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201774789

Form

Department of the Treasury

# 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)

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

OMB No 1545-0047 2009 Open to Public

|   | nai Hevenue       |                         | The organization may have to use a copy of this fetam to suitely s   |                                       |                         |                                  |
|---|-------------------|-------------------------|--|---------------------------------------|-------------------------|----------------------------------|
|   |                   |                         | ear, or tax year beginning , and ending  |                                       | 1                       |                                  |
|   | Check if applicat | PRI Agui                | C Name of organization   |                                       | D Emplo                 | yer identification number        |
|   | Address change    | label or                | Franklın's Charge, Inc.  |                                       | 1 27                    | 1774700                          |
|   | Name change       | print or                | Doing Business As  | Dr t :                                |                         | 1774789                          |
| ا                                       | Initial return    | type.<br>See            | Number and street (or P O box if mail is not delivered to street address)  | Room/suite                            | E Teleph                | none number                      |
| <u> </u>                                |                   | Specific                | 604 West Main Street   |                                       | <del> </del>            | 241 240                          |
| <u></u>                                 | Termination       | Instruc-                | City or town, state or country, and ZIP + 4  |                                       | G Gross reco            | eipts\$ 241,248                  |
| ، لــــــــــــــــــــــــــــــــــــ | Amenaed return    |                         | Franklin TN 37064  |                                       | ┩、                      |                                  |
| $\prod$                                 | Application pend  | <sub>sing</sub> F Nam   | e and address of principal officer   |                                       | 1 ' '                   | a group return for               |
| <u>ء</u>                                |                   |                         |  |                                       | affiliat<br>H(b) Are al | affiliates .                     |
|   |                   |                         |  |                                       | includ                  |                                  |
| သို့<br>(၂)                             |                   |                         |  |                                       | If *No.                 | attach a list (see instructions) |
| <del></del>                             | Tax-exempt        |                         | 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527  |                                       | -                       |                                  |
|   | Website.          |                         | franklinscharge.com  |                                       | H(C) Group              | exemption number                 |
|   | Type of organiz   |                         |  | L Year of formation                   |                         | M State of legal domicile        |
| <u>P</u>                                | art I             | Summa                   |  |                                       |                         | <del></del>                      |
|   |                   |                         | the organization's mission or most significant activities  |                                       |                         |                                  |
| ë                                       |                   |                         | purpose is preserving America's threatened Ci  |                                       |                         |                                  |
| auc                                     |                   |                         | elds in Williamson County, Tennessee and the   |                                       |                         |                                  |
| ern                                     |                   | _                       | ublic about Civil War events in Middle Tennes  |                                       |                         |                                  |
| Activities & Governance                 | 2 Chec            | ck this box I           | If the organization discontinued its operations or disposed of more that   | n 25% of its net a                    | ssets                   |                                  |
| 8                                       |                   |                         | g members of the governing body (Part VI, line 1a)   |                                       | 3                       | 21                               |
| ies                                     | 4 Num             | ber of indep            | pendent voting members of the governing body (Part VI, line 1b)  |                                       | 4                       | 21                               |
| Σ                                       | 5 Total           | I number of             | employees (Part V, line 2a)  |                                       | 5                       | _ 0                              |
| Act                                     | 6 Total           | I number of             | volunteers (estimate if necessary)   |                                       | 6                       |                                  |
|   | 7a Tota           | l gross unre            | lated business revenue from Part VIII, column (C), line 12   |                                       | 7a                      |                                  |
|   | b Net u           | unrelated bu            | usiness taxable income from Form 990-T, line 34  |                                       | 7b                      | 0                                |
|   | <b> </b>          |                         | 1. (D-4)/(II 1 4/5)  | Prior Y                               | ear<br>94,746           | Current Year                     |
| e                                       | l .               |                         | d grants (Part VIII, line 1h)  |                                       |                         | 211,740                          |
| Revenue                                 | 1 -               |                         | e revenue (Part VIII, line 2g)   |                                       | L7,534                  | <u>29,505</u>                    |
| æ                                       | 1                 |                         | me (Part VIII, column (A), lines 3, 4, and 7d)   |                                       | 2                       |                                  |
|   | 1                 |                         | Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | 1-                                    | 12 202                  | 2/1 2/0                          |
|   | 1                 |                         | add lines 8 through 11 (must equal Part VIII, column (A), line 12)   | <u> </u>                              | L2,282                  | 241,248                          |
|   | 1                 |                         | lar amounts paid (Part IX, column (A), lines 1–3)  |                                       |                         | ·                                |
|   | 1                 | -                       | or for members (Part IX, column (A), line 4)   |                                       |                         | <del></del>                      |
| es                                      |                   |                         | compensation, employee benefits (Part IX, column (A), lines 5–10)  | _                                     |                         |                                  |
| enses                                   |                   |                         | draising fees (Part IX, column (A), line 11e) RECEIVED   |                                       |                         |                                  |
| Expe                                    |                   |                         | g expenses (Part IX, column (D), line 25)  | -                                     | 27 000                  | 206 604                          |
| ш                                       | 1 17 0010         | er expenses             | (Part IX, column (A), lines 11a-11d, 11f-2d)   |                                       | 37,083                  | <u>396,624</u>                   |
|   | 1                 |                         | (Part IX, column (A), lines 11a–11d, 11f–24f) Add lines 13–17 (must equal Part IX, column (A), line-25) \$2010 (column (A), line 25)   | 23                                    |                         | <u>396,624</u>                   |
| <u> </u>                                |                   | enue less e             | The state of the s | — — — — — — — — — — — — — — — — — — — |                         | -155,376                         |
| Assets or                               | 20 Tota           | Laccote /Dr             | art X, line 16)  |                                       | 24,199                  | End of Year<br>1,296,545         |
| Asse                                    | 21 Tota           | ,                       | Part X, line 26)   |                                       | 54,671                  | 692,393                          |
| Net /                                   | 27 101a           | •                       | nd balances Subtract line 21 from line 20  |                                       | 59,528                  | 604,152                          |
| _                                       | art II            |                         | ire Block  |                                       | 001020                  | 004,132                          |
| <u> </u>                                | artii             |                         | ilties of perjury, I declare that I have examined this return, including accompanying sched  | lulas and statements                  | and to the h            |                                  |
|   |                   | and belief,             | it is true, correct, and complete. Declaration of preparer (other than officer) is based on a  | I information of whic                 | h preparer has          | s any knowledge                  |
| Sig                                     | ,n                | <b>L</b>                | Emi Dora   |                                       |                         | ા જિંદી                          |
| He                                      | - :               | Signat                  | ure of officer   |                                       |                         |                                  |
| 110                                     |                   | Signat                  | ure of officer ERNIL BROOM IRES  | bent                                  | Date                    | 1                                |
|   |                   | Type                    | or print name and title  |                                       | ·                       |                                  |
|   |                   |                         | . ()   |                                       |                         | Preparer's identifying number    |
| Pa                                      | id                | Preparer's<br>signature | Tatras arono   | Chec<br>self-                         |                         | (see instructions)               |
|   | eparer's          | aignature               | 7  | 9-10 sell-<br>emp                     | loyed 🕨 🛂               | 3 1000 (177)                     |
|   | e Only            |                         | e (or yours Parsons & Associates, CPAs   |                                       | EIN J                   | <u> 26-1865984</u>               |
|   | ,                 | if self-empl            |  |                                       | Phone                   | ·                                |
| <del></del>                             |                   | address, ar             | 1101111111, 111 37004  |                                       | no                      | <u> 615-794-4313</u>             |
|   |                   |                         | return with the preparer shown above? (see instructions)   |                                       |                         | Yes No                           |
| For<br>DA/                              | r Privacy A       | ct and Pap              | erwork Reduction Act Notice, see the separate instructions.  |                                       |                         | Form <b>990</b> (2009            |

