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Form 990

Department of the Treasury
Internal Revenue Service

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

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

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable		C Name of organization MUTUAL GROUND, INC		D Employer identification number 36-2921680	
<input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type Doing Business As Number and street (or P O box if mail is not delivered to street address) 418 OAK AVENUE		Room/suite	E Telephone number 630-897-8989
		City or town, state or country, and ZIP + 4 AURORA, IL 60506			G Gross receipts \$ 2,036,088.
F Name and address of principal officer:					
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
J Website: ► WWW.MUTUALGROUNDINC.COM					
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			L Year of formation 1978 M State of legal domicile IL		

Part I Summary

Activities & Governance 1 Briefly describe the organization's mission or most significant activities: SOCIAL SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT IN S. KANE AND KENDALL COUNTY 2 Check this box ► <input type="checkbox"/> 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 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 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	3	21
	4	21
	5	50
	6	120
	7a	0.
	7b	0.

Revenue 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 8, 9, and 10) 8 2009 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 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) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ► 68,911. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12	RECEIVED OSC	Prior Year	Current Year
		1,729,799.	1,901,130.
		21,304.	28,994.
		7,179.	1,195.
		107,812.	33,385.
		1,866,094.	1,964,704.
		83,975.	144,391.
		1,377,743.	1,552,791.
		454,746.	340,120.
		1,316,161.	2,037,302.
		-50,370.	-72,598.
		Beginning of Year	End of Year
		2,035,783.	2,030,686.
		372,009.	441,768.
		1,663,774.	1,588,918.

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.

Sign
Here

 Signature of Officer

12-3-09

Date

Type or print name and title

Paid Preparer's Use Only	Preparer's signature ► Karen M. Olson	Date 11/25/09	Check if self- employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions) P00085441
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► DUGAN & LOPATKA, CPA'S PC 104 E. ROOSEVELT ROAD SUITE 102 WHEATON, ILLINOIS 60187-5267	EIN ► 36-2886485		
		Phone no ► 630-665-4440		

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

832001 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Part III. Statement of Program Service Accomplishments (see instructions)

1' Briefly describe the organization's mission:

PROVIDING TEMPORARY SHELTER, COUNSELING AND REFERRALS FOR PHYSICALLY, EMOTIONALLY OR SEXUALLY ABUSED WOMEN AND CHILDREN IN SOUTHERN KANE AND KENDALL COUNTIES IN 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?

Yes No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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 \$ 1,170,999. Including grants of \$ 144,391.) (Revenue \$ 28,994.)
THE DOMESTIC VIOLENCE PROGRAM PROVIDES SERVICES FOR WOMEN AND CHILDREN VICTIMS OF DOMESTIC ABUSE. SERVICES INCLUDE TEMPORARY SHELTER, TRANSITIONAL HOUSING, INDIVIDUAL AND GROUP COUNSELING, LEGAL AND MEDICAL ADVOCACY, 24 HOUR CRISIS LINE AND OTHER SPECIALIZED SERVICES. MUTUAL GROUND, INC PROVIDED 17,160 HOURS OF COUNSELING, 11,913 NIGHTS OF SHELTER TO 1,459 CLIENTS, 237 EDUCATION PROGRAMS TO 6,242 STUDENTS AND ANSWERED 18,884 CRISIS LINE CALLS.

4b (Code:) (Expenses \$ 544,704. Including grants of \$) (Revenue \$)
THE SEXUAL ASSAULT PROGRAM PROVIDED INDIVIDUAL AND GROUP COUNSELING, MEDICAL AND LEGAL ADVOCACY, 24 HOUR CRISIS LINE, INFORMATION, REFERRALS AND EDUCATION PREVENTION PROGRAMS IN AREA SCHOOLS. MUTUAL GROUND, INC PROVIDED 3,001 HOURS OF COUNSELING TO 323 CLIENTS AND PRESENTED 1,213 EDUCATION PREVENTION PROGRAMS TO 30,642 STUDENTS.

4c (Code:) (Expenses \$) (including grants of \$) (Revenue \$)

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

(Expenses \$) (including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 1,715,703. (Must equal Part IX, Line 25, column (B).)

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3 X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4 X	
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? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7 X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
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? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11 X	
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? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12 X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13 X	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.? 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.? <i>If "Yes," complete Schedule F, Part I</i>	14a X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15 X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16 X	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17 X	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19 X	
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20 X	
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K</i> <i>If "No", go to question 25</i>	24a X	
24b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
24c	c 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	
24d	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a X	
25b	b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	25b X	
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? <i>If "Yes," complete Schedule L, Part II</i>	26 X	
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? <i>If "Yes," complete Schedule L, Part III</i>	27 X	

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:		
a 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	X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X

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Part V. Statements Regarding Other IRS Filings and Tax Compliance

		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	1a	1	
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	50	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)</i>	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
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		X
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		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
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?	6a		X
6a Did the organization solicit any contributions that were not tax deductible?	6b		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a		X
7 Organizations that may receive deductible contributions under section 170(c).	7b		X
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7c		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7e		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7f		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7g		X
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7h		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	8		
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			
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?			
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9a		
a Did the organization make any taxable distributions under section 4966?	9b		
b Did the organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter: N/A	10a		
a Initiation fees and capital contributions included on Part VIII, line 12	10b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter: N/A	11a		
a Gross income from members or shareholders	11b		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	12b	

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

Section 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	21	
1b	21	
2		X
3		X
4		X
5		X
6		X
7a		X
7b		X
8a	X	
8b	X	
9a		X
9b		
10	X	
11		X

1a Enter the number of voting members of the governing body
 1b 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?

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?

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a material diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
 a The governing body?
 b Each committee with authority to act on behalf of the governing body?

9a Does the organization have local chapters, branches, or affiliates?
 b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

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

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

Section B. Policies

	Yes	No
12a	X	
b		
c		
13	X	
14	X	
15		
a		
b		
16a		X
b		
16b		

12a Does the organization have a written conflict of interest policy? If "No," go to line 13
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

15 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.
 a The organization's CEO, Executive Director, or top management official?
 b Other officers or key employees of the organization?
 Describe the process in Schedule O. (see instructions)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
 b 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?

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► IL
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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 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 records of the organization: ► DEBORAH WHITE - 630-897-8989 418 OAK AVENUE, AURORA, IL 60507

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 compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
MAVIS BATES DIRECTOR	2.00	X					0.	0.	0.
SUSAN BOEHME DIRECTOR	2.00	X					0.	0.	0.
TERRI CARPENTER DIRECTOR	2.00	X					0.	0.	0.
MARY LOU CHAPA DIRECTOR	2.00	X					0.	0.	0.
PAM CLEMEN DIRECTOR	2.00	X					0.	0.	0.
ANDI DANIS DIRECTOR	2.00	X					0.	0.	0.
MARLENE DECK TREASURER	2.00	X		X			0.	0.	0.
SR MARCIAN DEISENROTH DIRECTOR	2.00	X					0.	0.	0.
GINA EANES DIRECTOR	2.00	X					0.	0.	0.
HEATHER FENNIG DIRECTOR	2.00	X					0.	0.	0.
DR RENAE FRANIUK DIRECTOR	2.00	X					0.	0.	0.
KAY HURT DIRECTOR	2.00	X					0.	0.	0.
LIZA JOHNSEN DIRECTOR	2.00	X					0.	0.	0.
JULIE RUTTER PRESIDENT	2.00	X		X			0.	0.	0.
GREG SAMS VICE PRESIDENT	2.00	X		X			0.	0.	0.
TERRI SAMUELSON SECRETARY	2.00	X		X			0.	0.	0.
KEVIN STUTZ DIRECTOR	2.00	X					0.	0.	0.

Part VII. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

Part VIII Statement of Revenue

		(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	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	1a 73,428. 1b 1c 93,790. 1d 1e 1,318,168. 1f 415,744. g 84,127. h ► 1901130.			
Program Service Revenue	2 a DOMESTIC VIOLENCE FINE b c d e f All other program service revenue g Total. Add lines 2a-2f	Business Code 900099 ► 28,994.	28,994.		
	3 Investment income (including dividends, interest, and other similar amounts) ► 1,195.				1,195.
	4 Income from investment of tax-exempt bond proceeds ►				
	5 Royalties ►				
	6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)	(i) Real 14,400. ► 14,400.			14,400.
	7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	(i) Securities ►			
	8 a Gross income from fundraising events (not including \$ 93,790. of				
Other Revenue	contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events ► 8,358.	a 79,742. b 71,384. ►			8,358.
	9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities ►	a b ►			
	10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory ►	a b ►			
	Miscellaneous Revenue	Business Code			
	11 a MISCELLANEOUS b c d All other revenue e Total. Add lines 11a-11d	900099 ► 10,627.	10,627.		
	12 Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	► 1964704.	39,621.	0.	23,953.

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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	144,391.	144,391.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	89,439.	71,551.	17,888.	
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	1,224,616.	1,020,319.	158,951.	45,346.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	135,613.	106,203.	22,612.	6,798.
10 Payroll taxes	103,123.	86,571.	13,151.	3,401.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	21,856.		21,856.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	18,037.	10,751.		7,286.
12 Advertising and promotion				
13 Office expenses	39,198.	33,950.	4,262.	986.
14 Information technology				
15 Royalties				
16 Occupancy	93,441.	87,691.	5,175.	575.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	26,366.	26,366.		
20 Interest	22,126.	22,126.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	74,372.	66,935.	5,950.	1,487.
23 Insurance	25,120.	21,810.	2,630.	680.
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)				
a MISCELLANEOUS	10,690.	10,477.	213.	
b DUES AND SUBSCRIPTIONS	2,562.	2,562.		
c ICADV DUES	2,500.	2,500.		
d FUNDRAISING EXPENSES	2,352.			2,352.
e ICASA SUPPORT EXPENSE	1,500.	1,500.		
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	2,037,302.	1,715,703.	252,688.	68,911.
26 Joint Costs. Check here ► <input type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	19,345.	1	24,456.
	2 Savings and temporary cash investments	198,333.	2	155,165.
	3 Pledges and grants receivable, net	91,382.	3	157,061.
	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 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	900.	9	190.
	10a Land, buildings, and equipment: cost basis	2,629,025.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 973,594.	10c 1,725,023.	1,655,431.
	11 Investments - publicly traded securities		11	33,228.
	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	800.	15	5,155.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	2,035,783.	16	2,030,686.
Liabilities	17 Accounts payable and accrued expenses	72,521.	17	89,334.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	299,488.	23	352,434.
	24 Unsecured notes and loans payable		24	
	25 Other liabilities Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	372,009.	26	441,768.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,636,774.	27	1,558,918.
Net Assets or Fund Balances	28 Temporarily restricted net assets	27,000.	28	30,000.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,663,774.	33	1,588,918.
	34 Total liabilities and net assets/fund balances	2,035,783.	34	2,030,686.

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

 b Were the organization's financial statements audited by an independent accountant?

 c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

 b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.

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

OMB No 1545-0047

2008
Open to Public
Inspection**Name of the organization****MUTUAL GROUND, INC****Employer identification number**
36-2921680**Part I Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
 11 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.
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?	(vii) Amount of support
				Yes	No		
Total							

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

Schedule A (Form 990 or 990-EZ) 2008

Part II. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year 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.")	1,671,469.	1,787,005.	1,842,727.	1,729,799.	1,901,130.	8,932,130.
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 Total. Add lines 1 - 3	1,671,469.	1,787,005.	1,842,727.	1,729,799.	1,901,130.	8,932,130.
5 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)						
6 Public Support. Subtract line 5 from line 4						8,932,130.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1,671,469.	1,787,005.	1,842,727.	1,729,799.	1,901,130.	8,932,130.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,904.	9,317.	23,195.	22,779.	15,595.	81,790.
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.)	70,946.	10,726.	3,702.	4,890.	10,627.	100,891.
11 Total support. Add lines 7 through 10						9,114,811.
12 Gross receipts from related activities, etc. (see instructions)					12	470,361.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	98.00	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.74	%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input checked="" type="checkbox"/>	
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► <input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2008

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)**Section A. Public Support**

Calendar year (or fiscal year 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.")						
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						
6 Total. Add lines 1 - 5						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%
19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2008

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

MUTUAL GROUND, INC

Employer identification number
36-2921680

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply).	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of certified historic structure
	<input type="checkbox"/> Preservation of open space
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	Held at the End of the Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►	2d
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

Schedule D (Form 990) 2008

832051
12-23-08

15521118 759574 2165

2008.04040 MUTUAL GROUND, INC

2165 _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations

- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

- 1a Beginning of year balance
- b Contributions
- c Investment earnings or losses
- d Grants or scholarships
- e Other expenditures for facilities and programs
- f Administrative expenses
- g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► _____ %
- b Permanent endowment ► _____ %
- c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

Yes	No
3a(i)	
3a(ii)	

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of Investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		10,000.		10,000.
b Buildings		1,850,814.	556,775.	1,294,039.
c Leasehold improvements		504,564.	202,960.	301,604.
d Equipment		263,647.	213,859.	49,788.
e Other				

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ► 1,655,431.

Part VII Investments - Other Securities. 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 value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		

Part VIII Investments - Program Related See Form 990, Part X, line 12

Total. (Col (b) should equal Form 990, Part X, col (B) line 13) ►

Part IX Other Assets. See Form 990, Part X, line 15.

Total. (Column (b) should equal Form 990, Part X, col (B) line 15)

Part X **Other Liabilities.** See Form 990, Part X, line 25.

In Part XIV, around the text of the facts state the organization's financial position.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48
822052

Part XI. Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	1,964,704.
2	2,037,302.
3	-72,598.
4	-2,258.
5	
6	
7	
8	
9	
10	-2,258.
	-74,856.

Part XII. Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	1,954,871.
2	
2a	-2,258.
2b	
2c	
2d	39,325.
2e	37,067.
3	1,917,804.
4	
4a	
4b	46,900.
4c	46,900.
5	1,964,704.

Part XIII. Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	2,029,727.
2	
2a	
2b	
2c	
2d	39,325.
2e	39,325.
3	1,990,402.
4	
4a	
4b	46,900.
4c	46,900.
5	2,037,302.

Part XIV. Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART X11 LINE 2D-SPECIAL EVENT EXP - DIRECT COSTS ASSOCIATED WITH EVENTS

PART XIII LINE 2D-SPECIAL EVENT EXP - DIRECT COSTS ASSOCIATED WITH EVENTS

PART XII LINE 4B - IN-KIND DONATIONS OF CLOTHING AND HOUSEHOLD ITEMS

PART XIII LINE 4B - IN-KIND DONATIONS OF CLOTHING AND HOUSEHOLD ITEMS

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008
Open To Public
Inspection

Department of the Treasury
Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization

Employer identification number
36-2921680

MUTUAL GROUND, INC.

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

Total

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II. Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue	GALA (event type)	(a) Event #1	(b) Event #2	(c) Other Events NONE	(d) Total Events (Add col. (a) through col. (c))
		WALK (event type)	(total number)	(total number)	
1 Gross receipts		124,893.	45,023.		169,916.
2 Less: Charitable contributions		46,959.	45,023.		91,982.
3 Gross revenue (line 1 minus line 2)		77,934.			77,934.
4 Cash prizes		3,750.			3,750.
5 Non-cash prizes		32,059.			32,059.
6 Rent/facility costs		14,872.			14,872.
7 Other direct expenses		14,324.	3,163.		17,487.
8 Direct expense summary. Add lines 4 through 7 in column (d)					► (68,168.)
9 Net income summary. Combine lines 3 and 8 in column (d)					► 9,766.

Part III. Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
1 Gross revenue					
2 Cash prizes					
3 Non-cash prizes					
4 Rent/facility costs					
5 Other direct expenses					
6 Volunteer labor		<input type="checkbox"/> Yes _____ %	<input type="checkbox"/> Yes _____ %	<input type="checkbox"/> Yes _____ %	
7 Direct expense summary. Add lines 2 through 5 in column (d)		<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	► ()
8 Net gaming income summary. Combine lines 1 and 7 in column (d)					► ()

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain:

	Yes	No
9a		

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain:

10a		
-----	--	--

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

11		
12		

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

	Yes	No
13a	%	
13b	%	

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

c If "Yes," enter name and address:

Name ► _____

Address ► _____

16 Gaming manager information.

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer

Employee

Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

17a

SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.
OMB No 1545-0047
2008

Department of the Treasury
Internal Revenue Service

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

Name of the organization

MUTUAL GROUND, INC

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on 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 Part IV and Schedule I-1 (Form 990) if additional space is needed. ►

1 (a) Name and address of organization or government
(b) EIN
(c) IRC section if applicable
(d) Amount of cash grant
(e) Amount of non-cash assistance
(f) Method of valuation (book, FMV, appraisal, other)
(g) Description of non-cash assistance
(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

► _____

► _____

Schedule I (Form 990) 2008

Schedule I (Form 990) 2008
Part II 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.

36-2921680 Page 2

MUTUAL GROUND, INC

(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
TRANSITIONAL HOUSING		7	0.	41,739.	FAIR MARKET VALUE	PAYMENTS FOR HOUSING ON BEHALF OF CLIENTS
FOOD AND HOUSEHOLD SUPPLIES		1500	0.	84,653.	FAIR MARKET VALUE	PAYMENTS FOR FOOD AND HOUSEHOLD SUPPLIES ON BEHALF OF CLIENTS
CLIENT ASSISTANCE		30	0.	2,838.	FAIR MARKET VALUE	PAYMENTS FOR ASSISTANCE ON BEHALF OF CLIENTS
EMERGENCY FOOD AND SHELTER		2000	0.	15,161.	FAIR MARKET VALUE	PAYMENTS FOR FOOD AND SHELTER ON BEHALF OF CLIENTS

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: APARTMENTS, FOOD BOXES AND ASSISTANCE ARE AVAILABLE FOR LOCAL CLIENTS ONLY.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

OMB No 1545-0047

2008
Open to Public
Inspection

Name of the organization

MUTUAL GROUND, INC

Employer identification number

36-2921680

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		46,900.	THRIFT SHOP VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	1	5,168.	FOOD BANK CALCULATION
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>SEE ATTACHED</u>)	X	180	32,059.	FAIR MARKET VALUE
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment			29	

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a	X	
31	X	
32a	X	

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

Schedule M (Form 990) 2008

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2008.04040 MUTUAL GROUND, INC

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008
Open to Public
Inspection

Name of the organization

MUTUAL GROUND, INC

Employer identification number
36-2921680

FORM 990, PART VI, SECTION A, LINE 10: THE FINANCE COMMITTE INITIALLY REVIEWS FORM 990. A COPY OF FORM 990 IS OFFERED TO THE OFFICERS AND DIRECTORS DURING A BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS SIGN CONFLICT OF INTEREST POLICIES PERIODICALLY.

FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE AVAILABLE UPON REQUEST AND AN ANNUAL REPORT IS AVAIALBLE ON THE WEBSITE.

FORM 990, PART XI, LINE 2C:

PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

ITEM #	ITEM	DONOR	COMMENTS	VALUE	Top Bid	Purchased by	MINIMUM BID	MINIMUM INCREASE	TYPE	Sign
101	Getaway to Eagle River	Faith Etheredge & John Medernach	Weeks use of townhouse between Labor Day and Memorial Day	\$1,500	\$600	Mary Dougherty	\$600	\$50	cert	x
102	Wisconsin Weekend	Jim & Clare Toynton	Weekend use (Fr-Mon) of Fontana WI house	\$225	\$225	Karen Johnsen	\$150	\$25	cert	x
103	Fly Around the Country	Southwest Airlines	Two Roundtrip between any two Southwest cities. Expires 3/1/10	\$800	\$575	Todd Franiuk	\$125	\$25	cert	x
104	Splash Away the Day	Mayan Adventure Indoor Waterpark	4 waterpark passes, expires 9/1/09	\$120	\$80	Heidi Chase	\$25	\$10	cert	x
105	Dells Getaway	Great Wolf Lodge	One night stay in Family Suite for 4 ppl	\$300	\$210	Tracy Deck	\$85	\$10	cert	x
106	Sawyer Michigan Getaway	Mark & Christine Stoner	Up to Lofti Heights House June 4-5, 2009 (Th-F)	\$445	\$225	Charlie Lueh	\$150	\$25	cert	x
107	Pheasant Run Overnight	Pheasant Run, St. Charles	Overnight accommodations & breakfast/lunch for 2, Expires 1/21/10, Exclusive of holidays and special events	\$159	\$110	Steve Wittent	\$40	\$10	cert	x
108	Galena Getaway	Desoto Hotel and Wild Clover Day Spa, Galena IL	One night midweek stay (exp 2/10) & a massage at Wild Clover (exp 6/1/09)	\$210	\$150	Pam Freeman	\$50	\$10	cert	x
109	Wilderness Resort Getaway	NorthStar Credit Union, Ron Westphal Chevrolet, Wilderness Resort	2 nights in a double suite (up to 6 ppl) Mon-Thurs only Labor Day-Memorial Day only. Not valid holidays or peak periods	\$450	\$240	Julie Rutter	\$75	\$10	cert	x
110	Overnight in Chicago	Travelodge Hotel Downtown	One night room & tax, expires 12/30/09	\$150	\$100	Clare Toynton	\$35	\$10	cert	x
111A	Romantic Getaway	Hotel Artists and MG Sexual Assault Staff	One night in Deluxe King room (not New Year's Eve or Valentine's Day), bistro of romantic items	\$300	\$110	Bobbie Franiuk	\$50	\$10	item	x
112	Daytona Beach Vacation	Marlene & Rich Deck	Use of condo for a week stay's, sleeps 6; Use in 2009	\$1,000	\$800	Jim Hopp	\$350	\$50	cert	x
113	Raffaele Hotel	Wayne & Dorothy Leitz	One night stay at 4**** hotel, no restrictions, expires Feb 2010.	\$250	\$170	Key Hunt	\$85	\$10	cert	x
201	Slot Machine	Julie Rutter		\$250	\$200	Bob McCue	\$60	\$10	item	
202	Comedy at its Finest	The Second City & C, Chicago	Two tickets for any Thursday 8:00pm or Sunday 7:00 pm show; expires 1/1/10	\$40	\$40		\$10	\$5	cert	x
203	Six Flags Great America	Six Flags	Two tickets for 2009 season; not valid for private events	\$110	\$55	Brenda Van Wyne	\$20	\$5	cert	x
204	Bears "Laser" Signed Football	Chicago Bears		\$75	\$75	Stacy Hanling	\$25	\$10	item	x
205	Glow Bowl Party	Parksides Lanes	One night party for 10 people for 1.5 hours, shoes, pizza, soft drinks during 10pm-2am, exp 12/30/09	\$200	\$80	Cathie Riddle	\$30	\$10	cert	x
206	Geneva Shopping Extravaganza		150 Endays, \$25 The Perfect Setting, \$25 Park Place Interiors, \$25 Irish Interiors, \$25 Mora Lee Shops, \$25 Assembly Line Toys, \$20 Anastasia, \$20 Aubies by Maclyn, Lunch for 2 at The Little Traveler teen...	\$240	\$110	Pam Freeman	\$50	\$10	cert	x
207	Plano Magnum Tackle Box	Piano Molding		\$30	\$15	Bob McCue	\$10	\$5	item	
208	Enjoy Your Park District	Fox Valley Park District	Food for classes, programs, season passes of fitness membership, expires 1/1/09	\$75	\$50	Liza Johnsen	\$20	\$5	cert	x

ITEM #	ITEM	DONOR	COMMENTS	VALUE	Top Bid	Purchased by	MINIMUM BID	MINIMUM INCREASE	TYPE	Sign
209	Off to the Movies									
210	Arnold Palmer Photo	Arnold Palmer								
211	Golf at Settler's Hill	Kane County Forest Preserve	Autographed Fut 18 hole greens fees and 2 carts	\$110	\$70.00	Charlie Lueh	\$20	\$5 cent	x	
212	Fermilab Art Series - Chic Gamire	Fermilab Art Series								
213	The Oprah Winfrey Show	The Oprah Winfrey Show	4 tickets to Chic Gamire on Sat, 4/8 at 8:00 pm from 5th row center at Fermilab's Ramsey Auditorium	\$25						
214	Dr. Phil and The Doctors	Dr. Phil Show	Tickets to Oprah & Signed Photo tickets for 4 at a taping of Dr. Phil and at The Doctors	\$248	\$165.00	Paul Kott	\$30	\$10 cent	x	
215	Chicago Bulls Tickets	Todd Franuluk	2 tickets to Sat, 3/28 game at 1:00 pm against Indiana Pacers - section 115, row 17, seats 3 & 4	\$80	\$20.00	Sue Adams	\$20	\$5 cent	x	
216	The Ravinia Experience	Ravinia	1 to admit 2 passes for the 2009 season (4 people can go once or 2 people can go twice), not valid for sold out performances or the Gala Benefit on 7/18/09. Pass can be upgraded	\$80	\$55.00	Theresa Mikobowski	\$15	\$5 cent	x	
217	Reggie Kett Hockey Puck	Liza Johnson	Autographed	\$85	\$85.00	Kristin Good	\$15	\$5 item		
218	White Sox Opening Day Tickets	Esser Hayes Insurance Group	box seat tickets, parking pass, Stadium Club pass for opening day 4/6/09	\$235	\$235.00	Theresa Shoemaker	\$100	\$10 cent	x	
219	Arboratium Family Membership	Morton Arboretum	Good for 1 year family membership	\$90	\$80.00	Megan McCullough	\$20	\$5 cent	x	
220	Signed Chicago Cubs Book	Deb Kuhn	is Chicago Cubs, Our Team-Our Dream	\$50	\$50.00	Kathy Tolaksen	\$25	\$5 item		
221	Symphony Tickets	Edgar Symphony	Golden Corridor tickets to see a Classics or Pops Concert at Elgin's Summers Theatre, expires 12/31/09	\$135	\$60.00	Kay Hunt	\$20	\$5 cent	x	
222	Bowling Green Party	Bowling Green Sports Center	Swing & rental shoes for 8 ppl	\$55	\$40.00	Terri Carpenter	\$10	\$5 cent	x	
223	Kingston Mines Blues Club	Kingston Mines	Admission & drinks for 4	\$80	\$25.00	Charlie Lueh	\$15	\$5 cent	x	
224	Solheim Cup 2009 passes	LPGA	week-long season grounds passes (valid for each day of practice rounds 1st match play) for Rich Harvest Farms on Aug 17-23 in flag is signed by American & European 2007 Solheim Cup teams	\$300	\$200.00	Anne Barrett	\$100	\$25 item		
225	States Attorney Intern for a Day	Kane County States Attorneys Office	Initially Agreeable Day to follow Asst. State's Attorney, Greg Sams for a day	\$150	\$150.00	Kristin Good	\$50	\$10 cent	x	
226	Paramount Theatre Tickets	Paramount Theatre	Tickets to James & the Giant Peach (4/19), Queen of Bingo (4/30, 5/1, 5/2, or 5/3), or Glenn Miller Orchestra (5/7)	\$100	\$40.00	Eva Luckinbill	\$20	\$5 cent	x	
227	Book: It's Only a Game	Terry Bradshaw		\$35	\$35.00	John Anderson	\$15	\$5 item		
228	Comedy & Blues Clubs	Zanies Comedy Club & Kingston Mines	Tickets for 4 at Zanies (Chicago, STC, or Vernon Hills, exp 6/09) and admission & drinks for 4 at Kingston Mines in Chicago	\$160	\$40.00	Theresa Mikobowski	\$30	\$5 cent	x	
229	Chicago Wolves Hockey Tickets	Chicago Wolves	Tickets to M-F game during 2008-09 season. Claim tickets by 4/8/09 autographed	\$34	\$35.00	Brian Caputo	\$10	\$5 cent	x	
230	Alfonso Soriano Baseball	Friend of Mutual Ground		\$65	\$65.00	Margaret Ryan	\$40	\$10 item		
231	Calling All Golfers	Senior's Hill and Bells Creek		\$112	\$150.00	Theresa Shoemaker	\$50	\$10 cent	x	
232	Las Vegas Comedy Club	Riviera Hotel & Casino, Las Vegas	our 18 hole greens fees and 2 carts at each course. Ellis is weekday only	\$50	\$10.00	Tom Cook	\$10	\$5 cent		
233	Andre Agassi Photo	Andre Agassi	admissions, expires 2/10	\$100	\$40.00	Rene Cruz	\$25	\$5 item		
234	Come to the Wedding	Tony & Tina's Wedding	Autographed tickets to a performance in Chicago, valid Sun, Wed or Thurs, \$10/ticket handing change	\$10	\$65.00	Bobbie Franuluk	\$20	\$5 cent	x	

ITEM #	ITEM	DONOR	COMMENTS	VALUE	Top Bid	Purchased by	MINIMUM BID	MINIMUM INCREASE	TYPE	Sign
235	Chicago Sites		Sedd Aquanum, Museum of Science, and Hancock, passes for 4	\$182	\$100.00	Nancy Weiss	\$30	\$5 cert	x	
236	Golf Year Round	TopGolf USA, Wood Dale	1 annual standard memberships to this Indoor Golf	\$200	\$60.00	Ship Ulrich	\$30	\$10 cert	x	
237	Tony Hawk Autographed Picture	Tony Hawk	1 annual standard memberships to this Indoor Golf	\$35	\$35.00	Debbie White	\$20	\$5 item		
238	Fergie Jenkins' Collectibles	Deb Kuhn	Aographed baseball and book "The Game Is Easy Life is Hard, The Story of Fergie Jenkins Jr."	\$75	\$75.00	Jack Funderburg	\$30	\$5 item		
239	Flip-Sider Tackle System	Piano Molding	box	\$50	\$30.00	Bob McCue	\$15	\$5 item		
240	Pavilion & Suey Signed Photo	Sue & Bill Healy	Signed by Matt Suey	\$400	\$40.00	Lea Gilbert	\$65	\$10 item		
241	Cristobal Huet Puck & Photo	Chicago Blackhawks	ickets to Sat. 3/14 game at 7:30p vs New Orleans Hornets, section 101, row 14, seats 3 & 4	\$150	\$150.00	Marilyn Deck	\$30	\$5 item		
242	Bulls vs. Hornets Tickets	Friend of Mutual Ground		\$270	\$180.00	Matt Shaw	\$65	\$10 cert	x	
243	Sean Marshall Signed Baseball	Chicago Cubs		\$50	\$55.00	Terri Carpenter	\$20	\$5 item		
			No people for a "Knight" at Medieval Times Dinner & Tournament in Schaumburg, does not include cocktail service, souvenirs, or gratuity, expires 8/31/09	\$116	Did not claim	Julie Perez	\$25	\$5 cert	x	
244	A Knight to Remember	Medieval Times, Schaumburg	h made guacamole & salsa 4 times	\$200	\$140.00	Marilyn Deck	\$40	\$10 cert	x	
245	Holy Guacamole!	Maria & Jose Zamora	h made guacamole & salsa 4 times	\$75	\$75.00	David Davis	\$30	\$5 item		
246	Rusty Wallace Shirt & Picture	Rusty Wallace, Inc	Cast for Nascar Fans	\$120	\$120.00	Jeff Campbell	\$50	\$5 item		
247	Chicago Cubs-May 2	Rich Deck	Cubs vs. Marlins	\$120	\$120.00	Pam Clemens	\$30	\$10 cert	x	
248	Golf at Fox Valley CC.	City of Aurora	1 Holes for a Foursome	\$200	\$140.00	Terri McAdams	\$40	\$10 cert	x	
249	Holy Guacamole!	Maria & Jose Zamora	h made guacamole & salsa 4 times	\$105	\$105.00	Jim Edwards	\$30	\$5 item		
301	Desperate Housewives Fan Pack	Desperate Housewives	signed photos	\$45	\$45.00	Jim Hopp	\$25	\$5 item		
302	Richard Paul Evans Signed Book	Richard Paul Evans	Te Dance signed by the author							
303	Porcelain Doll "Trudy's Holiday"	NorthStar Credit Union and Ron Westphal Chevrolet		\$20	\$20.00	Linda Healy	\$15	\$5 item		
304	Dean Koontz Autographed Book	Dean Koontz	Other Odd signed by the author	\$60	\$60.00	Lea Gilbert	\$25	\$5 item		
305	Silver Pin - United in Memory	Friend of Mutual Ground		\$10	\$10.00	Sue Healy	\$10	\$2 item		
306	Gold Pin - United in Memory	Friend of Mutual Ground		\$10	\$10.00	Sue Healy	\$10	\$2 item		
307	Stephen J. Cannell Book Cold Hit	Friend of Mutual Ground	Cold Hit signed by the author	\$25	\$25.00	Theresa Mikobowski	\$25	\$5 item		
308	Gotta Love Garfield	Jim Davis	signed by the cartoonist	\$35	\$35.00	Tom Cook	\$20	\$5 item		
309	Janet Evanovich Signed Book	Janet Evanovich	h elieve Sharp signed by the author	\$45	\$45.00	Debbie Madore	\$25	\$5 item		
310	Royal Doulton Autographed Book	Linda Healy		\$250	\$50.00	Down Local	\$50	\$10 item		
311	Jodi Picoult Autographed Book	Liza Johnson	h Sister's Keeper signed by the author	\$40	\$40.00	Linda Abrahamson	\$25	\$5 item		
312	John Travolta Photo	John Travolta	Autographed	\$25	\$25.00	Monica Santiago	\$25	\$5 item		
313	Collector Doll "Bruno"	NorthStar Credit Union and Ron Westphal Chevrolet		\$20	\$20.00	Mercedes Zajicek	\$15	\$5 item		
314	Terry Bradshaw Signed Book	Terry Bradshaw	h ep It Simple signed by the author	\$30	\$30.00	Debbie Madore	\$20	\$5 item		
315	Photo Coasters	Shannon Rankin	h nated by the photographer	\$25	\$25.00	Eric West	\$10	\$5 item		
316	Treasures of Illinois book	Nurs About Nurs, Genera		\$50	\$35.00	Julie Rutter	\$10	\$5 item		
317	Felicity Huffman Photo	Desperate Housewives	h ographed	\$20	\$20.00	Stephanie Kiford	\$20	\$5 item		
318	Stephen J. Cannell Signed Book	Friend of Mutual Ground	1 line Shirt Deal signed by the author	\$25	\$25.00		\$25	\$5 item		
319	Set of 4 Flower Pictures	Friend of Mutual Ground		\$100	\$100.00		\$20	\$5 item		
320	Flower Painting	Virginia Carpenter & Carrie & Gene Hamilton		\$500	\$140.00	Linda Abrahamson	\$75	\$10 item		
321	Painting "Sound of Mountain Water"	Linda Healy		\$500	\$105.00	John Anderson	\$75	\$10 item		
322	Pair of Charles Beck Pictures	ArtWorks Service Company		\$160	\$70.00	Andi Davis	\$30	\$10 item		
323	Vintage Décor Italy Art Prints	Friend of Mutual Ground		\$50	\$180.00	Tom Cook	\$15	\$5 item		
324	Limited Edition Print	Proud Fox Gallery		\$150	\$60.00	Zabelin	\$25	\$5 item		
325	Modern Art Purple Flower Print	Friend of Mutual Ground		\$50	\$45.00	Jacy Mooser	\$10	\$5 item		
326	Oil Pastel Painting "Joyful"	Dearne Allerman		\$175	\$200.00	Deann Allerman	\$75	\$10 item		
327	"Aunties on the Couch" Painting	Pat Stoerski		\$250	\$80.00	Zabelin	\$50	\$10 item		
328	Original Oil Painting	The Artist, Carol Peacock		\$1,250	DID NOT SELL		\$300	\$25 item		
329	Collector Doll "Nancy"	Clare & Jim Toynton		\$25	\$25.00	Marcia Clark	\$15	\$5 item		
330	Joyce Reuland Painting	The artist, Invere Pouland		\$25	\$25.00	Deanne Clark	\$15	\$5 item		

ITEM #	ITEM	DONOR	ITEMMENTS	VALUE	Top Bid	Purchased by	MINIMUM BID	MINIMUM INCREASE	TYPE	Sign
401	Calling All Chocolate Lovers	Greg Sams & Jennifer Carven		\$60	\$70.00	Tom Carpenter	\$15	\$5	item	
402	Taste of the Tri-Cities		asket of Chocolates 75 Wildwood, \$50 Egg Harbor Café, \$25 Graham's Chocolates, \$50 Tribella	\$250	\$220.00	Jamie Mosser	\$40	\$5	cert	x
403	Naperville Wine Tasting	Tasting deVine Cellars, Naperville	ar & Grill, \$25 Stockholm's, & \$25 Zaza's fine tasting of 7 wines for 10 people, between hours of 11a-5p, valid until ov 2009	\$80	\$21.60.00	Patry Rosenberg	\$15	\$5	cert	x
404	Marganta Basket	Marfene & Rich Deck		\$125	\$70.00	Tom Carpenter	\$25	\$5	item	
405	Panera Bread for a Year	Panera	at a month 100 The Turf Room, \$600 Farbank's Steakhouse, \$50 Traverso's	\$50	\$50.00	Pam Freeman	\$10	\$5	cert	x
406	Taste of the Fox Valley		Restaurant, \$45 Carrabba's Italian Grill	\$285	\$200.00	Jane Powell	\$40	\$5	cert	x
407	Wines of New York	Jamie Mosser & Jamison Eisenmenger	ines from the Pindar Winery on Long Island, NY	\$150	\$135.00	Lisa Gilbert	\$40	\$10	item	x
408	Wheaton Wine Tasting	Lynfred Winery	ine tasting of 7 wines for 10 people, between hours of 11a-5p, valid until 2/4/09	\$70	\$50.00	Dawn Leal	\$15	\$5	cert	x
409	Dinner is Served...	Four Chefs	omenade Italian Dinner for 8 (Judy - will be getting more info on this next week)	\$325	\$325.00	Mariene Deck	\$100	\$25	cert & item	x
410	Spice Up Your Life	The Spice House and Lisa Johnson	ynified (wine tasting & tour for 10 in Roselle, expires 3/10), PRP (two hour tasting of 8 wines for 16 in Elk Grove Village, book by 3/31 for March or April), asling devine (lasting of 7 wines for 10 in Naperville, exp 12/09)	\$40	\$40.00	Tom Cook	\$10	\$5	item	
411	Area Wine Tastings		admission to 'Mix It Up' Cooking Party, which is a hands-on group cooking session and a sit-down 4-course dinner party	\$160	\$105.00	Jaci Gisi	\$30	\$10	cert	x
412	Cooking Class	Bascombe Cuisine Linda Healy & Prisco's Fine Foods	0-hour tasting of 8 wines for 16 ppl, book by 3/31 for March or April	\$110	\$110.00	Kay Hunt	\$25	\$5	item	x
413	A Bella Notte Basket	PRP Wine International	PRP Wine International	\$350	\$350.00	Kay Hunt	\$30	\$10	cert	x
414	Wine Tasting			\$115	\$80.00	Lisa Gilbert	\$25	\$5	item	
415	Dipping Oils	Ron Westphal Charolet/MG Board of Directors & Friends of MG	udio Flyer Wagon & Boozoo	\$350	\$350.00	Dabbie White	\$50	\$10	item	
416	The Liquor Express	Maria & Jose Zamora	omenade guacamole & salsa 4 times	\$200	\$110.00	Jennifer Healy	\$40	\$10	cert	x
417	Start the Party	Friend of Mutual Ground	board games	\$65	\$50.00	Renee Franjuk	\$10	\$5	item	
501	Little Kid Game Night	Friend of Mutual Ground		\$25	\$25.00	Lisa Accardi	\$10	\$2	item	
502	My First Skates	Friend of Mutual Ground								
503	Jump!Zone Party	Jump!Zone, St Charles	3/4 hour open play party for 15 kids in STC (1 1/4 hour play time on flatables and 30 minutes in party room), does not include food; expires 2/31/09	\$185	\$160.00	Zaida Rodriguez	\$30	\$10	cert	x
504	Little Shots Digital Camera	Key Hurt		\$70	\$55.00	Linda Fleg	\$15	\$5	item	
505	Skateboarder Bear	MG Prevention Staff and Build-A-Bear Workshop	includes \$10 Cub Cash	\$50	\$35.00	Kara Sanchez	\$10	\$5	cert & item	x
506	Newborn Girl Basket	Key Hurt	aby clothes, picture frame, stuffed animal	\$50	\$65.00	Jane Hanrikson	\$20	\$5	item	
507	Adventures for Families									
508	Family Game Night	Friend of Mutual Ground	ne day admission for a family of 4 to Cougars Game, Naperville, Illi Museum, Leopold & \$20 to Safari Land	\$248	\$80.00	Greg Sams	\$25	\$10	cert	x
509	2009 American Girl Doll-Chrisa	Pam & Don Cleman	board games	\$120	\$85.00	Kathy Tolakson	\$20	\$5	item	
510	Aurora Family Fun	SciTech & Aurora Science Center	cludes doll and her book	\$95	\$150.00		\$30	\$10	item	
511	Wooden Train Set	Friend of Mutual Ground	passes	\$98	\$30.00	Jane Powell	\$15	\$5	cert	x
512	Enc Cane Autographed Book	Lea Johnson	utographed Polar Bear book and stuffed bear	\$210	\$100.00	Judy Jacobson	\$40	\$10	item	
513	Cruisin' Bears	MG Prevention Staff	ild a Bear Romeo & Juliet in their car, includes cert	\$100	\$100.00	Andi Dans	\$15	\$5	cert & item	
514	Steel Beam Theater - Private Party									
515	Getting Ready for Baby	Friend of Mutual Ground	clusive use of 79 seat theater for Thimbeline show on 4/18 at 3:00 pm	\$790	\$150.00	Greg Sams	\$50	\$10	cert	x
516	Mini Tricycle	Friend of Mutual Ground	tex items, blanket, bear	\$115	\$50.00	Julie Ritter	\$20	\$5	item	
517	Boys Love Trucks	Friend of Mutual Ground		\$28	\$25.00	Jeanne Snider	\$10	\$2	item	
518	More Family Fun	Naperville Settlement & Aurora Shale Center		\$40	\$75.00	Jaimie Mosser	\$10	\$5	item	
519	Little Tunes MP3 Player	Key Hurt	passes	\$57	\$10.00	Heidi Chase	\$10	\$5	cert	x
				\$65	\$20.00	Tom Carpenter	\$10	\$5	item	

ITEM #	ITEM	DONOR	COMMENTS	VALUE	Top Bid	Purchased by	MINIMUM BID	MINIMUM INCREASE	TYPE	Sign
520	Cooking for Kids			\$45	\$45	Kathleen Chavez	\$10		\$5 item	*
521	Board Games for Young Ones		board games	\$99	\$50.00	Linda Flieg	\$15		\$5 item	
522	For All Future Cowboys		Toys	\$85	\$25.00	John Anderson	\$10		\$5 item	
523	Freemie Girl Basket		Freemie Clothing & Doll	\$50	\$30.00	Terri Carpenter	\$15		\$5 item	
601	Homeowner's Tool Set		3 piece tool set & \$100 Sears card	\$209	\$110.00	Brenda Van Wye	\$40		\$10 item	x
602	Relax With a Smoothie		smoothie machine & recipe book	\$45	\$35.00	Bill Murphy	\$10		\$5 item	x
603	Closet Organization		toward purchase of a custom closet storage system, valid at Lombard only	\$200	\$70.00	Karen Johnson	\$50	\$10 cert	\$5 item	x
604	Is It a Cake Plate or a Chip & Dip?									
605	Waterford "Mother's Day" Vase	Ron Westphal Chevrolet	reversible plate, cake server, cake mix, chips & salsa	\$60	\$40.00	Linda Abramson	\$10		\$5 item	
606	Porcelain Cheese Board & Knife	Key Hunt		\$125	\$80.00	Sue Healy	\$25		\$10 item	
607	Longaberger Bowl	Persimmon Shop		\$40	\$30.00	Pam Clemens	\$10		\$5 item	
608	Lenox Vase	Liza Johnson		\$20	\$20.00	Meredes Zajicek	\$15		\$5 item	
609	Christmas Snowman Dinner Set	Linda Healy		\$20	\$20.00	Emma Stein	\$10		\$5 item	
610	Lantern Candle Holder	Friend of Mutual Ground		\$230	\$70.00	Betty Reed	\$40		\$10 item	
611	Hanging Vases	Friend of Mutual Ground		\$40	\$25.00	Rosalinda Saucedo	\$10		\$5 item	
612	Snack Serving Set	Friend of Mutual Ground		\$30	\$25.00	Anne Barrett	\$10		\$5 item	
613	Jingle Bells Salad Plates	Sue Putmirek		\$50	\$10.00	Linda Abramson	\$10		\$5 item	
614	Handmade Quilt	Megan McClung		\$50	\$50.00	Jerra Henricksen	\$25		\$5 item	
615	Stained Glass Lamp	David Wyman	andymen services for 4 hours, additional time \$35/hour	\$500	\$200.00	Jack Funderburg	\$40		\$10 item	
616	Handy Man Services	Gail Anderson, Southern Living		\$140	\$85.00	Pam Freeman	\$25		\$10 cert	x
617	Bountiful Um	Kathy Hopkins		\$90	\$60.00	Jack Funderburg	\$20		\$5 item	
618	Crocheted Afghan	Sue Schuckerman	black, white & grey	\$65	\$65.00	Linda Flieg	\$15		\$5 item	
619	Handmade Afghan	Cobra Electronics		\$100	\$100.00	Bob McCue	\$25		\$5 item	
701	Cobra Radar/Laser Detector	Zane Salons		\$230	\$70.00	Juan Velasquez	\$30		\$10 item	
702	Zanno's Haircut & Style	Key Hunt	aircut and style, gratutines not included	\$100	\$45.00	David Davis	\$15		\$5 item	
703	Digital Portable Photo Album	Deinor Health & Wellness		\$85	\$35.00	Monica Sanjurjo	\$15		\$5 item	
704	Fitness Club Membership	Friend of Mutual Ground	month all-inclusive membership (judy - see booklet for details)	\$540	\$60.00	Karen Johnson	\$50		\$10 cert	x
705	Cardinal Tote Bag	Doneileen Designs		\$20	\$20.00	Robbie Graham	\$10		\$5 item	
706	Blue & Silver Foil Beaded Necklace	Doneileen Designs		\$55	\$25.00	Zabelini	\$10		\$5 item	
707	Diamond Jewelry Certificate	Diamond Mart, St. Charles	be used toward merchandise only, no expiration, can be used at St Chas	\$100	\$35.00	Monica Sanjurjo	\$25		\$5 cert	x
708	Mary Kay Basket	Barbara Nichols	# Naperville	\$80	\$35.00	Marli Garbe	\$10		\$5 item	
709	Vill for Individual or Couple	Law Offices of Gary B. Hurt	includes Living Will and Durable Power of Attorney for Health	\$250	\$140.00	Sandy Sargs	\$50		\$10 cert	x
710	Movies, Music, Photos & More	Key Hunt	2 off start fee and 1 month free at 3150 North Aurora Rd	\$170	\$70.00	Pam Clemens	\$20		\$10 item	
711	Curves, Eola & North Aurora Rds	Curves, Aurora		\$115	\$20.00	Marli Garbe	\$20		\$10 cert	x
712	Necklace & Earring Set	Terri Samuelson		\$40	\$45.00	Monica Sanjurjo	\$10		\$5 item	
713	One Hour Massage	Massage Envy	Just be used at Oswego location - 1770 Douglas Rd, expires 1/20/10	\$78	\$60.00	Beth Johnson	\$15		\$5 cert	x
714	Mother of Pearl Purse	Key Hunt		\$50	\$40.00	Chery Dickson	\$10		\$5 item	
715	Bella Tressa Haircut & Style	Bella Tressa		\$65	\$25.00	Heather Fenning	\$15		\$5 cert	x
716	Green & Crystal Quartz Necklace	Doneileen Designs		\$75	\$40.00	Jaime Garcia	\$15		\$5 item	
717	Relax and Rejuvenate	Mavis Bates, Inner Harmony Acupuncture and Oriental Medicine	sessions of facial rejuvenation, acupuncture or Tui Na Chinese Massage, o expiration	\$350	\$320.00	Rene Cruz	\$75		cert & \$10 item	x
718	Manicure Basket	Illusions Hair and Nail Saloon		\$70	\$35.00	Pam Freeman	\$15		\$5 item	
719	Straighten Out Your Hair	Tres Chic Salon		\$125	\$50.00	Elizabeth Bernones	\$25		\$5 item	
720	Curves - 3 months	Curves, North Aurora	months at Randall & Oak (includes orientation fee)	\$272	\$272	Did NOT SELL	\$35	\$10 cert	\$10 cert	x
721	Sandra Webster Jewelry	Sandra Webster, Marlene Deck		\$105	\$105.00	Danielle Deck	\$40		\$10 item	x
722	Bring the Gym to You	Destination Fitness		\$400	\$40.00	Tracy Wents	\$40		\$10 cert	x
723	Welcome Doggie Basket	Jim & Marli Garbe	400 package	\$70	\$60.00	Terri Carpenter	\$15		\$5 item	
724	Salon Mission Hair Care	Salon Mission, Oswego	log training CD, dog book, toys, etc	\$100	\$50.00	Jerre Henricksen	\$20		\$5 item	

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☆ Raffles & Games of Chance Tickets ☆
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Buy chances for raffles and games.
\$10 each, 6 for \$50 or 13 for \$100.

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Cash Bowl
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Donated by Mutual Ground Board of Directors.
Drawing for the \$750 prize will be held at 10:15 PM.

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Jewelry/Purse Raffle
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Drawing at 10:15pm.
BUY A CHANCE TO WIN:

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GOLD HOOP EARRINGS (VALUE: \$425)
with interchangeable gem stones
Donated by Linda Healy
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WHITE GOLD/FLOWER PENDANT NECKLACE (VALUE: \$1400)
with $\frac{3}{4}$ " pave diamond flower pendant (total wt- $\frac{1}{2}$ carat)
Donated by Friends of Mutual Ground
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MEN'S STEINHAUSEN WATCH (VALUE \$300)
COACH PURSE (VALUE \$328)
Donated by Debbie White & Nuage Jewelers
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PATRICIA LOCKE BRACELET (VALUE: \$185)
Silver squares containing stones of aqua, green, purple, pink and blue
Donated by V Hollis Jewelers
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Wine Raffle
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Donated by Susan & John Boehme
Buy a chance to win a special bottle of wine.
Drawing at 10:15pm.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ►
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization	Employer Identification number
	MUTUAL GROUND INC	36-2921680
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 418 OAK AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. AURORA, IL 60506	INTERNAL REVENUE SERVICE

Check type of return to be filed (file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A

<input type="checkbox"/> Form 4720	NOV 16 2009
<input type="checkbox"/> Form 5227	
<input type="checkbox"/> Form 8069	
<input type="checkbox"/> Form 8470	

RECEIVED

DOWNERS GROVE, IL

DEBORAH WHITE

- The books are in the care of ► 418 OAK AVENUE - AURORA, IL 60507
Telephone No. ► 630-897-8989 FAX No. ► _____
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year _____ or
► tax year beginning JUL 1, 2008, and ending JUN 30, 2009 .

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)