	1,144
10	Payroll taxes	11,850	8,267	2,053	1,530
11	Fees for services (non-employees):	· · · · · · · · · · · · · · · · · · ·			
	Management	0	0	0	0
	Legal	0	0	0	0
	Accounting	1,375	0	1,375	0
	Lobbying	0	0	0	0
	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	51,725	45,913	3,012	2,800
14	Information technology	4,911	4,322	589	0
15	Royalties	0	0	0	0
16	Occupancy	32,289	30,030	2,259	0
17	Travel	0	0	0	. 0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	. 0
20	Interest	. 0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization.	37,256	34,781	2,475	0
23	Insurance	17,402	16,532	870	0
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	Contract Services	6,068	6,068	0	0
b	Employment Advertising	120	0	120	0
C	Volunteer Development	2,614	2,353	261	0
d	Internet/Web Service	1,307	1,307	0	0
е					
f	All other expenses	2,649	2,601	48	0
25_	Total functional expenses. Add lines 1 through 24f	1,003,207	935,681	42,052	25,474
26	Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				· · · · · · · · · · · · · · · · · · ·

Pa	ırt X	Balance Sheet					
			(A) Beginning of year			(B) of year	r
	1	Cash—non-interest-bearing	274,809	1		22	8,206
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net	<u> </u>	3			
	4	Accounts receivable, net		4			3,680
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6			
ts	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
Ä	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost basis 10a 1,404,530					
	b	Less: accumulated depreciation. Complete Part VI of Schedule D 103,510	1,274,325	10c		1,30	1,020
	11	Investments—publicly traded securities		11			
	12	Investments—other securities. See Part IV, line 11		12			
	13	Investments—program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets, See Part IV, line 11	685,902	15		74	4,275
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,235,036	16		2,27	7,181
	17	Accounts payable and accrued expenses		17			1,375
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
ties	21	Escrow account liability. Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key					!
Ë		employees, highest compensated employees, and disqualified					
		persons. Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		24			
	24 25	Unsecured notes and loans payable		25	<del></del>		
	26	Total liabilities. Add lines 17 through 25	0				1,375
es		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.					1,010
alances	27	· · · · · · · · · · · · · · · · · · ·	1,448,603	27		1 53	1,531
	28	Unrestricted net assets	50,531			-1,00	0
g B	29	Permanently restricted net assets	735,902	29	-	744	4,275
or Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.	•		-		ا
S	30	Capital stock or trust principal, or current funds		30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
As	32	Retained earnings, endowment, accumulated income, or other funds		32			
let	33	Total net assets or fund balances	2,235,036	33		2,275	5,806
_	34	Total liabilities and net assets/fund balances	2,235,036	34			7,181
Pa	rt XI	Financial Statements and Reporting					
						Yes	No
1	Acco	punting method used to prepare the Form 990:   Cash  Accrual	☐ Other				
2a	Were	e the organization's financial statements compiled or reviewed by an inde	ependent accountant	?	2a	<u> </u>	<b>✓</b>
b	Were	e the organization's financial statements audited by an independent acco	untant?		2b	✓	<u> </u>
C		es" to lines 2a or 2b, does the organization have a committee that assumes a	•	_			
		audit, review, or compilation of its financial statements and selection of an inc			2c	<b>✓</b>	
3a		result of a federal award, was the organization required to undergo an a					
L		Single Audit Act and OMB Circular A-133?			3a		<b>✓</b>
0	11 1	es," did the organization undergo the required audit or audits?			3b		L

