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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

Open to Public Inspection

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 \$500,000 and total
assets less than \$1,250,000 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

ΑI	For	the	2009 calendar year, or tax year beginning	, 2009, an	d ending	_			
В	Check	ıf ap	plicable Please C Name of organization			D E	Employer identification number		
		dres: ange							
	_	-	hange print or TNS CHARITABLE FUND			0.3	3-0526716		
\vdash	1 _{Ini}	type. Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone n							
\vdash	-1	rmina	ation See 11480 COMMERCE PARK DRIVE	}		(703) 453-8300		
\vdash	⊢ Алг	ende	Specific City or town, state or country, and ZIP + 4			 			
\vdash	_ A⊅	um plica					Group Exemption		
		nding Sa	ction 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts mus	et attach	G Account		ethod X Cash Accrual		
		000	a completed Schedule A (Form 990 or 990-EZ).	or arraon	Other (s	_			
					H Check ▶		If the organization is not		
	Nob	cit	e: >				ach Schedule B (Form 990,		
				a)(1) or 527	990-EZ, (•		
				~					
	Chec		 If the organization is not a section 509(a)(3) supporting organization is 0-EZ or Form 990 return is not required, but if the organization chooses to 	•	•	•	· · · · · · · · · · · · · · · · · · ·		
			5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 9	· · · · · · · · · · · · · · · · · · ·			128,886.		
_	rt l	_	Revenue, Expenses, and Changes in Net Assets or Fu						
re	1	_				1	128,886.		
	1		Contributions, gifts, grants, and similar amounts received						
	2		Program service revenue including government fees and contracts			2			
	3		Membership dues and assessments			3			
	4	_	Investment income		• • • • • • • •	4			
	5	_	Gross amount from sale of assets other than inventory			- 1			
						ا ـ ـ			
ō		С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from	•		5c			
Revenue	6	_	Special events and activities (complete applicable parts of Schedule G). If any amount is from gamin	• • • • •	`				
eve	ļ	а	Gross revenue (not including \$ of contribut	ions		1			
Œ			reported on line 1) 6a		1,967.				
			Less direct expenses other than fundraising expenses			.	-21,967.		
%0%0 %0%0	۱.		Net income or (loss) from special events and activities (Subtract line 6b fro	m line 6a) A.I.C	~ ". }	6c	-21,907.		
◡	'		Gross sales of inventory, less returns and allowances						
SD.		D	Less: cost of goods sold						
e o		С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		• • • • • • •	7c			
	8		Other revenue (describe		 .'}	8	106,919.		
	9		Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	CII 2	··· •	9	104,500.		
M	10		Grants and similar amounts paid (attach schedule) 7, 2, 2010 AT			10	104,300.		
3	11		Benefits paid to or for members		· · · · · -	11	0.		
SOUNED!	12 13		Salaries, other compensation, and employee benefits		· · · ·	12			
(E)	١.,		Professional fees and other payments to independent contractors		–	13			
Expe	14		Occupancy, rent, utilities, and maintenance	• • • • • • • • •	••••	14			
_	15		Printing, publications, postage, and shipping		••••	15			
	16					16	104,501.		
	17		Total expenses. Add lines 10 through 16	·····	··· •	17 18	2,418.		
Assets	18		Excess or (deficit) for the year (Subtract line 17 from line 9)		••••-	'°	2,410.		
SS	19					.	81,897.		
Ā	١,,		end-of-year figure reported on pnor year's return)		••••	19	01,057.		
Net	20		Net assets or fund balances at end of year. Combine lines 18 through 20			20	84,315.		
0.	rtl	_	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,0			21			
- 6	125	_	(See the instructions for Part II.)	(A) Beginnin		<u> </u>	(B) End of year		
22	_	a e b	savings, and investments ATCH 4		81,897.	22	157, 944.		
23						23	201/0441		
24		tha-	and buildings ATCH 5)	 	_	24	1.		
25					81,897.	_	157,945.		
26	T.	otal ntal	l liabilities (describe ► ATCH 6)			26	73,630.		
27			issets or fund balances (line 27 of column (B) must agree with line 21)	' 	81,897.		84,315.		

