

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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| Short Form | OMB No. 1545-1150 | | | | |
| Return of Organization Exempt From Income Tax | 2008 | | | | |
| (Assembly black have benefit trust or reducts foundation) | | | | | |
| Sponsoring 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 Department of the Treasury assets less than \$2,500,000 at the end of the year may use this form. | Open to Public | | | | |
| Department of the Treasury asserts less then \$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 regulariements. | Inspection | | | | |
| A For the 2008 colored was an true was beginning in the colored | 30 ,2009 | | | | |
| R. Charles a seedle date | aplayer identification number | | | | |
| Address change use This UNICATES OF COLD IN ALL 9740 | 5146078 | | | | |
| print or Number and street for P.O. box, if mail is not delivered to street address. Recombate F. Tel | ephone number | | | | |
| Termination See 3301 ACTIN HWY (8 | 17) 573-5669 | | | | |
| Amended return Specific City or town, state or country, and ZIP + 4 F Gri | oup Exemption Q i Q Q | | | | |
| | mber . • 0100 | | | | |
| Section 501(c)(3) organizations and 4947(e)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 890 or 890-EZ). | | | | | |
| Valid (speci | ···· | | | | |
| | if the organization is not estach Schedule B (Form 990, | | | | |
| J Organization type (check only one) - ≥ 501(c) (8) 4 (insert no) 4947(a)(1) or 527 990-EZ, or 9 | • • • • | | | | |
| K. Check ▶□ if the organization is not a section 509(a)(3) supporting organization and its cross receipts are normally n | ot more than \$25,000. A return is | | | | |
| not required, but if the organization chooses to file a return, be sure to file a complete return. | | | | | |
| L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-E | | | | | |
| Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instru | | | | | |
| 1 Contributions, gifts, grants, and similar amounts received | 1 42, 248, 41 | | | | |
| Program service revenue including government fees and contracts | 3 653 7 00 | | | | |
| 3 Membership dues and assessments 4 Investment income | 4 4.45 | | | | |
| 5a Gross amount from sale of assets other than inventory \\ \frac{1}{5a} \right\righ | . | | | | |
| b Less: cost or other basis and sales expenses 5b | | | | | |
| C Gain or floss) from sale of assets other than inventory (Subtract line 5h from line 5a) (ettach schedule) | 5c | | | | |
| 6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here | | | | | |
| a Gross revenue (not including \$ of contributions | 1 | | | | |
| | | | | | |
| b Less: direct expenses other than fundraising expenses | | | | | |
| | . 6c | | | | |
| 7a Gross sales of invento IRS RECVD 07/06/2010 7a 7b Less: cost of goods si | - | | | | |
| c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7c | | | | |
| 8 Other revenue (describe ▶ | , 8 | | | | |
| 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 | 9 48, 839.86 | | | | |
| 10 Grants and similar amounts paid (attach schedule) | . 10 25, 067,31 | | | | |
| 11 Benefits paid to or for members | 11 3,575.55 | | | | |
| 12 Salaries, other compensation, and employee benefits | 12 1, 256.00 | | | | |
| 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance | 14 | | | | |
| 15 Printing, publications, postage, and shipping | 15 1, 233, 77 | | | | |
| 16 Other expenses (describe > Cust of Fund Ruijers | 16 19,479.04 | | | | |
| 17 Total expenses. Add lines 10 through 16 | 17 50 611.67 | | | | |
| 18 Excess or (deficit) for the year (Subtract line 17 from line 9) | 18 (1,771,817 | | | | |
| 18 Excess or (deficit) for the year (Subtract line 17 from line 9) | h 17 22 20 | | | | |
| end-of-year figure reported on prior year's return) | 19 10,027.08 | | | | |
| 20 Other changes in net assets or fund balances (attach explanation) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 | 20 8. 255, 27 | | | | |
| Part II) Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 | | | | | |
| (See the instructions for Part II.) (A) Beginning of year (B) End of year | | | | | |
| 22 Cash, savings, and investments | | | | | |
| 23 Land and buildings | 23 | | | | |
| 24 Other assets (describe ▶) | 24 | | | | |
| 25 Total assets | 25 | | | | |
| 26 Total liabilities (describe ► | 26 7755 719 . | | | | |
| | 1.08 27 9 255.27 Form 990-EZ (2008) | | | | |
| For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990. Cat. No. 10642 | | | | | |

| Part III Statement of Program Service Acco |] | Expenses | | | |
|---|---|--|--|---------|----------------------------|
| What is the organization's primary exempt purpose? | (Rec | (Required for 501(c)(3) | | | |