#### SCHEDULE A (Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Nam	ame of the organization Employer identification number												
Hui	nan	itarianServic							36		3187979		
Pa	<u>rt I</u>	Reason	for Public Ch	narity Status (All or	ganizati	ons mus	t compl	ete this	<u>part.) (s</u>	e inst <u>ru</u>	ctions)		
The 1 2		A church, co A school de	onvention of chu scribed in <b>sectio</b>	dation because it is: rches, or association on 170(b)(1)(A)(ii). (At	of churc	hes desc edule E.)	ribed in s	section 1	70(b)(1)(	•••			
3 4		A medical re	esearch organiza	nospital service organition operated in conj ate:	junction v	with a ho	spital de	scribed II	section	170(b)(1			
5			tion operated for (b)(1)(A)(iv). (Co	the benefit of a colle the colle	ge or uni	iversity ov	wned or o	operated	by a gov	ernmenta	I unit described in		
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d in <b>sect</b>	ion 170(t	)(1)(A)(v	).			
7				/ receives a substantia (1)(A)(vi). (Complete F		its suppo	ort from a	governm	ental uni	t or from	the general public		
8 9		An organization receipts from support from	tion that normally n activities relate n gross investm	d in section 170(b)(1) receives: (1) more the ed to its exempt function ent income and unre a after June 30, 1975.	an 33⅓ % tions—su lated bu	6 of its su ubject to d siness ta	pport from certain ex xable inc	ceptions ome (les	, and (2) s sectior	no more	than 331/3 % of its		
10 11		An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
е		persons other	this box, I cert	of that the organization managers and other	tion is no		led direc	tly or inc	lirectly b	y one or			
f g		organization	, check this box at 17, 2006, has	a written determinati the organization acce							III supporting		
				r indirectly controls, enting body of the supp				h person	s descril	oed in (ii) 	Yes No		
h		(iii) A 35% c	controlled entity	rson described in (i) a of a person described ation about the organ	in (i) or	(ii) above					11g(ii) 11g(iii)		
		e of supported janization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the in col. (i) li	organization sted in your document?	(v) Did y the organ col (i)	ou notify nization in of your port?	organızat (i) organı	s the ion in col zed in the S?	(vii) Amount of support		
				· <u></u>	Yes	· No	Yes	No	Yes	No	<del></del>		
		<del></del>								-	<del></del>		
		<del></del>											
						;							
							1						
Tota	ıi												

Sche	dule A (Form 990 or 990-EZ) 2008							Page 2
Pa	Support Schedule for Org (Complete only if you chec	janizations I ked the box	Described in on line 5. 7.	Sections 17	O(b)(1)(A)(iv)	and	170(b)(	1)(A)(vi)
Sec	tion A. Public Support				·/			<del></del>
Ca	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4 5 6	Total. Add lines 1-3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).  Public support. Subtract line 5 from line 4.							
	tion B. Total Support	<u> </u>	<del></del>		L			<u> </u>
	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business 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.)							
11	Total support. Add lines 7 through 10 .	L	L	L		ļ		l
12	Gross receipts from related activities, etc	•	•			_12		
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>					
Sec	tion C. Computation of Public Su			<del> </del>				
14	Public support percentage for 2008 (line	,		1, column (f))		14		
15 16a	Public support percentage from 2007 Sci 33% % support test—2008. If the organi and stop here. The organization qualifies	zation did not e	check the box o			15 % or n	nore, che	ck this box
b	33% % support test – 2007. If the organization quality and stop here. The organization quality							, check this ▶ □
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circum	acts-and-circur	nstances" test,	check this box	and stop here	. Expla	un in Part	IV how the
b 10	10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumstances the "facts-and-circumstances" being the organization did	acts-and-circum inces" test The	nstances" test, o organization qua	check this box a alifies as a public	and <b>stop here.</b> bly supported or	Explai ganiza	n in Part tion	IV how the ▶ □
18	Private foundation. If the organization did	HOT CHECK a bo	ox on line 13, 16	a, 100, 1/a, 07 1	7 D, CHECK THIS	DOX ar	iu see ins	tructions 🟲 📙