| Part III Statement of Program Service Accomplishments  1 Briefly describe the organization's mission Primary purpose is preserving America's threatened Civil War battlefields in Williamson County, Tennessee and the education of the public about Civil War events in Middle Tennessee.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 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   | Form 990 (2009) Franklin's Cl             | narge, Inc.                                   | <u> 20-1774789</u>                         | Page <b>2</b> |
|--|---|---|--|---------------|
| 1 Briefly describe the organization's mission Primary purpose is preserving America's threatened Civil War battlefields in Williamson County, Tennessee and the education of the public about Civil War events in Middle Tennessee.  2 Dd the organization undertake any agraficant program services during the year which were not listed on the proof Form 990 or 990 EZ? If Yes, describe these new services on Schedule O 3 Dd the organization cause conducting, or make significant changes in how it conducts, any program services? If Yes, 'describe these changes on Schedule O 4 Describe the example purpose achievements for each of the organization's three largest program services by expenses Section 501(63) and 501(64) gramizations and section 4847(2(1) trusts are required to report the amount of grants and alocations to others, the total expenses, and revenue, if any, to reach program service toported  4a (Code ) (Expenses \$ 388, 740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   | Part III Statement of Program             | n Service Accomplishments                     |  |               |
| Primary purpose is preserving America's threatened Civil War hattlefields in Williamson County, Tennessee and the education of the public about Civil War events in Middle Tennessee.  2 Dot the cognization undertake any significant program services during the year which were not letted on the public and so the public of the cognization coase conducting, or make significant changes in how it conducts, any program services?  If Yes, describe these changes on Schedule O  Doesnite the exempt purpose achievements for each of the organizations three largest program services by expenses.  Sector 501(c)(3) and 301(c)(4) organizations and sector 4947(a)(1) tusts are required to report the amount of grants and allocation to thors, the tolle expenses, and revenue, if any, for each program service expended.  4a (Code ) (Expenses \$ 388,740 including grants of \$ ) (Revenue S Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue S )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue S )  4d (Code ) (Expenses \$ including grants of \$ ) (Revenue S )  4d (Code ) (Expenses \$ including grants of \$ ) (Revenue S )  | Briefly describe the organization's mis   | sion  |  |               |
| attlefields in Williamson County, Tennessee and the education of the public about Civil War events in Middle Tennessee.  2 Dot the organization undertake any significant program services during the year which were not listed on the prior from 990 or 990-E2?  If Yes, 'Seasche these rewer wervices on Schedule O  3 Dot the organization cease conducting, or make significant changes in how it conducts, any program services?  If Yes 'S N  Yes S N  Yes S N  Yes S N  Yes S N   | Primary purpose is p                      | oreserving America's t                        | threatened Civil War                       |               |
| of the public about Civil War events in Middle Tennesse.    Did the organization undertake any significant program services during the year which were not listed on the purp from 900 or 905-E27  | battlefields in Will                      | iamson County, Tennes                         | ssee and the education                     |               |
| 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If "Yes," Secretion these new services on Schedule O  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes is describe these changes on Schedule O  4 Describe the exempt purpose achievements for each of the organizations three largest program services by expenses Section 501(6) and 501(6) forganizations and section 4947(a)(f) 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 \$ 388,740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )  | of the public about                       | Civil War events in M                         | Middle Tennessee.                          |               |
| the prior Form 990 or 990-EZ*   Yes   N If Yes, 'Generic helpses new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services?   Yes   N If Yes   Yes   Yes   N If Yes   Yes   Yes   N If Yes   Yes   Yes   Yes   N If Yes   Yes | -   |   | <u> </u>                                   |               |
| If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program services S  If "Yes," describe these changes on Schedule O  Pyes, "describe these changes on Schedule O  Observation to example purpose achievements for each of the organization's three largest program services by expenses Section \$01c(x) and \$01c(x) organizations and section \$497(x)(1) tusts are required to report the amount of grants and allocations to others, the total expenses and revenue, if any, for each program services reported  4a (Code ) (Expenses \$ 388,740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Observation of historic public awareness of the local history.  | 2 Did the organization undertake any sign | gnificant program services during the year v  | which were not listed on                   |               |
| 4d Other program services (Describe in Schedule O)  4d Other program services \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O)  4d Other program services (Describe in Schedule O)  4d Other program services (Describe in Schedule O)  (Expenses \$ including grants of \$ ) (Revenue \$ )   | the prior Form 990 or 990-EZ?             |   |  | Yes X No      |
| services?  If Yes X No. 1 No.  |   |   |  |               |
| Il "Yes." describe these changes on Schedule O  4 Describe the exempt jumpose 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 \$ 388,740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code   ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code   ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )  | 3 Did the organization cease conducting   | g, or make significant changes in how it cor  | nducts, any program                        |               |
| 4 Describe the exempt purpose achievements for each of the organizations 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 \$ 388,740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code )(Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code )(Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )  | =   |   |  | ☐ Yes X No    |
| 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 \$ 388,740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ }  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ }  4d (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   | If "Yes," describe these changes on S     | Schedule O                                    |  |               |
| allocations to others, the total expenses, and revenue, if any, for each program service reported  4a (Code  | 4 Describe the exempt purpose achieve     | ements for each of the organization's three   | largest program services by expenses       |               |
| 4a (Code )(Expenses \$ 388,740 including grants of \$ ) (Revenue \$ Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code )(Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code )(Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   | Section 501(c)(3) and 501(c)(4) organ     | nizations and section 4947(a)(1) trusts are r | equired to report the amount of grants and |               |
| Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$   4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$   4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   |   |   |  |               |
| Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$   4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$   4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   |   |   |  |               |
| Preservation of historic Civil War battlefields and aiding in the public awareness of the local history.  4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   | 4a (Code ) (Expenses \$                   |   |  | )             |
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| 4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$  4d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )   | diding in the pastic                      | 3 4 011022 01 0110 111                        | <b>.</b>                                   |               |
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| 4d Other program services (Describe in Schedule O ) (Expenses \$ including grants of \$ ) (Revenue \$ )  | , , ,                                     |   |  |               |
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| (Expenses \$ including grants of \$ ) (Revenue \$ )  |   |   |  |               |
|  |   |   |  |               |
| 4e Total program service expenses ► 388,740  |   |   | ) (Revenue \$                              |               |
|  | 4e Total program service expenses ▶       | 388,740                                       |  |               |

