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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

address, and ZIP

May the IRS discuss this return with the preparer shown above? (see instructions)

benefit trust or private foundation)

▶ 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 JULY 1 2008, and ending JUNE 30 20 09 C Name of organization KNIGHTS OF COLUMBUS # 656 D Employer identification number Check if applicable Please use IRS Doing Business As 23 7089341 Address change label or print or Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Name change type P.O. BOX 2029 Initial return (765)450-8906 Specific City or town, state or country, and ZIP + 4 Termination nstruc-KOKOMO, IN 46904-2029 Amended return G Gross receipts \$ F Name and address of principal officer BRENT OAKS, GRAND KNIGHT Application pending H(a) Is this a group return for affiliates? Yes 1631 FOXFIRE LANE, KOKOMO, IN 46902 H(b) Are all affiliates included? Yes Tax-exempt status If "No," attach a list (see instructions) Website: ▶ H(c) Group exemption number Type of organization ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶ FRATERNAL L Year of formation 1902 M State of legal domicile IN Summary Briefly describe the organization's mission or most significant activities: FRATERNAL ORGANIZATION, PROVIDING MEMBERS WITH INSURANCE PRODUCTS, AND PROVIDING CONTRIBUTIONS TO VARIOUS EXEMPT Governance ORGANIZATIONS. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. Number of voting members of the governing body (Part VI, line 1a). . . 347 ಠ 4 0 Number of independent voting members of the governing body (Part VI, line 1b) 5 2 Total number of employees (Part V, line 2a). 6 Total number of volunteers (estimate if necessary) 15 7a Total gross unrelated business revenue from Part VIII, line 12, column (C). 7a b Net unrelated business taxable income from Eorm 990-T, line 34 7b RECEIVED **Prior Year** Current Year Contributions and grants (Part VIII, line 1) 75198. 113952. Program service revenue (Part VIII, line 29) MAY 2 0 9 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d 8e, 33679. 33662. 11 Total revenue—add lines 8 through 11 (must equal Rar VIII), column (A), line 12) 12 108877. 147654. 27580. 62294. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 21359. 20847 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **经企业的经济的** See age 3 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 64647. 58345. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 107284. 147788. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 1593. -134. 5 6 Beginning of Year End of Year 31200. 30771 Total assets (Part X, line 16) 1222. 927 21 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 29978. 29844 Part II Signature Block Under penalties of perjury, 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 Oa. 1 5 2010 Sign Signature of officer Here BRENT OAKS, GRAND KNIGHT Type or print name and title Date Check if Preparer's identifying number Preparer's B. Leebrer, CPA (see instructions) employed 🕨 🗹 Paid 14 2010 MAY 304-34-0314 Preparer's Firm's name (or yours JOHN B. LECHNER, CPA ▶ 35 : 1641582 FIN Use Only if self-employed) 1134 N. WABASH AVE., KOKOMO, IN 46901-2606 Phone no ► (765) 459-5253

Com.	ggn	(2008)	

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Par	Statement of Program Service Accomplis	shments (see instructions)		
1	Briefly describe the organization's mission:			
2	Did the organization undertake any significant progra the prior Form 990 or 990-EZ?		h were not listed on	☐ Yes ☑ No
_	If "Yes," describe these new services on Schedule C			
3	Did the organization cease conducting, or make sign services?			☐ Yes ☑ No
	If "Yes," describe these changes on Schedule O.			
4	Describe the exempt purpose achievements for each Section 501(c)(3) and 501(c)(4) organizations and sec allocations to others, the total expenses, and revenue	tion 4947(a)(1) trusts are required	d to report the amour	
4a	(Code incl	uding grants of \$) (Revenue \$)
				•••••
			• • • • • • • • • • • • • • • • • • • •	
			•••••	
4h	(Code:) (Expenses \$ inc	luding grants of \$) (Revenue \$)
	(Code) (Expenses C			
				
4¢	(Code:) (Expenses \$inc	luding grants of \$) (Revenue \$)
		·····		
				
				······
4d	Other program services. (Describe in Schedule O.)) (Davies	N.	
<u> </u>	(Expenses \$ including grants of \$) (Revenue \$ (Must equal Part IX, Line	25 column /P\\	
40	Total program service expenses ► \$	(IVIUSE GYUAI PAREIX, LINE :	20, COIGITIT (D).)	