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support							·
	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(a) 2006	(4) 2007	(0)	2000	(6 Total
0.	siendar year (or riscaryear beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	397,071	570,498	439,627	1,128,354	1,0	35,366	3,570,916
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					_		
5	The value of services or facilities furnished by a governmental unit to the organization without charge	397,071	570,498	420 627	4 429 254	4.0	25 266	2 570 040
6	Total. Add lines 1-5	397,071	570,496	439,627	1,128,354	1,0	35,366	3,570,916
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .							
b	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							
С	Add lines 7a and 7b	0	0	0	0		0	0
8	Public support (Subtract line 7c from line 6)				_	<del></del>		3,570,916
Sec	tion B. Total Support						-	
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
9	Amounts from line 6	397,071	570,498	439,627	1,128,354	1,0	35,366	3,570,916
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	4,655	11,079	14,123	10,240		8.612	48,709
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						-,	,
С	Add lines 10a and 10b	4,655	11,079	14,123	10,240		8,612	48,709
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 assets (Explain in Part IV.)							·
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)							3,619,625
14	First five years. If the Form 990 is for to organization, check this box and stop I			d, third, fourth	-			n 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su	pport Percer	ntage					
15	Public support percentage for 2008 (lin	e 8, column (f)	divided by line	e 13, column (	f))	15_		98.65 %
16	Public support percentage from 2007 S	Schedule A, Pa	rt IV-A, line 27			16		100.00 %
Sec	tion D. Computation of Investmen							
17	Investment income percentage for 2008	3 (line 10c, col	umn (f) divided	by line 13, co	lumn (f)) .	17		1.35 %
18	Investment income percentage from 20	•	• • •	•	[	18		0 %
19a	331/3 % support tests - 2008. If the orga				nd line 15 is m	ore th	an 33⅓ %	6, and line
b	17 is not more than 33% %, check this be 33% % support tests—2007. If the organic	ox and <mark>stop he</mark> ization did not d	re. The organiz	ation qualifies	as a publicly s	upport	ted orgaire than 3	nization ► 🗹 3%%. and
20	line 18 is not more than 331/3 %, check this <b>Private foundation</b> . If the organization of							

# SCHEDULE D (Form 990)

#### **Supplemental Financial Statements**

OMB No 1545-0047

2008

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Department of the Treasury Internal Revenue Service ▶ 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.

	or are organization.		Linpicy Crite	ondiobaon namber
	naniatrian Service Project		36	3187979
Pai	Organizations Maintaining Do the organization answered "Yes	nor Advised Funds or Other Similar " to Form 990, Part IV, line 6.	Funds or Acc	ounts. Complete if
		(a) Donor advised funds	(b) Funds a	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			
_		donor advisors in writing that the appare h	-old in donor od	uland
5	funds are the organization's property, sub-	donor advisors in writing that the assets heet to the organization's exclusive legal co	ontrol?	🗌 Yes 🗌 No
6	used only for charitable purposes and not	onors, and donor advisors in writing that g for the benefit of the donor or donor advis	sor or other	
Do	impermissible private benefit?  t II Conservation Easements. Com	plete if the organization answered "Yes"	to Form 000 F	Yes No
Pal				art IV, line 7.
1	_ ' ' '	by the organization (check all that apply).		
	Preservation of land for public use (e.g			ly important land area
	Protection of natural habitat	☐ Preservation	on of certified hi	storic structure
	☐ Preservation of open space			
2		d a qualified conservation contribution in the	e form of a conse	rvation easement
	on the last day of the tax year.		<del></del>	
			<del></del>	leld at the End of the Year
а	Total number of conservation easements .			
b	Total acreage restricted by conservation e	asements		
C	Number of conservation easements on a conservation	certified historic structure included in (a) .		<del></del>
d	Number of conservation easements includ	ed in (c) acquired after 8/17/06	2d	<del> </del>
3	Number of conservation easements modifithe taxable year ▶	ed, transferred, released, extinguished, or	terminated by the	ne organization during
4	Number of states where property subject	to conservation easement is located >		
5		y regarding the periodic monitoring, inspec	ction, violations,	
6		oring, inspecting, and enforcing easements		·
7		g, inspecting, and enforcing easements du		
8		d on line 2(d) above satisfy the requiremen	nts of section	Yes No
9		reports conservation easements in its reve		
3		he text of the footnote to the organization'		
Par		ections of Art, Historical Treasures, or		Assets.
	Complete if the organization answ	wered "Yes" to Form 990, Part IV, line 8.		
1a	art, historical treasures, or other similar asse	nder SFAS 116, not to report in its revenue ets held for public exhibition, education, or rate to its financial statements that describes	research in furthe	
b	historical treasures, or other similar assets provide the following amounts relating to t		search in furthe	rance of public service,
	(ii) Assets included in Form 990, Part X.	/III, line 1		\$ \$
2	If the organization received or held works following amounts required to be reported	of art, historical treasures, or other similar under SFAS 116 relating to these items:	ar assets for fina	uncial gain, provide the
а		line 1		\$
				\$