| Pa  | irt IV Checklist of Required Schedules   |                 |  |  |
|-----|--|-----------------|--|--|
|     |  |                 | Yes  | No   |
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"            |                 |  | ı  |
|     | complete Schedule A  | _1_             | X  |  |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors?   | _2_             | Χ  |  |
| 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               |  | X  |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete                  |                 |  |  |
| -   | Schedule C, Part II  | 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? 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                 |                 |  |  |
| U   | 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               |  | 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? If "Yes," complete Schedule D, Part II                     | 7               |  | X  |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"      |                 |  |  |
| Ü   | complete Schedule D, Part III  | 8               |  | Х  |
| 9   | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part            |                 |  |  |
| 9   | X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"                 |                 |  |  |
|     | complete Schedule D, Part IV   | 9               |  | X  |
| 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              |  | Х  |
| 11  | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,              |                 |  |  |
| • • | VII, VIII, IX, or X as applicable  | 11              | Х  |  |
| _   | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete          | •               |  |  |
|     | Schedule D, Part VI  |                 |  |  |
|     | 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                                 |                 |  |  |
| _   | 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                                |                 |  |  |
| _   | Did the organization report an amount for other assets related 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  |                 |  | 1  |
| _   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X    |                 |  |  |
|     | Did the organization report an amount of other hashines in acts, the last 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              | X_   | $\vdash \vdash$                                  |
| 12Δ | Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No        | 12              | 23_  | ├──  |
|     | If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  12A X  |                 |  |  |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E                        | 13              |  | Х  |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States?                              | 14a             |  | X  |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,            | . 10            |  | 1  |
|     | business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I                | 14b             |  | Х  |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any             | - 12            |  | <del>                                     </del> |
|     | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II                         | 15              |  | Х  |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance          | <u> </u>        |  | <del> </del>                                     |
|     | to individuals located outside the United States? If "Yes," complete Schedule F, Part III                                | 16              |  | X  |
| 17  | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services              | <u> </u>        |  | <del> </del>                                     |
|     | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   | 17              |  | X  |
| 18  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on              | <del>'</del>    | <del>                                     </del> | + **   |
| -   | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II   | 18              |  | X  |
| 19  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?             | <del>  ''</del> | <del>                                     </del> | +~   |
|     | If "Yes," complete Schedule G, Part III  | 19              | 1  | X  |
| 20_ | Did the organization operate one or more hospitals? If "Yes," complete Schedule H  | 20              | <b>†</b>   | X  |

| Pa          | art IV Checklist of Required Schedules (continued)   |      |  |      |
|-------------|--|------|--|------|
|             |  |      | Yes  | No   |
| 21          | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations  |      |  |      |
|             | in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II   | 21   |  | X    |
| 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   |  | X    |
| 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   |  | _X   |
| 24a         | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than  |      |  |      |
| <b>-</b> 7u | \$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  |  | X    |
| b           | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b  |  |      |
|             | Did the organization maintain an escrow account other than a refunding escrow at any time during the year  |      |  |      |
| С           | to defease any tax-exempt bonds?   | 24c  |  |      |
| -           | The base of the base of the base of the bands outstanding at any time during the year?   | 24d  |  |      |
| d<br>250    | The state of the s |      |  |      |
| 25a         | with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a  |  | Х    |
| _           | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a   | 1    |  |      |
| Ü           | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or   |      |  | Ì    |
|             |  | 25b  |  | X    |
| 00          | 990-EZ? If "Yes," complete Schedule L, Part I  Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or   | 200  | <del>                                     </del> | 1 11 |
| 26          | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II   | 26   |  | Х    |
| ^-          | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,   | 20   |  | - 22 |
| 27          | substantial contributor, or a grant selection committee member, or to a person related to such an individual?  |      |  |      |
|             |  | 27   |  | Х    |
|             | If "Yes," complete Schedule L, Part III  | -21  | <del>                                     </del> | 1    |
| 28          | Was the organization a party to a business transaction with one of the following parties (see Schedule L,  | - 1  | 1  |      |
|             | Part IV instructions for applicable filing thresholds, conditions, and exceptions)   | 200  |  | v    |
| а           | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28a  | <del>                                     </del> | X    |
| b           | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete   | 001- |  | 1 77 |
|             | Schedule L, Part IV  | 28b  | <del> </del>                                     | X    |
| С           | An entity of which a current or former officer, director, trustee, or key employee of the organization (or a   |      | 1  |      |
|             | family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,  | 1    |  | 1,7  |
|             | Part IV  | 28c  | <del> </del>                                     | X    |
| 29          | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | 29   | ┼  | Х    |
| 30          | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified   |      |  | 1,,  |
|             | conservation contributions? If "Yes," complete Schedule M  | 30   | <del> </del>                                     | X    |
| 31          | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,  |      |  | .,   |
|             | Part I   | 31   | <del> </del>                                     | X    |
| 32          | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete   |      |  | 7.   |
|             | Schedule N, Part II  | 32   | ┼  | X    |
| 33          | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations   |      |  | 1,,  |
|             | 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,   |      |  | ١,,  |
|             | 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   |      |  | ١    |
|             | Schedule R, Part V, line 2   | 35   | <del> </del>                                     | 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   | 1    |  |      |
|             | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,   |      |  | 1    |
|             | Part VI  | _37  |  | X    |
| 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  | 38   | X  | ]    |