| Describe what was achieved in carrying out the organ | and (4) organizations and 4947(a)(1) trusts: | | | | |
| describe the services provided, the number of persons | benefited, or other relevant info | ormation for each p | rogram title. | Opti | onal for others.) |
| 28 CHI-FL | | | | Ì | ì |
| | | | | ł | <u>}</u> |
| (Grants \$) If this amount in | | | | | 13,130,53 |
| C | ncludes foreign grants, check | here | , ▶ □ | 28a | 13,130,53 |
| 29 | | | • | { | |
| * | • | | • |) | |
| (Grants \$) If this amount in | icludes foreign grants, check | horo | ▶ □ | 29a | 9,029.52 |
| 20 40471 | ierocos rereigir grants, criech | | | 236 | |
| | ********************** | | | | Į |
| *************************************** | | ••••••• | ************ | | |
| (Grants \$) If this amount in | icludes foreign grants, check | here | ▶ □ | 30a | 2,907.26 |
| 31 Other program services (attach schedule) | | | | | |
| (Grants \$) If this amount in | cludes foreign grants, check | here | . ▶ □ | 31a | |
| 32 Total program service expenses (add lines 28a | through 31a) | <u> </u> | <u> ▶</u> | 32 | 25,067.31 |
| Part IV List of Officers, Directors, Trustees, and Ko | | | | | |
| (a) Name and address | (b) Title and average hours per week | (c) Compensation (if not paid, | (d) Contribution employee benefit | plans & | (e) Expense account and |
| TERRY AUSTIN TO | devoted to position | enter -0-1 | defarred comper | nsation | other allowances |
| TERRY BUSTIN TR FOBOX 1999 GROPBURY TX 76049 | GRAND KNIGH 2 HRSINK | -0- | -0 | _ | -11- |
| JOHN QUILTY | DEPUTI GRAND | | -0 | | |
| 2313 VIENNA OR CRAVEURY TX | KNIGHT DHRSWK | 1-0- | -0- | - | 20- |
| THOMAS LYSSY | - I ITAINA | | · | | |
| 2122 LOWG CRAPK LT GRANBURY T | ·· • • • • • • • • • | -0- | -0- | - | -0- |
| JOE SMALLS | FINANCIAL SIEC, | 00 | | | |
| 6706 COLONIAL DR GRANSLAY | TR SHRS/WK | 600 -0 | | | 1-0- |
| RICHARD KROWNSDY | | | - 4 | | - 2 |
| 425 PR 723 BLUPP DALR TX | RECORDER) 11A | Vx-0- | -0- | | |
| ROLDR NIMON | TRUSTER | K -11- | -0- | | -11- |
| 9007 GREW LAGIES DR GREWBURY | TR 1 NOSTER | 0 | | | |
| LARRY SCANDORA | TRUSTER | 1-0- | 1-0- | - | -0- |
| 1404 RAYBUS WOOD GRANDURY TX | IHRINK | <u> </u> | | | |
| 8181 GRORN HINDS OR CRANDA, T | | 10- | -0- | - | -0- |
| THE BRANCE PLANTS ON CHANGE | | | | | |
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Form 990-EZ (2008)

Page 2

| Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed coscoption of each activity 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 If 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 If the organization have unrelated business activities, such as those reported on fines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaning your reason for not reporting the recome on Form 990-T. Did the organization flow unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and provy tax requirements? 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 Enter amount of political expenditures, direct or indirect, as described in the instructions. If "Yes," complete Schedule In Part II and enter the total amount involved Did the organization flee Form 1120-POL for this year? If "Yes," complete Schedule In Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: In intiation fees and capital contributions included on line 9 Gross recipts, included on line 9, for public use of club facilities Gross recipts, included on line 9, for public use of club facilities Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year ordid it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule In Part II have a recipient and the section 4912 by section 501(c)(3) and (4) organizations. Did the organization managers or disqualified persons during the year ordid it becomes a section 4912 by section 501(c)(3) and (4) organizations and fine | Par | Other Information (Note the statement requirements in the instructions for Part VI.) | | | |
|--|-----|--|------------|------------|---------------|
| description of each activity 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 If the organization had income from business activides, such as those reported on fines 2, Sa, and 7a (among others), but not reported on form 990-T, attach a statement explaining your reason for not reporting the moone 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? 359 369 370 371 372 373 374 375 376 377 378 379 379 370 370 370 370 370 370 | | | | Yes | No |