School	dule D (Form 990) 2008					n 2
	t III Organizations Maintaini	na Collections	of Art. Historic	al Treasures. or	Other Similar As	Page 2
3	Using the organization's accession items (check all that apply):					
a b c	Public exhibition Scholarly research Preservation for future generat	ions	d ☐ e ☐	Loan or exchange Other	programs	
4	Provide a description of the organiz Part XIV.		s and explain ho	w they further the	organization's exe	mpt purpose in
5	During the year, did the organization s assets to be sold to raise funds rather	r than to be maint	ained as part of t	he organization's co	ollection?	Yes No
Pa	Trust, Escrow and Custo Part IV, line 9, or reported				swered "Yes" to	Form 990,
1a b	Is the organization an agent, trusted included on Form 990, Part X?				or other assets not	Yes 🗌 No
D	b If "Yes," explain the arrangement in Part XIV and complete the following table:  Amount					
c	Beginning balance			1	С	
	Additions during the year				d	
е	Distributions during the year				е	
f	Ending balance				f	
2a b	Did the organization include an amount "Yes," explain the arrangement in	Part XIV.				Yes No
Pai	t V Endowment Funds. Co	mplete if organi	zation answere	ed "Yes" to Form	990, Part IV, line	e 10.
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	735,902				
b	Contributions	0				
С	Investment earnings or losses .	8.373			<u> </u>	
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f g	Administrative expenses End of year balance	744,275				
2	Provide the estimated percentage of					
а	Board designated or quasi-endowm		%			
ь	Permanent endowment ► 100					
C	Term endowment ▶0 %	)				
3a	Are there endowment funds not in the organization by:	e possession of th	ne organization tl	nat are held and ad	ministered for the	Yes No
	(i) unrelated organizations					3 <u>a(i)</u> √

4	(ii) related organizations If "Yes" to 3a(ii), are the related organizations Describe in Part XIV the intended uses of the VI Investments—Land, Building	tions listed as require tf the organization's e	d on Schedule R?		3a(ii) ✓ 3b
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
	Land		350,000 947,475	60,870	350,000 886,605
d	Leasehold improvements		107,055	42,640	64,415
	II. Add lines 1a-1e. (Column (d) should equal	Form 990, Part X, colur	nn (B), line 10(c).) .		1,301,020

Part VII Investments—Other Securitie	s. See Form 990, Part X	, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market va	ılue
Financial derivatives and other financial products			
Closely-held equity interests			
Other			<del></del>
	<del> </del>		
	•		
	- <del> </del>	-	
***************************************			
******			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12)			
Part VIII Investments—Program Relate	ed. See Form 990, Part X	, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market va	alue
	· ·		
			<del></del>
			<del></del>
<del></del>	<del>                                     </del>		· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13 ) ▶	<u></u>	<u> </u>	- <del></del>
Part IX Other Assets. See Form 990, Pa	art X, line 15.		
	(a) Description		(b) Book value
	<del></del>		
	*		
		··	
<del></del>			
Total. (Column (b) should equal Form 990, Part X, co		<u> </u>	<del> </del>
Part X Other Liabilities. See Form 990,	Part X, line 25.		
(a) Description of liability	(b) Amount		
Federal income taxes	L		
		7	
		7	
		<del>-</del>	
	<del> </del>	<del></del>	
	<del> </del>		
		-	
			1
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 uncertain tax positions under FIN 48.	organization's financial stat	ements that reports the organization's	liability for

