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Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2008

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

**Open to Public
Inspection**

A For the 2008 calendar year, or tax year beginning 7/01/08 and ending 6/30/09

B Check if applicable: <input 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. See Specific Instructions.	C Name of organization CONCERT SINGERS OF CARY, INC	D Employer identification number 56-1751440
		Number and street (or P O box, if mail is not delivered to street address) Room/suite PO BOX 1921	E Telephone number 919-678-1009
		City or town, state or country, and ZIP + 4 CARY NC 27512-1921	F Group Exemption Number _____

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ▶ _____

I Website: ▶ WWW.CONCERTSINGERS.ORG

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Organization type (check only one) — 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **107,290**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21															
Revenue	1	Contributions, gifts, grants, and similar amounts received															52,731																										
	2	Program service revenue including government fees and contracts															34,124																										
	3	Membership dues and assessments															8,924																										
	4	Investment income															4,336																										
	5a	Gross amount from sale of assets other than inventory																																									
	5b	Less cost or other basis and sales expenses																																									
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)																																									
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>																																									
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)																																									
	6b	Less direct expenses other than fundraising expenses																																									
	6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																																									
	7a	Gross sales of inventory, less returns and allowances																																									
	7b	Less cost of goods sold																																									
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																																									
	8	Other revenue (describe ▶ <u>SEE STATEMENT 2</u>)															7,175																										
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8															107,290																										
	Expenses	10	Grants and similar amounts paid (attach schedule)																																								
11		Benefits paid to or for members																																									
12		Salaries, other compensation, and employee benefits															1,000																										
13		Professional fees and other payments to independent contractors															2,900																										
14		Occupancy, rent, utilities, and maintenance															16,557																										
15		Printing, publications, postage, and shipping															4,742																										
16		Other expenses (describe ▶ <u>SEE STATEMENT 3</u>)															72,180																										
17	Total expenses. Add lines 10 through 16															97,379																											
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)															9,911																										
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)															113,767																										
	20	Other changes in net assets or fund balances (attach explanation) <u>SEE STATEMENT 4</u>															-25,755																										
	21	Net assets or fund balances at end of year. Combine lines 18 through 20															97,923																										

Part II Balance Sheets If total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	109,623	96,906
23	Land and buildings		
24	Other assets (describe ▶ <u>SEE STATEMENT 5</u>)	4,144	3,723
25	Total assets	113,767	100,629
26	Total liabilities (describe ▶ <u>SEE STATEMENT 6</u>)	0	2,706
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	113,767	97,923

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

Form **990-EZ** (2008) 11

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Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	X	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a _____		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved ▶ 38b _____		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 ▶ 39a _____		
b	Gross receipts, included on line 9, for public use of club facilities ▶ 39b _____		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed ▶ NONE		
42a	The books are in care of ▶ G. DONALD CARISS Telephone no ▶ 919-954-7276 5612 ENOREE LANDE Located at ▶ RALEIGH, NC ZIP + 4 ▶ 27616-5777		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
			X
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If "Yes," was the related organization(s) a section 527 organization?		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

Total number of other employees paid over \$100,000 **0**

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

Total number of other independent contractors each receiving over \$100,000 **0**

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: *G. Donald Cariss* Date: *12/2/09*
 Type or print name and title: *G. Donald Cariss, Treasurer*

Paid Preparer's Use Only

Preparer's signature: **EMILY J. MILLS, CPA** Date: **11/25/09** Check if self-employed: Preparer's Identifying Number (See instr.): **P00412235**

Firm's name (or yours if self-employed), address, and ZIP + 4: **JOYCE AND COMPANY, CPA**
104 BRADY CT
CARY, NC 27511 EIN: **56-2202813** Phone no: **919-466-0946**

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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.")						
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						
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						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
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	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%
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 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"/>		

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.")	31,077	47,842	42,624	57,867	61,655	241,065
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		30,252	29,815	30,458	34,124	124,649
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	7,190					7,190
6 Total. Add lines 1-5	38,267	78,094	72,439	88,325	95,779	372,904
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)	38,267	78,094	72,439	88,325	95,779	372,904

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	38,267	78,094	72,439	88,325	95,779	372,904
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,363	2,444	4,199	6,658	4,336	20,000
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2,363	2,444	4,199	6,658	4,336	20,000
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)	7,190	5,000	9,170	6,683	7,175	35,218
13 Total support. (Add lines 9, 10c, 11, and 12)	47,820	85,538	85,808	101,666	107,290	428,122

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	87.1023 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	86.3036 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	4.6716 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	3.3177 %

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

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

20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART III, LINE 12 - OTHER INCOME DETAIL

\$ 35,218

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments**

<u>Description</u>	<u>Amount</u>
MEMBERSHIP DUES	\$ 8,924
TOTAL	\$ 8,924

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

<u>Description</u>	<u>Amount</u>
REIMBURSEMENTS	\$ 5,750
ADVERTISEMENT	1,425
TOTAL	\$ 7,175

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
ADVERTISEMENT READERSHIP COSTS	\$ 2,948
EXPENSES	
INSURANCE	783
MUSIC AND ROYALTIES	4,969
EQUIPMENT AND SOFTWARE	152
SUPPLIES	2,738
POSTAGE	1,458
DUES & SUBSCRIPTIONS	600
SUBCONTRACTORS	51,476
TELEPHONE	692
WEBSITE	538
BANK FEE	439
SCHOLARSHIP COMMITTEE	134
MISCELLANEOUS	3,168
PRINTING	2,085
TOTAL	\$ 72,180

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
UNREALIZED LOSS ON INVESTMENTS	\$ -25,755
TOTAL	\$ -25,755

Federal Statements

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS RECEIVABLE	\$ 160	\$
INVENTORIES FOR SALE OR USE	3,984	3,723
	<u>4,144</u>	<u>3,723</u>

Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$	\$ 2,706
		<u>2,706</u>

Federal Statements

Statement 7 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

ORGANIZED FOR THE PURPOSE OF ENRICHING ITS COMMUNITY THROUGH THE PERFORMANCE OF OUTSTANDING VOCAL MUSIC FROM ALL TRADITIONS; TO REWARD ITS AUDIENCES WITH CHORAL PROGRAMS THAT ELEVATE, PROVOKE, AND ENTERTAIN; AND TO ENTHUSIASTICALLY SUPPORT AND PROMOTE THE PERFORMANCE ARTS IN THE RESEARCH TRIANGLE REGION

Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Description

CONCERT SINGERS OF CARY HAD FOUR CONCERTS THIS YEAR. THE FALL CONCERT PSALMS FROM AROUND THE WORLD A MANY DIFFERENT LANGUAGES. THE HOLIDAY POPS CONCERT WAS DONE WITH THE TRIANGLE WIND ENSEMBLE AND WAS WELL RECEIVED. THE SPRING CONCERT INCLUDED BACH'S EASTER ORATORIO AND PIECES BY HAYDN AND PALESTINA. WE WERE ACCOMPANIED BY A BAROQUE CHAMBER ORCHESTRA. WE FINISHED OUR SEASON WITH "AN AMERICAN CELEBRATION". THIS CONCERT INCLUDED RANDALL THOMPSON. WE WERE ACCOMPANIED AGAIN BY THE TRIANGLE WIND ENSEMBLE. THE CARY CHILDREN'S CONCERT CHOIR (C4) PRESENTED TWO MARVELOUS CONCERTS AND PARTICIPATED IN THE TOWN OF CARY'S "TINSEL TOWN CONCERT". THIS CHOIR PROVIDES THE YOUNG PARTICIPATES WITH ALL THE SKILLS AND EXPERIENCES THAT ARE CONDUCTIVE TO A LIFE TIME OF MUSIC MAKING. A NUMBER OF MEMBERS HAVE GONE ON TO MORE ADVANCED CHOIRS AND PARTICIPATION IN HIGH SCHOOL CHORUS'S.

Form **8868**
(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

► **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 <small>File by the due date for filing your return See instructions</small>	Name of Exempt Organization CONCERT SINGERS OF CARY, INC	Employer identification number 56-1751440
	Number, street, and room or suite no. If a P O. box, see instructions. PO BOX 1921	
	City, town or post office, state, and ZIP code For a foreign address, see instructions. CARY NC 27512-1921	

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

- | | | |
|--------------------------------------|--|------------------------------------|
| <input type="checkbox"/> Form 990 | <input checked="" type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

● The books are in the care of ► **G. DONALD CARISS**

Telephone No. ► **919-954-7276** 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 **5/15/10**, 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 **7/01/08**, and ending **6/30/09**.

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	\$	0
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	\$	0
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	\$	0

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

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

Form **8868** (Rev 4-2009)