| 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 34 stach a conformed copy of the changes 5 If the organization had income from business activities, such as those reported on fines 2, 8a, and 7a (among others), but not reported on Form 990-T, and proxy tax requirements? 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 if litied a tax return on Form 990-T for this year? 6 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] 5 Did the organization file Form 1120-POL for this year? 8 Old the organization file Form 1120-POL for this year? 8 Old the organization file Form 1120-POL for this year? 9 Did the organization file Form 1120-POL for this year? 9 Did the organization file Form 1120-POL for this year? 9 Section 501(c)(f) organizations. Enter: 1 If "Yes," complete Schedule L, Part II and enter the total amount involved 38b organization file parts of the period covered by this return? 9 Section 501(c)(f) organizations. Enter: 1 Institution fees and capital contributions included on line 9 38a organization during the year under: 2 section 501(c)(f) and (4) organizations. Enter amount of tax imposed on the organization during the year under sections 4912, 4955, and 4958 9 Section 501(c)(f) and (4) organizations. Did the organization from a prior year? If "Yes," complete Schedule L, Part I complete Form 8955, and 4958 1 List the states with which a copy of pits return is filed. Part amount of tax in file 4 part and enter the name of the foreign country: Part Schedule Part All Part Part Part Part Part Part Part Part | 3 | description of each activity | 33 | | Y |
| not reported on Form 990-T, attach a statement explaning your reason for not reporting the moome on Form 990-T. Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy lax requirements? 355 b if "Yes," has it filed a tax return on Form 990-T for this year? 6 Was there a fluquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N 78 Enter amount of political expenditures, direct or indirect, as described in the instructions, ▶ □ 378 80 Did the organization borrow from, or make any loans to, any officer, director, frustee, 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? 10 If "Yes," complete Schedule L, Part II and enter the total amount involved 389 11 "Yes," complete Schedule L, Part II and enter the total amount involved 389 12 Section 501(c)(7) organizations. Enter: 13 Initiation fees and capital contributions included on kine 9 388 14 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 15 section 501(c)(3) 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 16 Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 17 Enter amount of tax on fine 40c reimbursed by the organization is party to a prohibited tax shelter transaction? If "Yes," complete Form 8865-T. 18 List the states with which a copy of this return is filed. F 29 The Dooks are in care of the foreign country: F 20 At any time during the calendar year, did the organization maintain an interest in or a signature or other authority over a financial account in a foreign country: F 20 Section 4947(a)(1) nonexempt chantable trust | 4 | Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," | 34 | | X |
| a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy lax requirements? b if "Yes," has it filed a tax return on Form 990-T for this year? 6 Was there a liquidation, dissolution, termination, or substantial contraction during the year? if "Yes," complete applicable parts of Schedule N 78 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 38 79 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37 80 Did the organization file Form 1120-POL for this year? 81 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? 82 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? 83 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? 84 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's 18 Did the organization during the year under section 4912 period on the 9 9 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4912 period of the organization engage in any section 4958 excess benefit transaction during the year under: section 4912, 4955, and 4958 10 Enter amount of tax mposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 11 List the states with which a copy of this return is filed, ▶ 12 | 5 | If the organization had income from business activities, such as those reported on fines 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. | | | |
| 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 To Enter amount of potitical expenditures, direct or indirect, as described in the instructions. ► [37a] But 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? But it "Yes," complete Schedule L. Part II and enter the total amount involved [38b] Section 501(c)(7) organizations. Enter: Intitation fees and capital contributions included on kine 9 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► [39b] Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► [39b] Section 501(c)(3) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year under sections 4912 ► [39b] Section 501(c)(3) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year under sections 4912, 4955, and 4956. Center amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956. Center amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956. Center amount of tax on line 40c reimbursed by the organization All organizations. At any time during the tax year, was the organization Center amount of tax on line 40c reimbursed by the organization and party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. Located at ► 21.21. Located the organization and the party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. Telephone no. ► (21) The Party of the party of the party of the part | а | Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting. | 35a | | X |
| To Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 378 38 78 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 378 39 Did the organization life Form 1120-POL for this year? 30 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? 38 Section 501(c)(7) organizations. Enter: 38 In Yes.* complete Schedule L. Part II and enter the total amount involved 389 39 Section 501(c)(7) organizations. Enter: 39 Did Gross receipts, included on line 9, for public use of club facilities 399 39 Did Gross receipts, included on line 9, for public use of club facilities 399 30 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 30 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 31 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 32 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 33 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912. 4955, and 4958 33 Section 4911 Section 4915 Section 4916 Section 4915 Section 4915 Section 4916 Section 4915 Section 4916 | þ | | 35b | | |
| To Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 378 b Did the organization file Form 1120-PQL for this year? 8 b 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? 38b 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 9 Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under: section 501(c)(3) and (4) organizations. Did the organization engage in any section 4915 ▶ 5 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 5 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 5 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 6 Section 501(c)(3) and (4) organizations managers or disqualified persons during the year under sections 4912, 4955, and 4958 6 Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 6 Enter amount of tax on line 40c reimbursed by the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T. 1 List the states with which a copy of this return is filed. ▶ 2 The books are in gare of ▶ 3 Telephone no. ▶ (\$\frac{1}{2}\) 40e 1 Telephone no. ▶ (\$\frac{1}{2}\) 40e 1 Telephone no. ▶ (\$\frac{1}{2}\) 40e 41 Trees," enter the name of the foreign country: ▶ 5 Section 4947(a)(1) nonexempt chantable trusts filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 40e 41 Und the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ is any related organization a controlled entity of the organization within the meaning of secti | 6 | | 36 | | X |
| 88 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? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 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. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) organizations. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4955 ▶ 9 Section 501(c)(3) and (4) organization managers or disqualified persons during the year under: section 501(c)(3) and (4) organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 1 List the states with which a copy of this return is filled. ▶ 1 List the states with which a copy of this return is filled. ▶ 2 The books are in care of ▶ | | Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 378 | 37b | | سر |
| 9 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 39b 39a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶ D 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 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 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. ▶ (17) 1.2.3. Located at ▶ (2.1.1. 1.2.3. (Feet.) | 8a | 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? | 38a | | X |
| a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39b 39c | | | - | | |
| b Gross receipts, included on line 9, for public use of club facilities 239 238 239 239 240 250 250 251 252 253 253 254 255 | - | | | 1 | |
| Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 : section 4912 : section 4955 : section 4955 : b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 sexess 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 8865-T. List the states with which a copy of his return is filed. It is the states with which a copy of | | | 4 | } | |
| 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 8865-T. List the states with which a copy of this return is filed. ▶ Telephone no. ▶ (\$\frac{\text{Pi}}{2}\) \ \ \text{Pixity} \ \ \ \text{Pixity} \ \ \ \text{Pixity} \ \text{Pixity} \ \ \tex | | The state of the parties of the state of the | 4 | } { | |
| during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I 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. 2 The books are in pare of Located at 2.1.21 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 chantable 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 Yes Od the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If | | section 4911 ▶; section 4912 ▶; section 4955 ▶ | | | |
| 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. The books are in care of The books are in care of 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 linancial 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 chantable 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 4 Oid the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If | Þ | during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule | 40b | | ٧ |
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| List the states with which a copy of this return is filed. The books are in care of The books are i | | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter | 40e | | X |
| Telephone no. \(\bullet \) \(| | List the states with which a copy of this return is filed. ▶ | | | |
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| Form 990-EZ | _ | | _ | Tes | NO |
| 5 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If | 4 | · | 1 | } { | X |
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| Tes, Tem 330 most be completed instead of Politi 330-LZ | 5 | Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ | 45 | | يلا |

| orm 990-EZ (| (2008) | | | | | Page 4 |
|------------------|---|--|-----------------------|-----------------------------------|---|--|
| Part VI | Section 501(c)(3) organizations only. and complete the tables for lines 50 ar | All section 501(c)(3) and 51. | rganiza | tions mus | t answer question | ins 46-49 |
| 6 Did th | the organization engage in direct or indirect political campaign activities on behalf of or in opposition to indidates for public uffice? If "Yes," cumplete Schedule C. Part I | | | | | Yes No |
| 7 Did th | ne organization engage in lobbying activities? | If "Yes," complete Sche | dule C, | Part II . | | 47 |
| 8 Is the | organization operating a school as describe | d in section 170(b)(1)(A)(ii |)? | s," comple | te Schedule E . | 48 |
| | ne organization make any transfers to an exe | | d organi | zation? | | 49a |
| | s," was the related organization(s) a section | | | | | 496 |
| each | plete this table for the five highest compensate received more than \$100,000 of compensate | ited employees (other that on from the organization. | n officer If there | s, directors is none, er | s, trustees and key ster "None." | employees) who |
| (a) N | lame and address of each employee paid more than \$100,000 | (b) Title and average hours per week devoted to position | (c) Co | mpensation | (d) Contributions to employee benefit plans & deferred compensation | (e) Expense account and other allowances |
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| | | | | | | |
| otal numb | er of other employees paid over \$100,000 | | | | | |
| 1 Comp | plete this table for the five highest compensation from the organization. If there is no | ited independent contractione, enter "None." | ors who | each rece | ived more than \$1 | 00,000 of |
| | (a) Name and address of each independent contractor p | paid more than \$100,000 | | (b) Typ | e of service | (c) Compensation |
| | | | | | 1 | |
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| | | • | | | | |
| otal numi | per of other independent contractors each re | cerving over \$100 000 | - | | | |
| | Under penalties of penury, I declare that I have examinand belief, it is true, correct, and complete. Declarate | ned this return, including accom | panying so | chedules and a d on all inform | statements, and to the training of which prepare | est of my knowledge r has any knowledge |
| iign Iere | Signature of Officer | | | | 10-1- tate 6-30- | |
| | | LL STERRTARY | <u></u> | | | |
| aid reparer's | Preparer's signature | Date | | Check if self- employed > | | Number (See instructions) |
| se Only | Firm's name (or yours if self-employed), | | | | IN Þ | |
| | address, and ZIP + 4 | | | | hone no. 🕨 ! | |
| May the IF | S discuss this return with the preparer show | vn above? See instruction | <u>s</u> . | ·_ ·_ · - · - | <u></u> F | ☐ Yes ☐ No orm 990-EZ (2008) |