Part	, ele D (Form 990) 2008		Page 4
	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,043,978
	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,003,207
	Excess or (deficit) for the year. Subtract line 2 from line 1	3	40,771
	Net unrealized gains (losses) on investments	4	
	Donated services and use of facilities	5	
6 I	Investment expenses	6	
	Prior period adjustments	7	<del></del>
	Other (Describe in Part XIV)	8	
9 7	Total adjustments (net). Add lines 4-8	9	0
	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	40,771
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenu	7	
	Total revenue, gains, and other support per audited financial statements	1	1,153,848
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
	Net unrealized gains on investments	_	
	Donated services and use of facilities	<u> </u>	
	Recoveries of pnor year grants	-	
		2e	109,870
	Add lines 2a through 2d	3	103,070
-	Subtract line <b>2e</b> from line <b>1</b>		
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	1 1	
	Other (Describe in Part XIV)	┦ [	
	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	1,043,978
	XIII Reconciliation of Expenses per Audited Financial Statements With Expense	ses pe	
1	Total expenses and losses per audited financial statements	1	1,113,077
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Donated services and use of facilities	<u>o</u> ]	
<b>b</b> 1	Prior year adjustments ,	_	
c i	Losses reported on Form 990, Part IX, line 25	_	
d (	Other (Describe in Part XIV)		
е /	Add lines 2a through 2d	-	109,870
	Subtract line <b>2e</b> from line <b>1</b>	3	1,003,207
_			
4			
4 / a l	Investment expenses not included on Form 990, Part VIII, line 7b	-1 1	
4 / a l b (	Other (Describe in Part XIV)	-	
4 / a l b (	mroothork oxportoso het motocod en return ose, rain trin, into r	4c 5	1,003,207
	Add lines 2a through 2d	2e 3	109,8 1,003,2

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.Attach to Form 990.

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(h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use **Employer Identification number** 3187979 ∑ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance 36 . (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance . . . (d) Amount of cash grant • Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance (b) EIN Enter total number of other organizations 1 (a) Name and address of organization or government Humanitarian Service Project Name of the organization Part II

Schedule I (Form 990) 2008

Cat. No. 50055P

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

Schedule I (Form 990) 2008

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Food for the Needy	2,694		172,678	172,678 Cost or FMV	Fresh fruit & vegetables, frozen
					meat & non-perishables.
Goods for the needy	3,244		480,579	480,579 Cost or FMV	Books, toys, games, personal care
					items, clothes, etc.
Delivery of food & goods			11,415	Cost of Vehicles & UPS	11,415 Cost of Vehicles & UPS Delivery of goods & food for
					distribution and end recipients.
Part IV Supplemental Information. Complete this par	te this part to pre	ovide the informati	on required in Part	I, line 2, and any other	t to provide the information required in Part I, line 2, and any other additional information.

Part 1, Line 1: Record cost of Items purchased at actual for each program and record FMV of food & goods donated in-kind for each program.

Schedule I (Form 990) 2008

## SCHEDULE O (Form 990)

#### Supplemental Information to Form 990

nizations to provide questions for the Open to P

Department of the Treasury Internal Revenue Service Name of the organization ▶ 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.

Open to Public Inspection

Employer identification number

OMB No 1545-0047

Humanitarian Service Pro	oject				36	3187979
Form 990, Part III, 4d: Fe	ed the Kids:	A summer time	delivery of	food for families wh	ose children rec	eive subsidized meals
during the school year.	Expenses:	\$46,618	Revenue:	\$43,534		
***************************************	~					
						***************************************
**						
			***************************************			
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					•	·····
						<b></b>
					•••••	