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2009) PAGE 1

Form 990-EZ (2009)			03-	0526/1	ხ Page 2
Part III Statement of Program Service Accomplishment	nents (See the instruct	tions for Part III.)		Ex	penses
What is the organization's primary exempt purpose? ATCH 7					for section and 501(c)(4)
Describe what was achieved in carrying out the organization's e	exempt purposes. In a clea	r and concise mann	er,	organizati	ons and section
describe the services provided, the number of persons benefited, ar				4947(a)(1 for others) trusts, optional)
28 IN 2009, TNS CHARITABLE FUND HELD A G	OLF TOURNAMENT TO	O RAISE MONEY	,	1	<u>, </u>
AND AWARENESS FOR FAIRFAX CASA, A CHI			_		
ORGANIZATION WITHIN THE COMMUNITY.	BUNDIN 5 CHARTIME				
25 200			<u> </u>		25 000
(Grants \$ 35,000.) If this amount inclu	des foreign grants, check he	re ▶	28a		35,000
29 IN 2009, TNS CHARITABLE FUND HELD A G	_		<u></u>		
AND AWARENESS FOR CHILDREN'S MIRACLE	NETWORK, A CHILD	REN'S			
CHARITABLE ORGANIZATION WITHIN THE CO	MMUNITY.				
(Grants \$ 22,000.) If this amount inclu	des foreign grants, check he	re	29a		22,000
30 ATTACHMENT 8	g. g. m., oou		- 1 200	+	,
ATTACHMENT 0					
			—		
17.500		·	<u> </u>		
(Grants \$ 47,500.) If this amount inclu	des foreign grants, check he	re	30a		47,500
31 Other program services (attach schedule)		· · · · · · · · · · · · · · · · · · ·			
(Grants \$) If this amount inclu	des foreign grants, check he	re ▶ [31a		
32 Total program service expenses (add lines 28a through 31a			▶ 32		104,500
Part IV List of Officers, Directors, Trustees, and Key Em				setructions	
Elot of officers, phesicolo, frastees, and hey Em		<u> </u>		ributions to	· · · · · · · · · · · · · · · · · · ·
(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	employee t	enefit plans &	(e) Expense account and
	devoted to position	enter -0)	deferred o	ompensation	other allowances
	_				
ATTACHMENT 9		-0-	1	-0-	-0-
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Yes No Social Scription of each activity Wers and process Yes No Social Scription of each activity Wers any changes made to the organization of process Yes No He changes Wers any changes made to the organization of each activity Wers any changes made to the organization of the changes Wers any changes made to the organization of the changes Wers any changes made to the organization of the changes Wers any changes made to the organization of the changes Wers any changes made to the organization of the changes Wers and the changes	Part	Other Information (Note the statement requirements in the instructions for Part V.)			
description of each activity. Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes. If the organization had income from business activities, such as those reported on lines 2, 6s, and 7s (among others), but not reported on Form 991-7, attach a statement explaning why the organization do not report the income on Form 990-7 a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy lax requirements? By the organization did not organization and organization did not report the income on Form 990-7 and 10 to the organization did not report the income on Form 990-7 and 10 the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy lax requirements? By the organization did not prove the did not report the income on Form 990-7 and 10 the organization have unrelated business gross income of \$1,000 or more or was it subject to section 603(e) endergo a liquidation, dissolution, termination, or significant dosposition of net assets during the year? If Yes, complete spolicable parts of Schedule N. By the organization berome transport or notice, and searched in the instructions ▶ 37a but the organization borrow from, or make any losers to, any officer, director, frustee, or key employee or were any such loars made in a prior year and still outstanding at the end of the pend outwoered by this return? By Carlos Totol (Privation and privation or manufacture) and enter the total amount involved. By Section 501(e)(3) and 501(e)(4) organizations. Did the organization engage in any section 4955 ▶ 50 cross recepts, included on line 9, or public use of club facilities. By Carlos Totol (Privation and that the transaction has not been reported on any of the organization privation organization managers or disqualified persons during the year under section 4912 to 2015 the organization and the privation organi				Yes	No
Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	33`				,,
the changes If the organization had income from business activates, such as those reported on lines 2, 6a, and 7a (among others), but net reported on Form 990-T, attach a statement explaining why the organization driven the reported on Form 990-T attach a statement explaining why the organization driven the reported on Form 990-T attach a statement explaining why the organization driven the statement of the organization of the control of 335 and 1,000 or more or was it subject to section 6033(e) oncice, reporting, and proxy tax requirements? b If "Yes," has if filed a tax return on Form 990-T for the year? b If "Yes," has if filed a tax return on Form 990-T for the year? b Dut the organization organization delego applicable parts of Schedule N. 27a Enter amount of policide applicable parts of Schedule N. b If "Yes," complete Schedule L. Part II and enter the total amount involved		description of each activity	33		
15 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 why the organization did not report the income on Form 990.T ab Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 603(g) hotize, reporting, and proxy tax requirements? b If "Yes," has it lifed a tax return on Form 990-T for this year? 5 Did the organization undergo a liquidation, dissolution, termination, or significant desposition of net assets during the year? If "Yes," complete applicable parts of Schedule N. 17 Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ [37a] 18 Did the organization berrow from, or make any loans to, any officer, director, instee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved. 19 Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on line 9 10 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ 11 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 wesses benefit transaction during the year or is it 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 organizations prior Forms 990 or 990-E27 "Yes," complete Schedule L, Part I 11 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 12 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 13 Section 501(c)(3) an	34				
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any such loans made in a prior year and still outstanding at the end of the period covered by this return? b If Yes, "complete Schedule L, Part II and enter the total amount involved	37 a				
any such loans made in a prior year and still outstanding at the end of the period covered by this return? 1	b	Did the organization file Form 1120-POL for this year?	37b		
b If "Yes," complete Schedule L, Part II and enter the total amount involved. 398 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 B Gross receipts, included on line 9, for public use of club facilities 39a 39a 39b 39a	38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
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				0-F7	

Part VI	Section 501(c)(3) organizations and section 4947(and complete the tables for lines 50 and 5	a)(1) nonexempt cha	exempt charital ritable trusts mu	ble trusts only. st answer questi	All se ons 46	ction -49b
46 Did t	the organization engage in direct or indirect po	olitical campaign activiti	es on behalf of o	r in opposition to		Yes No
	lidates for public office? If "Yes," complete Sche				46	X
47 Did t	the organization engage in lobbying activities? I	f "Yes," complete Schedu	ile C, Part II		47	Х
	e organization a school as described in section				48	X
	the organization make any transfers to an exem				49a	X
b If "Ye	es," was the related organization a section 527	organization?			49b	
50 Com	plete this table for the organization's five high- loyees) who each received more than \$100,000	est compensated emplo	yees (other than	officers, directors,		
(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 & deterred compensation	acc	Expense ount and allowances
NONE				_		
f Total	I number of other employees paid over \$100,00	00 ▶ NOì	_ <u> </u> NE	<u> </u>	l	
<u></u> .	0,000 of compensation from the organization. If (a) Name and address of each independent contractor paid in			of service	(c) Com	pensation
NONE						
d Tota	Il number of other independent contractors rece		NON			
	Under penalties of perjury, I declare that I have examined to					
	and belief, it is true, correct, and complete Declaration of	preparer (other than officer) is t				
	Mulal M. Mu Careta Signature of officer Type or print name and title	preparer (other than officer) is l		11-17-2-10 ate		
Sign Here	Mulal 1. Mr Curefy Signature of officer Director/Secretary Type or print name and title Preparer's 1 72	Date	Check if	Preparer's identifying n	,	
	Mulail 1. Im Curefy Signature of officer Director/Secretary Type or print name and title Preparer's signature 1334 1334 1344 1354 1	Date ///7//	Check if self-employed ▶	Preparer's identifying in P0 0 3 2 6	055	
Here Paid	Signature of officer Director/Secretary Type or print name and title Preparer's signature Firm's name (or yours if self-employed), ALVAREZ & MARSAL	Date ////7// TAXAND, LLC	Check If self-employed	Preparer's identifying in P00326	055 7630	e instructions)
Here Paid Preparer's Use Only	Mulal 1. Mr Curefy Signature of officer Director/Secretary Type or print name and title Preparer's signature Firm's name (or ALVAREZ & MARSAL	Date ////7// TAXAND, LLC 00 SAN FRANCISCO, CA 941	Check If self-employed	Preparer's identifying in P00326 N	055 7630	e instructions)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

TN	5 CF	IAKITABLE							<u> </u>		26/16	
Pa	rt I	Reason fo	or Public Chari	ty Status (All organ	izations m	rust comp	lete this	part.) Se	e instruc	ctions.		
The	orga	nızatıon is no	ot a private found	dation because it is: (F	or lines 1	through 11,	, check or	nly one bo	x.)			
1		A church, c	onvention of chu	rches, or association	of churche:	s described	l ın sectio	n 170(b)	(1)(A)(i).			
2		A school de	scribed in <mark>sectio</mark>	on 170(b)(1)(A)(ii). (At	tach Sched	lule E.)						
3		A hospital o	r a cooperative	hospital service organ	ization des	cribed in se	ction 170)(b)(1)(A)	(iii).			
4		A medical	research organiz	zation operated in co	njunction	with a hos	pital des	cribed in	section	170(b)(1)	(A)(iii). E	nter the
		hospital's na	ame, city, and sta	ate:								
5		An organiza	ation operated fo	or the benefit of a col	llege or un	iversity ow	ned or o	perated	by a gove	ernmental	unit desc	cribed in
		section 170	(b)(1)(A)(iv). (C	omplete Part II)	_	-			-			
6				vernment or governme	ental unit de	escribed in s	section 1	70(b)(1)(A)(v).			
7	X		_	lly receives a substan						or from t	the gener	al public
		_		(1)(A)(vi). (Complete F	-	• •		_			J	•
8				d in section 170(b)(1)	•	mplete Par	t II)					
9	П		-	lly receives: (1) more		-	-	m contrib	outions, m	nembersh	up fees. a	nd aross
		_		ted to its exempt fun							•	_
				ment income and un		-		•				
			-	after June 30, 1975.				•		,		
10			•	nd operated exclusive					•			
11			-	and operated exclus	-	-	•				to carry	out the
				ublicly supported orga	-		-				-	
				at describes the type o					-	•	, , .	
		а Птур		Type II ' c		e III - Fund		-			pe III - Ot	her
е				ertify that the organiz			•	-	rectly by		•	
	ш	-	=	on managers and oth				•				•
			r section 509(a)(-			, ,		· 3 - · · · ·			
f				I a written determina	tion from	the IRS tha	atıtısa	Type I.	Type II. o	r Type III	supportu	าต
		-	n, check this box						,,,,,,,			"
g	l	_		the organization acce					the			• —
_		following pe			,,,,,	,			••			
				or indirectly controls	. either al	one or toa	ether wit	h persor	s describ	oed in (ii)	Γ	Yes No
		•		erning body of the sup		_				(,	11g(i)	
			_	erson described in (i) a							11g(il)	
			•	of a person described		above?					11g(iii)	
h	1		=	ation about the suppo		•					. [
		of supported	(ii) EIN	(iii) Type of organization	1	organization	(v) Did v	ou notify	(vi) I	s the	(vii) Amo	ount of
• •		anization		(described on lines 1-9	ın col (i) lı	sted in your	the organ	nization in	organizat	tion in col	supp	
				above or IRC section (see instructions))	governing	document?		of your port?		zed in the S?		
				,,,,	Yes	No	Yes	No	Yes	No		
							<u> </u>		 			
									ļ			
		-			-		 	 		 		
							† - · · · · · · · · · · · · · · · · · · 	 		 	-	
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Tota	al											

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Part II	Support	Sched	ule for	Organization	s Described	in S	Sections	170(b)(1)(A)(i	iv) and	170(b)(1)(A)(vi)
	(Comple	te only i	f you cl	necked the bo	x on line 5, 7	7, or 8	8 of Part	l.)			

Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	64,560	35,757	65,120	108,980	128,886	403,303
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 through 3	64,560	35,757	65,120.	108,980	128,886	403,303
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)						143,145
6	Public support. Subtract line 5 from line 4						260,158
	tion B. Total Support					· · · · · ·	
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	64,560	35,757	65,120.	108,980	128,886	403,303
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						403,303
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First five years. If the Form 990 is forganization, check this box and stop here	<u> </u>	<u> </u>	d, third, fourth,	or fifth tax yes	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Supp						
14	Public support percentage for 2009 (lin		•	. , , , , , , , , , , , , , , , , , , ,			64.51%
15	Public support percentage from 2008						86.84%
16a	331/3% support test - 2009. If the o	_					
	this box and stop here. The organization						
b	331/3% support test - 2008. If the o	-					
	check this box and stop here. The orga						
17a	10%-facts-and-circumstances test - 20	-					
	or more, and if the organization me						
	Part IV how the organization meets to			•	•		upported
b	organization	2008. If the org	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,	
	15 is 10% or more, and if the orga						•
	Explain in Part IV how the organization				•	•	publicly
	supported organization						▶ 🔲
18	Private foundation. If the organization						
	instructions	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	<u></u>	<u> </u>	▶ 🔲
	- 					chedule A (Form 99	

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.)

	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Tot
1	Gifts, grants, contributions, and						
	membership fees received (Do not include			ļ			
	any "unusual grants ")			1			
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		·			 	<u> </u>
•	benefit and either paid to or expended on				li.		
	•						
_	the value of services or facilities	<u> </u>	 		-	 	
5							
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5	<u> </u>	-				
7 a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons Amounts included on lines 2 and 3		ļ <u></u>			<u> </u>	
Ü	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from					'	
	line 6)			<u> </u>			
<u>sec</u>	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Tot
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income (less					+	
b	`						
	section 511 taxes) from businesses						
	acquired after June 30, 1975				 		
	Add lines 10a and 10b	<u> </u>					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or					1	
	loss from the sale of capital assets						•
	(Explain in Part IV.)		L				
3	Total support. (Add lines 9, 10c, 11,						
	and 12)						
4	First five years. If the Form 990 is for		n's first, second,	third, fourth, or	fifth tax year a	s a section 501(c)(3)
	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8			nn (f))		15	
	Public support percentage from 2008 Sche					16	
16				<u> </u>			-
	-					17	
Sect	tion D. Computation of Investmen		f) divided by line 1	3 column (f))			
Sect	tion D. Computation of Investmer Investment income percentage for 2009 (li	ne 10c, column (
Sect 17 18	tion D. Computation of Investmer Investment income percentage for 2009 (In Investment income percentage from 2008	ne 10c, column (Schedule A, Part	III, line 17			18	nd line
Sect 17 18	Investment income percentage for 2009 (li Investment income percentage from 2008 33 1/3% support tests - 2009. If the o	ne 10c, column (Schedule A, Part rganization did r	III, line 17 not check the box			18 re than 331/3%, a	
Sect 17 18 19a	Investment income percentage for 2009 (li Investment income percentage from 2008 33 1/3% support tests - 2009. If the o 17 is not more than 33 1/3%, check the	ne 10c, column (Schedule A, Part rganization did r his box and sto	III, line 17		d line 15 is mores	e than 331/3%, a supported organiz	ation 🕨
Sect 7 8 9a	Investment income percentage for 2009 (Investment income percentage from 2008 33 1/3% support tests - 2009. If the of 17 is not more than 33 1/3%, check the 33 1/3% support tests - 2008. If the org	ne 10c, column (Schedule A, Part rganization did r his box and sto janization did not	III, line 17 not check the box p here The organic check a box on		d line 15 is more s as a publicly 9a, and line 16 is	e than 331/3%, a supported organizes more than 331/3	ation ► %, and
ect 17 18 19a b	Investment income percentage for 2009 (li Investment income percentage from 2008 33 1/3% support tests - 2009. If the o 17 is not more than 33 1/3%, check to 33 1/3% support tests - 2008. If the org line 18 is not more than 331/3%, check	ne 10c, column (Schedule A, Part rganization did r his box and sto janization did not this box and si	III, line 17	x on line 14, an anization qualifie line 14 or line 19 ganization qualifie	d line 15 is mores as a publicly 9a, and line 16 is	e than 331/3%, a supported organizes more than 331/3 supported organizes	ation ► %, and ation ►
17 18 19a	Investment income percentage for 2009 (Investment income percentage from 2008 33 1/3% support tests - 2009. If the of 17 is not more than 33 1/3%, check the 33 1/3% support tests - 2008. If the org	ne 10c, column (Schedule A, Part rganization did r his box and sto janization did not this box and si	III, line 17	x on line 14, an anization qualifie line 14 or line 19 ganization qualifie	d line 15 is mores as a publicly ga, and line 16 is as a publicly o, check this bo	e than 331/3%, a supported organizes more than 331/3 supported organizes	eation > %, and eation > ctions >