| Га        | It V Statements regularing other title range and tax a   |          |             |     | Yes          | No   |
|-----------|--|----------|-------------|-----|--------------|--|
| _         | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of   | 1 1      |             |     |              |  |
| 1a        | U.S. Information Returns Enter -0- if not applicable   | 1a       | 0           |     |              |  |
|           | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable   | 1b       | 0           |     |              |  |
| b         | Did the organization comply with backup withholding rules for reportable payments to vendors and rep   | oortable | <del></del> |     |              |  |
| С         | gaming (gambling) winnings to prize winners?   |          |             | 1c  |              | Х  |
| 20        | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  | ]        |             |     |              |  |
| 2a        | Statements, filed for the calendar year ending with or within the year covered by this return  | 2a       | 0           |     |              | 1  |
| ь         | If at least one is reported on line 2a, did the organization file all required federal employment tax return   | ns?      |             | 2b  |              |  |
|           | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see  |          |             |     |              |  |
|           | instructions)  |          |             |     |              |  |
| 3a        | Did the organization have unrelated business gross income of \$1,000 or more during the year covered   | d by     |             |     | ĺ            |  |
|           | 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  | L            |  |
| 4a        | the second secon | authorit | у           |     |              |  |
|           | over, a financial account in a foreign country (such as a bank account, securities account, or other fin   |          |             |     |              |  |
|           | 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 I   | Bank     |             |     |              |  |
|           | and Financial Accounts   |          |             |     |              | 1  |
| 5a        | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |          |             | 5a  |              | X  |
| b         | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction  |          |             | 5b  |              | X  |
| С         | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard  | arding   |             | İ   |              |  |
|           | Prohibited Tax Shelter Transaction?  |          |             | 5c  | <b></b>      | ļ  |
| 6a        | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the   | ne       |             |     |              |  |
|           | organization solicit any contributions that were not tax deductible?   |          |             | 6a_ |              | X  |
| b         | If "Yes," did the organization include with every solicitation an express statement that such contribution   | ons or   |             |     |              |  |
|           | gifts were not tax deductible?   |          |             | 6b  | <del> </del> | -  |
| 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 g  | goods    |             | _   |              |  |
|           | and services provided to the payor?  |          |             | 7a  |              | <del> </del> -                                   |
| b         | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | _        |             | 7b  | ├            | <del>                                     </del> |
| С         | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was<br>required to file Form 8282?  | ıs       |             | 7.  |              | ļ  |
|           | If "Yes," indicate the number of Forms 8282 filed during the year  | 7d ]     |             | 7c_ |              | <del>                                     </del> |
| a<br>e    | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p   |          | <del></del> | -   |              |  |
| ٠         | benefit contract?  | CISOIIA  | !           | 7e  |              |  |
| f         | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra  | act?     |             | 7f  |              | <del>                                     </del> |
| g         | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?   |          |             | 7g  |              | <del>                                     </del> |
| h         | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0   |          |             |     |              |  |
|           | required?  |          |             | 7h  |              |  |
| 8         | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting  |          |             |     |              | T -  |
|           | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring   |          |             | 1   |              |  |
|           | organization, have excess business holdings at any time during the year?   |          |             | 8   |              |  |
| 9         | Sponsoring organizations maintaining donor advised funds.  |          |             |     |              |  |
| а         | 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?   |          |             | 9b  | <u> </u>     | J  |
| 10        | Section 501(c)(7) organizations. Enter   | , ,      |             |     |              |  |
| a         | Initiation fees and capital contributions included on Part VIII, line 12   | 10a      |             | 4   | 1            |  |
| b         | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10b      | <del></del> | 4   |              |  |
| 11        | Section 501(c)(12) organizations. Enter.   | 1. 1     |             |     |              |  |
| a         | Gross income from members or shareholders  | 11a      |             | -   | 1            |  |
| þ         | Gross income from other sources (Do not net amounts due or paid to other sources against   |          |             |     |              |  |
| 12~       | amounts due or received from them )  | 11b      | <del></del> | 1   | 1            |  |
| 12a       | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form   | 1 1      |             | 12a | <del> </del> | ╄  |
| <u>_b</u> | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  | 12b      |             | .1  | 1            | 1  |

Form 990 (2009) Franklin's Charge, Inc. 20-1774789 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below. and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body 21 1b Enter the number of voting members that are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 5 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members 7a 7a of the governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following The governing body? 8a Χ Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Does the organization have local chapters, branches, or affiliates? Χ **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? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 11 X Describe in Schedule O the process, if any, used by the organization to review this Form 990 11a Х 12a 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 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 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 Χ 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? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply Own website | Another's website | X | 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

604 West Main St

TN 37064

Franklin

organization ▶ Franklin's Charge, Inc.

# 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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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

| (A)<br>Name and Title | (B)<br>Average               | Posi                              | tion (   | (C<br>check | call t       | that ap                      | (vlqc  | <b>(D)</b><br>Reportable                                       | (E)<br>Reportable  | (F)<br>Estimated   |
|-----------------------|------------------------------|-----------------------------------|----------|-------------|--------------|------------------------------|--------|--|--|--|
| Name and The          | Average<br>hours per<br>week | Individual trustee<br>or director |          | Officer     | Key employee | Highest compensated employee | Former | compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| ee attached List      |                              |                                   |          |             |              |                              |        | (  | ) (  | )  |
|                       |                              |                                   |          |             |              |                              |        |  |  |  |
|                       |                              |                                   |          |             |              |                              |        |  |  |  |
|                       | · .                          |                                   |          |             |              |                              |        |  |  |  |
|                       | - <del></del>                | _                                 |          |             |              |                              |        |  |  |  |
|                       |                              |                                   |          |             |              | <u> </u>                     |        |  |  |  |
|                       |                              | <u> </u>                          |          |             |              |                              |        | ··· · · · · · · · · · · · · · · · · ·                          |  |  |
|                       |                              | ļ                                 | _        |             | _            |                              |        |  |  |  |
|                       |                              | <u> </u>                          | ļ        |             | <u> </u>     |                              |        |  |  |  |
|                       |                              |                                   |          | _           | <br>         |                              |        |  |  |  |
|                       |                              | -                                 |          |             |              |                              |        | -  |  |  |
|                       |                              | $\downarrow$                      |          | _           |              |                              |        |  |  |  |
|                       |                              | 1                                 | ļ        |             | -            | <u> </u>                     |        |  |  |  |
|                       |                              |                                   |          | -           | _            |                              |        |  |  |  |
|                       |                              | -                                 | <u> </u> | _           |              | _                            | _      |  |  |  |
|                       |                              | -                                 | _        |             |              | <u> </u>                     | -      |  |  |  |
|                       |                              |                                   |          |             |              |                              |        |  |  |  |

| <u>Part</u> | VII Section A. Officers   | 1                                    | tees                              | , ĸe                  |             |              | yees                         | , an         | d Highest Compensated                          |  | <del></del>                   |   |        |
|-------------|---|--------------------------------------|-----------------------------------|-----------------------|-------------|--------------|------------------------------|--------------|--|--|-------------------------------|---|--------|
|             | (A)<br>Name and Title   | (B)<br>Average<br>hours per          | _                                 |                       |             | k all t      | hat a                        |              | ( <b>D)</b> Reportable compensation            | <b>(E)</b> Reportable compensation               | Estii<br>amo                  | F)<br>mated<br>ount of  |        |
| •           |   | week                                 | Individual trustee<br>or director | Institutional trustee | Officer     | Key employee | Highest compensated employee | Former       | from<br>the<br>organization<br>(W-2/1099-MISC) | from related<br>organizations<br>(W-2/1099-MISC) | compe<br>fror<br>orgar<br>and | ther<br>ensation<br>in the<br>nization<br>related<br>izations |        |
|             |   |                                      | Ö                                 | tee                   |             |              | nsatec                       |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             | <del>-</del> |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              | -            |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               | -   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   | ., .                                 |                                   |                       | -           |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             | · · · · · · · · · · · · · · · · · · ·   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             | _            |                              |              |  |  |                               |   |        |
| 1b -        | Total   |                                      |                                   | 1                     |             |              | 1                            | <b></b>      |  |  |                               | _   |        |
|             | Total number of individuals (in reportable compensation from                            | •                                    |                                   |                       | thos        | e lis        | ted a                        | ibov         | e) who received more than                      | \$100,000 in                                     |                               |   |        |
| 3 [         | Did the organization list any fe  | ormer officer, dir                   | ector                             | r or t                | ruste       | ee. k        | ev ei                        | mole         | ovee, or highest compensa                      | ted  |                               | Yes   | No     |
| 4 1         | employee on line 1a? If "Yes,"<br>For any individual listed on lin                      | " complete Sche<br>le 1a, is the sum | dule of re                        | J for                 | suc<br>able | h ind        | dıvidu<br>ipens              | ual<br>satio | on and other compensation                      | from   | 3                             | -   | Х      |
| 1           | the organization and related of individual  |                                      |                                   |                       |             |              |                              |              | ·  |  | 4                             | <u> </u>  | х      |
|             | Did any person listed on line<br>services rendered to the orga                          | nization? If "Yes,                   |                                   |                       |             |              |                              |              |  | )!   | 5                             |   | Х      |
| 1 (         | ion B. Independent Contract Complete this table for your fi compensation from the organ | ve highest comp                      | ensa                              | ited                  | ınde        | pend         | dent o                       | conti        | ractors that received more                     | than \$100,000 of                                |                               |   |        |
|             |   | (A)<br>d business address            |                                   |                       |             |              |                              |              | Descri   | (B)<br>otion of services                         |                               | (C)<br>Compensa   | ation  |
|             |   |                                      |                                   |                       | -           |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             |   |                                      |                                   |                       |             |              |                              |              |  |  |                               |   |        |
|             | Total number of independent more than \$100,000 in comp                                 |                                      |                                   |                       |             |              | ted to                       | tho          | se listed above) who recei                     | ved  |                               | 0   |        |
| DAA         |   |                                      |                                   |                       |             |              |                              |              |  |  | F                             | orm <b>99</b> 0   | (2009) |