Part 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		✓
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		
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		✓
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		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		/
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		√
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		V
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, 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		√
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		✓
ь	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		√
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		√
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 19		1
19 20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		1
21	Did the organization operate one of more hospitals? If Tes, Complete Schedule II. 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		1
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		√
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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		1
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

Form 990 (2008)
Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an 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	43 X 716 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		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓.
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		1
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		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1

Form **990** (2008)

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
		7	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			۶,
h	U.S. Information Returns. Enter -0- if not applicable	÷ , _ 1		;· ·
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	10		: A .
0-	gaming (gambling) winnings to prize winners?	1c	· 3600	. ५ जन
	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 2		· · ·	: :
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		\ \ \
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		
b	If "Yes," enter the name of the foreign country: ▶	1.3	·	i i
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		, , , , , , , , , , , , , , , , , , ,	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b		5b		✓
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	8 94.	.~.
7	Organizations that may receive deductible contributions under section 170(c).	14		7
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	الكويد المالية	√
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	1 H	,	9.
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	e	√
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	organization, have excess business holdings at any time during the year?	, 18, 2	102.2	E
а	Did the organization make any taxable distributions under section 4966?	9a		1
b		9b	. 77.81	√
10	Section 501(c)(7) organizations. Enter:		1	
а	Initiation fees and capital contributions included on Part VIII, line 12			
þ			1	100
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	¥	2 / 3	
	Cross modification monitoris of shareholders		₹	\$5.
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			is.
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year.	12a	1	27.F

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

Sec	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	(2)	1.27	
	circumstances, processes, or changes in Schedule O. See instructions.		,	134
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent	7		3,2
2	-Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	nii Europa		
	any other officer, director, trustee, or key employee?	2		1
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		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		1
6	Does the organization have members or stockholders?	6	1	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	1	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	- 1	(*, ;	1775
	the year by the following:	4	1	الإسال فأر
а	The governing body?	8a	1	-
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9a	· · · · · · · · · · · · · · · · · · ·	9a	•	1
ь	• • • • • • • • • • • • • • • • • • • •			_
	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		
Sec	tion B. Policies			
		г 	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	V	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			,
	describe in Schedule O how this is done	12c		√
13	Does the organization have a written whistleblower policy?	13		_
14	Does the organization have a written document retention and destruction policy?	14 3 - 167 E	. 24 20	×
15	Did the process for determining compensation of the following persons include a review and approval by	7, 3	اً يُسْمِهِ أَ	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	المستنا		3-1-3
а	The organization's CEO, Executive Director, or top management official?	15a		V
b	Other officers or key employees of the organization?	15b	1500	<u>.</u> ₹. 587
	Describe the process in Schedule O. (see instructions)	A COLOR	1 - 7 - 6	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		انتث	نبث
	with a taxable entity during the year?	16a	1 = 4° (a)	Howard .
þ		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 ° 4
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1	فستذا	1.7
	the organization's exempt status with respect to such arrangements?	16b		l
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶INDIANA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
-	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ► HARRY cHMIEL, 3121 CARTER ST., KOKOMO, IN 46901 PHONE # (765) 868-8369			

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	mpensate	any o	offic	er,	dire	ctor,	trus	itee, or key em	ployee.	
(A)	(B) (C)			_		(D)	(E)	(F)		
Name and Title	Average	Position (check all that apply)					Position (check all that apply)		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
HARRY CHMIEL	_									
FINANCIAL SECRETARY	5			1	1			2400.00	0	0
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Part VII Section A. Officers, Directors, Tru		Linp	ioye			u riigi	11631			
(A)	(B)	D	1-)) ((-	•			(D)	(E)	(F)
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation related organization (W-2/1099-M	on amount of other compensation
		 	<u> </u>		-		\vdash			
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1b Total	<u></u>	<u> </u>	<u></u>	<u>. </u>	<u></u>	·	<u> </u>	2400.		
 Total number of individuals (including thos organization ► 0 									····	Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete S	chedule J	for su	ıch	ind	ivid	ual				3 /
4 For any individual listed on line 1a, is the state organization and related organizations individual	sum of rep greater tha	ortab an \$1 	le c 50,0	om) 0001	oen: ? <i>If "</i> 	satior 'Yes,'	n and " <i>col</i> 	d other compe mplete Schedu	ensation from tile J for suc 	h 4 1
5 Did any person listed on line 1a receive services rendered to the organization? If "										
Section B. Independent Contractors										
 Complete this table for your five highest compensation from the organization. 	ompensate	ed inc	lepe	ende	ent	contra	acto	rs that receive	d more tha	n \$100,000 of
(A) Name and business add	dress							(B) Description of s	services	(C) Compensation
							+			<u> </u>
							L			
							+-			
2 Total number of independent contractors compensation from the organization ▶ 0	(including	those	in	1) \	vho	rece	ived	more than \$1	00,000 in	CARTON CONTRACTOR