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

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ACTIVITIES	
AND	
EVENTS	
SPECIAL	
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PART	
990EZ,	
FORM	

DIRECT EXPENSES	21,967.	21,967.
DESCRIPTION	GOLF TOURNAMENT EXPENSES	TOTALS

-21,967.

NET INCOME -21,967.

03-0526716

FORM 990EZ, PART I - GRANTS AND SIMILAR AMOUNTS PAID

IN EXCESS OF \$5000

RECIPIENT NAME AND ADDRESS

CHARITABLE ORGANIZATION WITHIN THE COMMUNITY. TOURNAMENT TO RAISE MONEY AND AWARENESS FOR TOURNAMENT TO RAISE MONEY AND AWARENESS FOR IN 2009, TNS CHARITABLE FUND HELD A GOLF CHILDREN'S MIRACLE NETWORK, A CHILDREN'S IN 2009, TNS CHARITABLE FUND HELD A GOLF FAIRFAX CASA, A CHILDREN'S CHARITABLE ORGANIZATION WITHIN THE COMMUNITY PURPOSE OF GRANT OR CONTRIBUTION TOTAL CONTRIBUTIONS PAID ATTACHMENT 2 RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT

22,000

AMOUNT

35,000

4103 CHAIN BRIDGE RD ST 200

FAIRFAX CASA

FAIRFAX, VA 22030-4107

CHILDREN'S MIRACLE NETWORK

GRANTS PAID

205 WEST 700 SO

SALT LAKE CITY, UT 84101

57,000

FORM 990EZ, PART I - OTHER EXPENSES

OTHER EXPENSES

1.

TOTAL

1.

FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS

 DESCRIPTION
 BEGINNING
 END

 OF YEAR
 OF YEAR

 CASH
 81,897.
 157,944.

TOTALS <u>81,897.</u> <u>157,944.</u>

ATTACHMENT	
$\alpha \cdots \alpha \cdots \alpha \cdots \alpha \cdots \alpha \cdots$	· •

FORM 990EZ, PART II - OTHER ASSETS

DESCRIPTION

END OF YEAR

ROUNDING

1.

TOTALS

1.

FORM 990EZ, PART II - TOTAL LIABILITIES

DESCRIPTION

END OF YEAR

ACCOUNTS PAYABLE

73,630.

TOTALS

73,630.

FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO RAISE MONEY AND AWARENESS FOR CHILDREN'S CHARITABLE ORGANIZATIONS WITHIN THE COMMUNITY.

FORM 990EZ, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

ATTACHMENT 8

PROGRAM SERVICE ACCOMPLISHMENT 3

IN 2009, TNS CHARITABLE FUND, FROM RECOMMENDATIONS FROM TNS, INC. EMPLOYEES, DONATED TO 42 CHARITIES WITHIN THE COMMUNITY IN AMOUNTS RANGING FROM \$500 TO \$2,000 FOR AN OVERALL CONTRIBUTION OF \$47,500.

EXPENSE ACCT

CONTRIBUTIONS

AND OTHER ALLOWANCES

BENEFIT PLANS

TO EMPLOYEE

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