| Section   Sect   | Pa       | <u>rt VI</u> | II Staten           | nent of Reve                          | nue                |             |               |                      |          |              |                  |
|--|----------|--------------|---------------------|---------------------------------------|--------------------|-------------|---------------|----------------------|----------|--------------|------------------|
| Second Content of Co   |          |              | •                   |                                       |                    |             | <del></del> . | (A)<br>Total revenue | function |              | under sections   |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | တ ကြ     | . 4 ~        | Fodorated ac-       | nnaigns                               | 12                 |             |               |                      | Tovenue  |              | 312, 313, 01 314 |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | ᇣ쐽       |              |                     |                                       |                    |             |               |                      | w.s. q   |              |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | PE       |              |                     |                                       |                    | <u>-</u>    |               |                      | <u>.</u> |              |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | rts,     |              | =                   |                                       |                    |             |               | _                    | · .,     | -            |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | <u>.</u> |              | =                   |                                       |                    | <u> </u>    |               | •                    | •        |              |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | Sil      |              | -                   |                                       | 1e                 |             |               |                      |          | 1            |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | 풀힐       | f            |                     |                                       | ļ                  |             |               |                      | ļ        |              |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | 은히       |              | and similar amounts | s not included above                  |                    | -           | 211,740       |                      | _        |              |                  |
| Bush. Code  29,505  29,505  29,505  3 Investment income (including dividends, interest, and other smilar amounts) 4 Income from investment of tax-exempt bond proceeds b 5 Royalties  6 Royalties  6 Rosa Rents b Less entil every c Petral income or (loss) d Net rental income or (loss) d Net rental income or (loss) b Less cold or other bise is alse sepan bise as alse as  | P        | _            |                     |                                       | -1f \$             | i           | _             |                      |          |              |                  |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal  6a Gross Rents b Less rental ergs c Rental income or (loss) 7a Gross amount form (i) Securities (ii) Other select assets other then inventory b Less cost or other base & sales ergs c Gain or (loss) 4 Net garn or (loss) 5 Royalties  10 A tel garn or (loss) 5 Less rental ergs c Gain or (loss) 6 Vet garn or (loss) 7 See Part IV, line 18 7 Degree of the select of the |          | h            | Total. Add line     | es 1a-1f                              |                    | <del></del> |               | 211,740              | )        |              |                  |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal  6a Gross Rents b Less rental ergs c Rental income or (loss) 7a Gross amount form (i) Securities (ii) Other select assets other then inventory b Less cost or other base & sales ergs c Gain or (loss) 4 Net garn or (loss) 5 Royalties  10 A tel garn or (loss) 5 Less rental ergs c Gain or (loss) 6 Vet garn or (loss) 7 See Part IV, line 18 7 Degree of the select of the | a        |              |                     |                                       |                    | <u>  [</u>  | Busn. Code    | ·                    |          |              |                  |
| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal  6a Gross Rents b Less rental ergs c Rental income or (loss) 7a Gross amount form (i) Securities (ii) Other select assets other then inventory b Less cost or other base & sales ergs c Gain or (loss) 4 Net garn or (loss) 5 Royalties  10 A tel garn or (loss) 5 Less rental ergs c Gain or (loss) 6 Vet garn or (loss) 7 See Part IV, line 18 7 Degree of the select of the | š        | 2a           | Symposi             | um                                    |                    | L           |               | 29,505               | 29,505   | <u> </u>     |                  |
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| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal  6a Gross Rents b Less rental ergs c Rental income or (loss) 7a Gross amount form (i) Securities (ii) Other select assets other then inventory b Less cost or other base & sales ergs c Gain or (loss) 4 Net garn or (loss) 5 Royalties  10 A tel garn or (loss) 5 Less rental ergs c Gain or (loss) 6 Vet garn or (loss) 7 See Part IV, line 18 7 Degree of the select of the | <u>.</u> | С            |                     |                                       |                    | L           |               |                      |          |              |                  |
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| 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal  6a Gross Rents b Less rental ergs c Rental income or (loss) 7a Gross amount form (i) Securities (ii) Other select assets other then inventory b Less cost or other base & sales ergs c Gain or (loss) 4 Net garn or (loss) 5 Royalties  10 A tel garn or (loss) 5 Less rental ergs c Gain or (loss) 6 Vet garn or (loss) 7 See Part IV, line 18 7 Degree of the select of the | ğ        | f            | All other progr     | am service reve                       | nue                | Γ           |               |                      |          |              |                  |
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| other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6a Gross Rents b Less ential expc c Rental income or (loss) d Net rental income or (loss) b Less cost or other base & sales exps c Gain or (loss) d Net rental income or (loss) b Less cost or other base & sales exps c Gain or (loss) d Net gain or (loss) a Gross ancount from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities c Net nacome or (loss) from gaming activities c Net nacome or (loss) from gaming activities c Net nacome or (loss) from gaming activities b Less cost of goods sold c Net nacome or (loss) from sales of inventory Miscellaneous Revenue  11a b C c All Other revenue e Total. Add lines 11a-11d   |          |              |                     |                                       | dividend           | ds, interes | t, and        |                      |          |              |                  |
| A Income from investment of tax-exempt bond proceeds P Royalties  (i) Reai (ii) Personal  6a Gross Rents b Less renial exps c Rentalin or g(sos) d Net rental income or (loss) 7a Gross anount from sake of assets other than inventory b Less cost or other base & sales exps c Gain or (loss)  4 Net gain or (loss)  6a Gross income from fundraising events (not including \$ 6 contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less cost of goods sold c Net income or (loss) from gaming activities Fertures and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busin. Code  d All Other revenue e Total. Add lines 11a-11d   |          | •            |                     |                                       |                    |             | •             | 3                    | 3        | 3            |                  |
| Second Part   Company   Second Part   Seco   |          | 4            |                     | ,                                     | -exemp             | ot bond pro | ceeds >       |                      |          |              |                  |
| (i) Pear   (ii) Personal   |          |              |                     |                                       |                    |             | •             |                      |          |              |                  |
| Second       |          | •            | ,                   | (ı) Real                              |                    | (II) Pe     | rsonal        |                      |          | -            |                  |
| b Less rental exps c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets of a sales or other than inventory b Less cost or other base's sales exps c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) c Gross income from fundraising events (not including \$ c C Gain or (loss) sales of assets or other base's sales exps of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 b C Net income or (loss) from gaming activities  Less cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  d All other revenue e Total. Add lines 11a=11d   |          | 6a           | Gross Bents         | <del></del>                           |                    | · ·         |               |                      | * `      |              |                  |
| C Rental in cor (loss)   |          | _            |                     |                                       | $\overline{}$      |             |               | - /                  |          | ~            |                  |
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| Page of assets amount from sales of assets other than inventory  b Less cost or other bases & sales eyes  c Gain or (loss) d Net gain or (loss) d Net gain or (loss) soft contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events becomes the contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 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  Miscellaneous Revenue  11a b c d All other revenue e Total. Add lines 11a—11d   |          |              |                     |                                       | l-                 |             |               | · ·                  |          |              |                  |
| Sales of assets of the than inventory  b Less cost of other basis & sales eyis c Gain or (loss) d Net gain or (loss)  d Net gain or (loss)  a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b C Net income or (loss) from fundraising events See Part IV, line 19 a Cross income from gaming activities See Part IV, line 19 b Less direct expenses b C Net income or (loss) from gaming activities  To Rich income or (loss) from gaming activities  b Less cost of goods sold b C Net income or (loss) from sales of inventory  Miscellaneous Revenue Busin. Code  11a b C All other revenue e Total. Add lines 11a–11d   |          | _            |                     |                                       | <u> </u>           | (n) C       | Other         | ,                    |          | <del> </del> |                  |
| b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses b 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  Miscellaneous Revenue Busn. Code  11a b c d All other revenue e Total. Add lines 11a-11d   |          |              |                     | · · · · · · · · · · · · · · · · · · · | <del>-</del>       | (11)        | ,,,,,,        |                      | -        |              |                  |
| basis & sales exps  c Gain or (loss) d Net gain or (loss) Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 b Less cost of goods sold b c Net income or (loss) from gaming activities  Ita b C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  d All other revenue e Total. Add lines 11a-11d   |          | _            | 1                   |                                       |                    |             |               | `                    | ,        | ľ            |                  |
| c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18   |          | Ь            |                     |                                       |                    |             |               | -                    | ~ ~      |              |                  |
| d Net gain or (loss)  8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11a b c d All other revenue e Total. Add lines 11a–11d  | 1        | _            | •                   |                                       |                    |             |               |                      | `        |              |                  |
| 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a—11d  |          |              |                     |                                       | 1                  |             |               |                      |          |              |                  |
| (not including \$ of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d   |          |              | -                   | •                                     | Г                  |             |               |                      | ,        | <del> </del> | <del></del>      |
| of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11a b c d All other revenue e Total. Add lines 11a–11d  | ne       | ва           |                     | •                                     | ents               |             |               | -                    |          |              | :                |
| C Net income or (loss) from tundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d  | len/     |              |                     |                                       | .                  |             |               |                      | ļ:       |              |                  |
| C Net income or (loss) from tundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d  | Re       |              |                     |                                       |                    |             |               |                      |          |              | :                |
| C Net income or (loss) from tundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d  | er       |              |                     |                                       |                    |             |               |                      |          |              |                  |
| C Net income or (loss) from tundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d  | 뒫        |              |                     |                                       |                    |             |               | <u>*</u> *           |          |              |                  |
| See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d   |          | i            |                     |                                       |                    | events      |               |                      | ļ        |              |                  |
| 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  Miscellaneous Revenue  Busn. Code  11a b  c d All other revenue e Total. Add lines 11a–11d   |          | 9a           |                     |                                       | es                 |             |               | ,                    |          |              |                  |
| c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  d All other revenue e Total. Add lines 11a–11d   |          |              | See Part IV, line   | 19                                    | a                  |             |               |                      |          |              |                  |
| 10a Gross sales of inventory, less returns and allowances  b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a b c d All other revenue e Total. Add lines 11a–11d   |          | b            | Less direct ex      | xpenses                               | ьĹ                 |             |               |                      | *        |              |                  |
| returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a  b  c  d All other revenue  e Total. Add lines 11a–11d   |          | С            | Net income or       | r (loss) from gam                     | ning ac <u>t</u> i | ivities     | <b>&gt;</b>   |                      |          |              |                  |
| returns and allowances  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  11a  b  c  d All other revenue  e Total. Add lines 11a–11d   |          | 10a          | Gross sales o       | f inventory, less                     |                    |             |               |                      |          |              |                  |
| C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Code  D  All other revenue  Total. Add lines 11a–11d  |          |              | returns and al      | lowances                              | a                  |             |               | J                    |          |              |                  |
| Miscellaneous Revenue  Busn. Code  All other revenue  Total. Add lines 11a–11d  Busn. Code  Busn. Code  All other sevenue  Busn. Code  All other sevenue   |          | b            | Less cost of        | goods sold                            | b                  |             |               |                      | , ,      |              |                  |
| to the revenue to total. Add lines 11a–11d to the revenue to total.   |          | С            | Net income or       | r (loss) from sale                    | es of inv          | entory      | <b></b>       | <u> </u>             |          |              |                  |
| b c d All other revenue e Total. Add lines 11a–11d   |          |              | Misc                | ellaneous Revenu                      | е                  | 1           | Busn. Code    | j.; .                |          | -            |                  |
| c d All other revenue e Total. Add lines 11a–11d   |          | 11a          |                     |                                       |                    |             |               |                      | <u> </u> |              |                  |
| d All other revenue e Total. Add lines 11a–11d   |          | b            |                     |                                       |                    | ſ           |               |                      |          |              |                  |
| e Total. Add lines 11a–11d   |          | С            |                     |                                       |                    |             |               |                      |          |              |                  |
|  |          | d            | All other rever     | nue                                   |                    | ľ           |               |                      |          |              |                  |
| 12 Total Revenue See instructions 2/1 2/9 20 5/9   |          | е            | Total. Add line     | es 11a-11d                            |                    |             | <b></b>       |                      |          |              |                  |
| 29, 300 U  |          | 12           | Total Revenu        | ie. See instructio                    | ons                |             |               | 241,248              | 29,50    | 8 0          | 0                |

## 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).

|          | All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). |                       |                              |                                       |                                |  |  |  |  |  |  |  |
|----------|--|-----------------------|------------------------------|---------------------------------------|--------------------------------|--|--|--|--|--|--|--|
|          | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.                                   | (A)<br>Total expenses | (B) Program service expenses | (C) Management and general expenses   | (D)<br>Fundraising<br>expenses |  |  |  |  |  |  |  |
| 1        | Grants and other assistance to governments and   |                       |                              | <del></del>                           |                                |  |  |  |  |  |  |  |
| 1        | organizations in the U.S. See Part IV, line 21   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 2        | Grants and other assistance to individuals in  |                       |                              | ,                                     | <u></u>                        |  |  |  |  |  |  |  |
| 2        | the U.S. See Part IV. line 22  | j                     |                              |                                       |                                |  |  |  |  |  |  |  |
| •        | Grants and other assistance to governments,  |                       |                              | · · · · · · · · · · · · · · · · · · · |                                |  |  |  |  |  |  |  |
| 3        | organizations, and individuals outside the   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
|          | U S See Part IV, lines 15 and 16   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 4        | Benefits paid to or for members  |                       |                              |                                       | <del></del>                    |  |  |  |  |  |  |  |
| 5        | Compensation of current officers, directors,   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 3        | 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        | Other salaries and wages   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 8        | Pension plan contributions (include section 401(k)   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| -        | and section 403(b) employer contributions)   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 9        | Other employee benefits  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 10       | Payroll taxes  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 11       | Fees for services (non-employees)  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| а        | Management   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| b        | Legal  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| c        | Accounting   | 1,900                 |                              | 1,900                                 |                                |  |  |  |  |  |  |  |
| d        | Lobbying   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| e        | Professional fundraising services See Part IV, line 17   |                       | , ,                          |                                       |                                |  |  |  |  |  |  |  |
| f        | Investment management fees   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| g        | Other  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 12       | Advertising and promotion  | 954                   | 954                          |                                       |                                |  |  |  |  |  |  |  |
| 13       | Office expenses  | 790                   | 395                          | 395                                   |                                |  |  |  |  |  |  |  |
| 14       | Information technology   | 3,970                 | 3,970                        |                                       |                                |  |  |  |  |  |  |  |
| 15       | Royalties  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 16       | Occupancy  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 17       | Travel   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 18       | Payments of travel or entertainment expenses   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
|          | for any federal, state, or local public officials  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 19       | Conferences, conventions, and meetings   | 2,249                 | 2,249                        |                                       |                                |  |  |  |  |  |  |  |
| 20       | Interest   | 48,066                | 48,066                       |                                       |                                |  |  |  |  |  |  |  |
| 21       | Payments to affiliates   |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 22       | Depreciation, depletion, and amortization  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| 23       | Insurance  | 1,700                 | 850                          | 850                                   |                                |  |  |  |  |  |  |  |
| _        |  | 1 2                   | - (* * .                     | ,                                     |                                |  |  |  |  |  |  |  |
| 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 )  | 0.000.000             | 0.000                        |                                       |                                |  |  |  |  |  |  |  |
| a        | Reserve - Uncoll Pledges   | 259,375               | 259,375                      |                                       |                                |  |  |  |  |  |  |  |
| b        | Symposium expense  | 27,586                | 27,586                       |                                       |                                |  |  |  |  |  |  |  |
| C        | Battlefield Development  | 23,150                | 23,150                       |                                       |                                |  |  |  |  |  |  |  |
| d        | Exhibition Expense   | 12,152                | 12,152                       | 3 003                                 |                                |  |  |  |  |  |  |  |
| e        | Meals/entertainment  | 3,803                 | 0 000                        | 3,803                                 |                                |  |  |  |  |  |  |  |
| f<br>oe  | •  | 10,929<br>396,624     | 9,993                        | 936                                   |                                |  |  |  |  |  |  |  |
| 25<br>26 | Total functional expenses. Add lines 1 through 24f  Joint costs. Check here ▶ ☐ if following                 | 370,024               | 388,740                      | 7,884                                 |                                |  |  |  |  |  |  |  |
| 20       | SOP 98-2 Complete this line only if the  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
|          | organization reported in column (B) joint costs  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
|          | from a combined educational campaign and fundraising solicitation  |                       |                              |                                       |                                |  |  |  |  |  |  |  |
| DAA      |  |                       | <u> </u>                     | · · · · ·                             | 5 000                          |  |  |  |  |  |  |  |

| Pa                          | rt X       | Balance Sheet  |               |                          |                                       |   |
|-----------------------------|------------|--|---------------|--------------------------|---------------------------------------|---|
|                             |            |  |               | (A)<br>Beginning of year |                                       | (B)<br>End of year                      |
| $\neg$                      | <u>, 1</u> | Cash—non-interest bearing                                  |               | 128,590                  | 1                                     | 80,876                                  |
|                             | 2          | Savings and temporary cash investments                     |               |                          | 2                                     |   |
|                             | 3          | Pledges and grants receivable, net                         |               | 541,033                  | 3                                     | 261,093                                 |
|                             | 4          | Accounts receivable, net                                   |               |                          | 4                                     |   |
|                             | 5          | Receivables from current and former officers, directors,   | trustees, key |                          |                                       |   |
|                             |            | employees, and highest compensated employees Comp          |               |                          |                                       |   |
|                             |            | Schedule L   |               |                          | 5                                     |   |
|                             | 6          | Receivables from other disqualified persons (as defined    | under section |                          |                                       |   |
|                             |            | 4958(f)(1)) and persons described in section 4958(c)(3)(   |               |                          | l                                     |   |
|                             |            | Part II of Schedule L                                      | , ·           |                          | _6                                    |   |
| ts                          | 7          | Notes and loans receivable, net                            |               |                          | 7                                     |   |
| Assets                      | R          | Inventories for sale or use                                |               |                          | 8                                     |   |
| ğ                           | 9          | Prepaid expenses and deferred charges                      |               |                          | 9                                     |   |
|                             | -          | Land, buildings, and equipment cost or                     | ] [           | -                        |                                       |   |
|                             | 100        | other basis Complete Part VI of Schedule D                 | 10a 954,576   |                          |                                       |   |
|                             | h          | Less accumulated depreciation                              | 10b           | 954,576                  | 10c                                   | 954,576                                 |
|                             | 11         | Investments—publicly traded securities                     |               |                          | 11                                    |   |
|                             | 12         | Investments—other securities See Part IV, line 11          | Ī             |                          | 12                                    |   |
|                             | 13         | Investments—program-related. See Part IV, line 11          |               |                          | 13                                    |   |
|                             | 14         | Intangible assets  |               |                          | 14                                    | · - · · · · · · · · · · · · · · · · · · |
|                             | 15         | Other assets See Part IV, line 11                          |               |                          | 15                                    |   |
|                             | 16         | Total assets. Add lines 1 through 15 (must equal line 34   | ı)            | 1,624,199                | 16                                    | 1,296,545                               |
|                             | 17         | Accounts payable and accrued expenses                      |               | 14,671                   | 17                                    | 12,393                                  |
|                             | 18         | Grants payable   | [             |                          | 18                                    |   |
|                             | 19         | Deferred revenue   |               | 19                       | · · · · · · · · · · · · · · · · · · · |   |
|                             | 20         | Tax-exempt bond liabilities                                |               |                          | 20                                    |   |
| S                           | 21         | Escrow or custodial account liability Complete Part IV o   | f Schedule D  |                          | 21                                    |   |
| Liabilities                 | 22         | Payables to current and former officers, directors, truste | I             |                          |                                       |   |
| Ē                           |            | employees, highest compensated employees, and disqu        | alified       |                          |                                       |   |
| Ë                           |            | persons Complete Part II of Schedule L                     |               |                          | 22                                    |   |
|                             | 23         | Secured mortgages and notes payable to unrelated third     | l parties     |                          | 23                                    |   |
|                             | 24         | Unsecured notes and loans payable to unrelated third pa    | arties        |                          | 24                                    |   |
|                             | 25         | Other liabilities Complete Part X of Schedule D            |               | 850,000                  | 25                                    | 680,000                                 |
|                             | 26         | Total liabilities. Add lines 17 through 25                 |               | 864,671                  | 26                                    | 692,393                                 |
| Se                          |            | Organizations that follow SFAS 117, check here ▶ X         | and           |                          |                                       |   |
| Š                           |            | complete lines 27 through 29, and lines 33 and 34.         |               |                          |                                       |   |
| <u> </u>                    | 27         | Unrestricted net assets                                    |               | 759 <b>,</b> 528         | 27                                    | 604,152                                 |
| ä                           | 28         | Temporarily restricted net assets                          |               | -                        | 28                                    |   |
| ā                           | 29         | Permanently restricted net assets                          |               |                          | 29                                    |   |
| Fu                          |            | Organizations that do not follow SFAS 117, check her       | re ▶ 🗍        | -                        |                                       |   |
| Net Assets or Fund Balances |            | and complete lines 30 through 34.                          | -             |                          |                                       |   |
| ts                          | 30         | Capital stock or trust principal, or current funds         |               |                          | 30                                    |   |
| Se                          | 31         | Paid-in or capital surplus, or land, building, or equipmen | t fund        |                          | 31                                    |   |
| As                          | 32         | Retained earnings, endowment, accumulated income, o        | r other funds | ·                        | 32                                    |   |
| <u>e</u>                    | 33         | Total net assets or fund balances                          |               | 759,528                  |                                       | 604,152                                 |
| Z                           | 34         | Total liabilities and net assets/fund balances             |               | 1,624,199                | 34                                    | 1,296,545                               |

Form **990** (2009)

| Form | 990 (2009) Franklin's Charge, Inc. 20-1774789  | _   | Pa  | ge <b>12</b> |
|------|--|-----|-----|--------------|
| Pa   | rt XI Financial Statements and Reporting   |     |     |              |
|      | •  |     | Yes | No           |
| 1    | Accounting method used to prepare the Form 990. Cash X Accrual Other   |     |     |              |
|      | If the organization changed its method of accounting from a prior year or checked "Other," explain in          | - f |     | ĺ            |
|      | Schedule O   | ļ   |     | 1            |
| 2a   | Were the organization's financial statements compiled or reviewed by an independent accountant?                | 2a  |     | X            |
| b    | Were the organization's financial statements audited by an independent accountant?                             | 2b  | X   |              |
| С    | 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?      | 2c  | Х   | <u> </u>     |
|      | If the organization changed either its oversight process or selection process during the tax year, explain in  |     |     |              |
|      | Schedule O   |     |     |              |
| d    | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were    | 1   |     | ļ            |
|      | issued on a consolidated basis, separate basis, or both  |     |     |              |
|      | X Separate basis Consolidated basis Both consolidated and separate basis                                       | 1   |     | •            |
| 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?   | 3a  |     | X            |
| b    | 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  | l   | ĺ            |

Form **990** (2009)

#### 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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Franklin's Charge, Inc.

Employer identification number 20-1774789

Schedule A (Form 990 or 990-EZ) 2009

|      | ırt I     |  |                                 | Status (All organizations                       |  |                           |            | oart.) S              | See in    | struct   | ions.        |         |    |
|------|-----------|--|---------------------------------|---|--|---------------------------|------------|-----------------------|-----------|----------|--------------|---------|----|
| he o | orgar     | nization is not  | a private foundation becaus     | e it is (For lines 1 through 11, o              | check only                                       | one box                   | )          |                       |           |          |              |         |    |
| 1    | $\bigcap$ |  |                                 | ociation of churches described                  |  |                           |            |                       |           |          |              |         |    |
| 2    | Ħ         |  | cribed in section 170(b)(1)(A   |   |  |                           |            |                       |           |          |              |         |    |
| 3    |           |  |                                 | ce organization described in sec                | ction 170(                                       | b)(1)(A)(i                | ii).       |                       |           |          |              |         |    |
| 4    | H         |  |                                 | d in conjunction with a hospital                |  |                           |            | (1)(A)(ii             | i). