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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4847(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasur

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

Open to Public

A	For th	ne 2009 ca	alendar	year, or tax year beginning 1/1 , 2009, and e	nding	12/3	1/2009	, 20	
В	Check if	applicable	Please	C Name of organization Osceola Grange			D Empl	loyer identification nu	ımber
		change	uso IRS label or	Doing Business As			01	6022320)
	Name c	-	print or	Number and street (or P O box if mail is not delivered to street address) Roo	m/suite		E Telep	phone number	
	Initial re		typa. See	route 1			(207) 483-2255	5
_	Termina		Specific Instruc-	Crty or town, state or country, and ZIP + 4					
	☐ Amended return tions. Harrington< Maine 04643 G Gross receipts \$								
		on pending	F Nan	ne and address of principal officer:		H/a) to this	a group refu	um for affiliates? Ves	Ø No
	фризав	on poneing	Edwin	Bearse			•	s included? Tes	□мо
ī	Tax-ex	empt status	s. D 5	501(c) (990 < (insert no.)				a list. (see instruction	
J	Websi	ite: ▷				H(c) Group (•	•
ĸ	Form of	organization	Corpo	oration ☐ Trust ☐ Association ☑ Other ▷ L. Year of fo		1950		of legal domicile. Me	
P	and the	Summ	ary						
_	1			the organization's mission or most significant activities: G	range				
	'	Dilony Co	3001120	and organization of modern of mode digitaloant activities.					
Activities & Governance					·				
Ē				•••••••••••••••••••••••••••••••••••••••					
ove	2	Check this	box ⊳	f the organization discontinued its operations or disposed of more than	1 25% of it	s net asse	ets.		
Ğ	1			ng members of the governing body (Part VI, line 1a)			3	1	25
88				pendent voting members of the governing body (Part VI, lin	 ne 1b)	• •	4		0
Ϋ́				employees (Part V. line a)	, .	• •	5		0
åct				volunteers (agrimate in a dessary)		• •	6		10
•				Business revenue from Part VIII, column (C), line 12.			7a		0
	b	Net unrel	lated bu	usiness taxable income from Form 990-T, line 34.			. 7b	,	0
				1 2 2010		Prior Ye	ar	Current Year	
_	8	Contribut	tions ar	nd grants (Part VIII, line 1h)					
n	9	Program	service	e revenue Rart Ve line 29)					
Revenue				me Part VIII, column (A), lines 3, 4, and 7d)					
Œ				Dort VIII and John (A) limbs E Col Co Co 400 and 44-1					
				dd lines 8 through 11 (must equal Part VIII, column (A), line 12)		·		
	13	Grants a	nd sımı	lar amounts paid (Part IX, column (A), lines 1-3)					
	1			or for members (Part IX, column (A), line 4)	. L				
Expenses	1		-	ompensation, employee benefits (Part IX, column (A), lines 5-10)	1				
ĕ				draising fees (Part IX, column (A), line 11e)	<u> </u>				
Ä	b	Total fund	draising	expenses (Part IX, column (D), line 25) >					
	17	Other ex	penses	(Part IX, column (A), lines 11a-11d, 11f-24f)					
				Add lines 13-17 (must equal Part IX, column (A), line 25).					
	19	Revenue	less exp	penses. Subtract line 18 from line 12					
oto or					Begin	ming of Cu	urrent Yea	r End of Year	
SSOt	20	Total ass	ets (Pa	rt X, line 16)					
Not Asso Fund Bab	21		•	Part X, line 26)	.				
	4.4			and balances. Subtract line 21 from line 20.	L				
list	irt W		ature (
				perjury, I declare that I have examined this return, including accompanying se, correct, and complete Peclaration of preparer (other than officer) is base					
œ:		, -)	1.1	$-\cdot$, $P(\lambda)$		ı	1		
Sig	_		ature of c	the Charles			Lune e	_ 23 , 22)	0_
Χle	re	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N. E.			Spar	- 1 <u>/</u>	_	
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	or prot	name and title	وحد	Jecr	e a	ry	
		+′		Date	Check i	f T	Drono1	I Idontifus a sussition	
		Preparer' signature		Date	self-		(see instru	s identifying number uctions)	
Paid	_		r		employe	ᅄᄼᆈ			
'	parer's	Firm's na	me (or vo	ours \	+	leini		•	
Use	Only	if self-em address,	ployed),	>		EIN Phone n	D (<u> </u>	
Ma	v the			return with the preparer shown above? (see instructions)		Phone no	· ·	. Yes	No
									