Part	VIII.	Statement of Re	venue	Right State	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
rributions, gifts, grants other similar amounts	1a	Federated campaigns	1a		7,1		\$ (n. n	,
E 2	b	Membership dues	1b	11592.	1,00		2. 多等等。对	The state of the s
ag ts	С	Fundraising events .	1c					
اقع	d	Related organizations	1d				و المسلم	
S.E	е	Government grants (contri	ibutions). 1e	·····				
윤님	f	All other contributions, gifts, g	grants,				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Contributions, gifts, and other similar an		and similar amounts not inclu-	ded above 1f	102400				
and Cont	8	Noncash contributions include	ed in lines 1a-1f: \$		13 1			
ठ ह	h	Total. Add lines 1a-1f	<u> </u>	<u> ▶</u>	113992.	$\frac{1}{2}$		
e l				Business Code				-1.L BRIGH
Program Service Revenue	2a							
ě	b							
8	2							
3	ی	•••••					- 1	
ري ا	a			···	 	·		L
眶	e	All other program service						
<u> </u>	-				 			11
-	_ 9	Total. Add lines 2a-2f	· · · · · · · · · · · · · · · · · · ·	<u> ▶</u>			ere e se se	7 345
	3 4 5	Investment income (inc other similar amounts) Income from investment of Royalties		d proceeds ►	. 200	The second of th		\$\$4
	_		13933.	(ii) i disorial		10 and 10		
		Gross Rents			The second second		1. 1元代	1736年15月1日
		Less: rental expenses	3639.	<u> </u>	李强、杨华、			
		Rental income or (loss)	10294.	<u> </u>	13 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	1.3		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	d	Net rental income or (ic	<u> ▶</u>	10294.	10294.			
	7a	Gross amount from sales of	(i) Securities	(ii) Other	ELESTICATION OF		不是是从心态的	
i		assets other than inventory				المرقوع والمراقع		3
	b	Less: cost or other basis			· F			[1997年·2008]
	-	and sales expenses .		<u> </u>				
	c	Gain or (loss)						
	ď	Net gain or (loss)		🕨				
	0-		£ dual-t-t		" " L - " L	Car Lands	1- 400 1 4 19 4	52.
Ž	8a	Gross income from	fundraising		. Ly 135 4	"Q" and		
9		events (not including \$						
8		of contributions reported See Part IV, line 18	· ·		व को उ	5	The same of the sa	State State
ē			····a		1994 5 63			
Other Reve		Less: direct expenses	b		mile Thirt		استنقلت أنسته مستن	are market
١ ٠	C	Net income or (loss) fro	om lundraising e	events	100000000000000000000000000000000000000	1 m to 2 5 27 5 15 15 years to	1.004.00 TO 18.A	The state of the s
	9a	Gross income from gam				The state of the s	等表表 10%	
		See Part IV, line 19					ينزوميون وي در د المسلود و المراد و و المراد و	- 196 St. 35 St. 35
		Less: direct expenses.			JANES LINE	1-12 (A) 1-1		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	С	Net income or (loss) fro	om gaming activ	/ities ▶	4347.	4347		
	10a	Gross sales of inve	entory. Jess	}	1975 153		神学 智慧 資	
		returns and allowances		49290.		- 人名西德马		
	b	Less: cost of goods so		30294.	S. T. S.			
		Net income or (loss) from		ory >	18996.	18996		
		Miscellaneous Reve		Business Code			17 19 1 19 1 19 1 19 1 19 1 19 1 19 1 1	The state of the s
	110	SALES TAX COLL. AL	LLOW.	 	25.	25	- 12 Table Park Table 175	مُعْمَالُونَا الْمُحَالِّدُ الْمُعْمَالُونَا الْمُعْمَالُونَا الْمُحَالِّدُ الْمُعْمَالُونَا الْمُعْمَالُونِ
	11a		• • • • • • • • • • • • • • • • • • • •					
	þ					 	 	
	С		• • • • • • • • • • • • • • • • • • • •					
	d	All other revenue		L			9772577 772 -1	1 C.P
	е	Total. Add lines 11a-1	1d	•	25.	J 30 12 30	J. 1997 C.	
	12	Total Revenue. Add lin	nes 1h, 2g, 3, 4	, 5, 6d, 7d, 8c,	147654.	147654.		

Part IX Statement of Functional Expenses

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

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

	The same of the sa	to the state of the	or rodanoa to com	picto ocidinino (B);	(O), 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	62294.	62294.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	20 44 1 2 3 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	Grants and other assistance to governments, organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
4	Benefits paid to or for members			+ , _ , _ , _ , _ , _ , _ , _ , _ , _ ,	1773 1 374 1 3 TM
5	Compensation of current officers, directors, trustees, and key employees	2400.		2400.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	16672.	16672.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1775	1546.	229	
11	Fees for services (non-employees):				
	Management				
	Legal	1200.		1200.	
_	Accounting	1200.			
d	Lobbying		والمح والمراجع والمراجع والمتح والمحارية		
f	Investment management fees				
9	Other				
12	Advertising and promotion				
13	Office expenses	5007.		5007.	
14	Information technology		· ·-·-		
15	Royalties	33503.	33503.	<u></u>	
16	Occupancy	33503.	33503.		
17	Travel	<u></u>		······································	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings.				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	1679.	1679.		
23	Insurance	195 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A 35.0 7 Mg	Transport Contraction	Carry than 18 min
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together			医神经 医水流	
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
_	JANITOR SUPPLIES	1371.	1371.	5, 1-3 15 W 4 52 1 1 Mag	1 JE 14 26 - 23576 0 646 3 1
a b	REPAIR/MAINTENANCE	14981.	14981.		
C	SUPREME & STATE ASSESSMENTS	6556.		6556.	
d	MISCELLANEOUS	350.		350.	
e					
f	All other expenses				<u></u>
25	Total functional expenses. Add lines 1 through 24f	147788.	132046.	15742.	
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				

	990 (2					<u>Ра</u>	ige 1
1.6	rt X	Balance Sheet	I	1	<u> </u>		
			(A) Beginning of year		End	(B) of year	r
Assets	1	Cash—non-interest-bearing	5400.	1			6815
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	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		THE STATE OF THE S		ario.	13.0
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	ار در این از این از این از این ا	- 134	É
	7	Notes and loans receivable, net		7			
	8	Inventories for sale or use		8		- (2989
	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost basis 10a 105061.		j Ografija	Elitabeth Control		¥ .i. ; .
	b	Less: accumulated depreciation. Complete			در او		. 12, (
		Part VI of Schedule D 10b 84094.	22246	10c		2	20967
	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		15	ļ		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	31200.			3	0771
Liabilities	17	Accounts payable and accrued expenses	1222.				973
	18	Grants payable		18			
	19	Deferred revenue		19	<u> </u>		
	20	Tax-exempt bond liabilities	I .	20	ļ		
	21	Escrow account liability. Complete Part IV of Schedule D	長がきためた。強こ連集	21	English Hilling	# 50 A L	, 17,
	22	Payables to current and former officers, directors, trustees, key		37	18 3 1 6		1 3 m
		employees, highest compensated employees, and disqualified		77. T.		(a 14.0)	والمنتصف
		persons. Complete Part II of Schedule L		22	 		
	23	Secured mortgages and notes payable to unrelated third parties		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities. Complete Part X of Schedule D	4000	25			
	26	Total liabilities. Add lines 17 through 25	1222.		1955 _ 4 - 595°	,,7:-,	927
Net Assets or Fund Balances		Organizations that follow SFAS 117, check here ▶ □ and	The state of the state of	3.		المرتبع المرتبع	<i>T</i> .
		complete lines 27 through 29, and lines 33 and 34.	1. 10 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	27	in the same of	200	***
	27	Unrestricted net assets		28	 		
	28	Temporarily restricted net assets		29	 		
	29	Permanently restricted net assets	1. 1 0. 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7	74 4 1 6 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4	÷ %	رجه أ
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.	自己的	1,00		ري من جي جي ريم مدين	retar Seguina (
	20			30			
	30 31	Capital stock or trust principal, or current funds	<u> </u>	31			
		Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds	29978.		<u> </u>	2	9844
	32 33	Total net assets or fund balances	20070	33			9844
	34	Total liabilities and net assets/fund balances	31200.	34			0771
Pa	rt XI		1	1			
						Yes	No
1	Acc	ounting method used to prepare the Form 990: Cash Accrua	l 🗌 Other				253
2a		the organization's financial statements compiled or reviewed by an inc		t?	l _		✓
		the organization's financial statements audited by an independent acc					1
		'es" to lines 2a or 2b, does the organization have a committee that assumes					
•		audit, review, or compilation of its financial statements and selection of an in		-	_	;	
3a		a result of a federal award, was the organization required to undergo an					
	the	Single Audit Act and OMB Circular A-133?			. 3a		✓
t	lf "Y	es," did the organization undergo the required audit or audits?			. 3b		