1.0	Lu49(uy Mutani	urape7	work Reduction Act Notice, see the separate instructions.	С	at. No 11	282Y	Form \$50	(2009)

- CATTI					Page 2			
Pa	Statement of Program Ser	vice Accomplishments						
1	Briefly describe the organization's m	ission:						

2	Did the organization undertake any sthe prior Form 990 or 990-EZ?				☐ Yes ☐ No			
	If "Yes," describe these new service							
3	Did the organization cease conducti services?	ng, or make significant change		cts, any program	☐ Yes ☐ No			
	If "Yes," describe these changes on							
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.							
∜a	(Code:) (Expenses \$				•			
			-					
4b	(Code:) (Expenses \$							
		•••••						
		····						
		·						
4c	(Code:) (Expenses \$	including grants of	of \$) (Revenue \$)			
					•			
		•••••••						
4d	Other program services. (Describe in (Expenses \$ include	Schedule O.) ng grants of \$) (Revenue \$)				
4e	Total program service expenses							

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) crganizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		
0	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
0	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
0	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
0	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	5	13	 	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	145		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		
16 ⊲-7	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	1	

Unice	Checklist of Required Schedules (Continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	246		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	246		ļ <u>.</u>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.			

G.C.	164 Statements Regarding Ower IKS Fillings and Lax 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			
Ď	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b	l		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
	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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	225		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	35		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a		6а		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	රේව		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	79		
8	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
2	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	95		
10	Section 501(c)(7) organizations. Enter:			
2	initiation rees and suprial definibations institutes on that vin, into 12.			
_ (b) ⊲ ∢	are controlled included on the first order and the papers and the first order admitted			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a 5	aloos into the intrinsing of characters			
b 10-	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a		

policy, and financial statements available to the public.

	990 (2009)			Page (
Ra	Governance, Management, and Disclosure For each "Yes" response to lines 2 through for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, Schedule O. See instructions.	7b b , or c	elow chang	, an jes i
Sec	tion A. Governing Body and Wanagement			
000	Table M. Covering body and management		Yes	No
4-5	Enter the number of voting members of the governing body		108	100
jo jo	Enter the number of voting members that are independent	1	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1	1	
4	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct	-	 	
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	İ	1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	_	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	<u> </u>	
6		6		
_		-	 	
8 61	Does the organization have members, stockholders, or other persons who may elect one or more members	7a		i
ь.	of the governing body?	7b	 	
_		10	-	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:	8a	1	1
a	The governing body?	86		\vdash
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	_00		
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a	1	Ì
Sec	Rion B. Policies (This Section B requests information about policies not required by the Int		L	Ь
	renue Code.)	J. I. i.a.		
			Yes	No
10=	Does the organization have local chapters, branches, or affiliates?	10a	-100	
	Does the organization have local chapters, branches, or affiliates?			\vdash
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		1
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			t-
	form?	11		
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		ł
		1		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		ĺ
13	Does the organization have a written whistleblower policy?	13		$\overline{}$
14	Does the organization have a written document retention and destruction policy?	14		
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?			
а		15a		İ
	Other officers or key employees of the organization	15%		
	If "Yes" to line 15a or 15b, 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?	16a		1
5-	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
U	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			l
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure		· · · · · · · · · · · · · · · · · · ·	
17	List the states with which a copy of this Form 990 is required to be filed ▷			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501)			
	available for public inspection. Indicate how you make these available. Check all that apply.	ا درد)رد	Orny)	
	Own website Another's website Upon request			
	— Own Hobbito — Another S Hobbito — Opon request			

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: D Eart VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Mighest Compansated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- o List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - o List all of the organization's current key employees. See instructions for definition of "key employee."
- o 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.
- o 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.
- o 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 current officer, director, or trustee.										
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Positi	on (d	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
			_				_			
							_			
				_						
										·
										,

	(A) Name and title	(B) Average	Positi	on le		C) k all	that ap	(Vla	(D) Reportable	(E) Reportable	(F) Estimated		d
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	from from related organizations		compensation	com fr org	nount of other pensation the janization d relate anization	of on on on ed
										1			
1b	Total							▷					
2	Total number of individuals (including but in reportable compensation from the organization from the organization)		to the	ose	list	ed a	above) wh	no received mo	ore than \$100,0	00 in		
												Yes	Мо
3	Did the organization list any former office employee on line 1a? If "Yes," complete S								e, or highest c	ompensated	3		
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.										4		
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp olete	oen: Sch	satı edu	on 1 Ile J	from a	any uch	unrelated org person	anızatıon for	5		
_Se	ction B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization	ompensate	d ind	epe	nde	ent d	contra	ctor	rs that receive	d more than \$1	00,000	of	
	(A) Name and business add	iress							(B) Description of s	ervices	(C Compe		
2	Total number of independent contractors (imore than \$100,000 in compensation from					to 1	those	liste	ed above) who	received			

Par	t 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
န် န	Пa	Federated campaigns 1a				
ž 5	b	Membership dues 1b				
8, S	C	Fundraising events 1c				
를 함	ď	Related organizations 1d				
S. E	e					
Contributions, gifts, grants and other similar amounts	1	All other contributions, gifts, grants,				
혈		and similar amounts not included above				
g 5	g	Noncash contributions included in lines 1a-1f: \$			i	
<u>ت</u> ق	h	Total. Add lines 1a-1f		×		
9	1	Business Code				
Ē	2a					
æ	b		··			
ջ	C					
Š	ď			 		
Ë	e			 		
Program Service Revenue	Y	All other program service revenue .				
	9	Total. Add lines 2a–2f				
	3	Investment income (including dividends, interest, and				
	}	other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	_					
	1	Gross Rents				
		Less: rental expenses				
	4	Rental income or (loss) Net rental income or (loss)				
	1	5,00				
	/a	Gross amount from sales of assets other than inventory (ii) Securities (ii) Other				
	10	Less: cost or other basis and sales expenses				
		Gain or (loss)				
		Net gain or (loss)				
ø	1	Gross income from fundraising				
Revenue	Odi	events (not including \$	1			
ě e		of contributions reported on line 1c).				
_	Ì	See Part IV, line 18	,			
Other	b	Less: direct expenses b			:	
õ	C	Net income or (loss) from fundraising events .	· · · · · · · · · · · · · · · · · · ·			
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
	b	Less: direct expenses b				
	C	Net income or (loss) from gaming activities ▷				
	10a	Gross sales of inventory, less				
		returns and allowances a				
	b	Less: cost of goods sold b				
	- c	Net income or (loss) from sales of inventory				
	-	THIS COLUMN TO THE TOTAL TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO				
	b				i	
	6	All other groups				
	•	All other revenue				
	12	Total revenue. See instructions.				

Part IX Statement of Functional Expenses

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

	All other organizations must complete col	umn (A) but are no	ot required to com	plete columns (B),	(C), and (D).
	not include amounts reported on lines 65, 85, 95, and 105 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				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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 8	Other salanes and wages				
9 10	and section 403(b) employer contributions) Other employee benefits				
11 a	Fees for services (non-employees): Management				
_	Legal				
d e f	Lobbying				
9 12	Other				
13 14	Office expenses				
15 16 17	Royalties				
18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				·
19 20	Conferences, conventions, and meetings . Interest				
21 22	Payments to affiliates				
23 24	Other expenses ltemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed				
a	5% of total expenses shown on line 25 below.)				
b					
d e f	All other expenses				
25 26	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ▷ ☐ If following SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Řart X Balance Sheet (A) Beginning of year (B) End of year 1 1 2 2 3 3 4 B Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 7 7 8 9 10a other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 11 11 12 Investments-other securities. See Part IV, line 11 12 13 13 Investments—program-related, See Part IV, line 11 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 18 18 Deferred revenue 19 19 20 20 21 Liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 Secured mortgages and notes payable to unrelated third parties . . . 23 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities. Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 . . . 26 Organizations that follow SFAS 117, check here ightharpoonup and Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117, check here > ŏ and complete lines 30 through 34. 30 Assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds `` **8** 33 33 Total liabilities and net assets/fund balances 34

Ŗа	t XII Financial Statements and Reporting					
			Yes	No		
1	Accounting method used to prepare the Form 990: Cash Cash Coural Cother					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	1				
	Schedule O.					
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a					
	Were the organization's financial statements audited by an independent accountant?	20				
	If "Yes" to line 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?					
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.	Ì				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	,		' 		
	issued on a consolidated basis, separate basis, or both:	1				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
3 a	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?	3a				
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			-		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b				

Form **990** (2009)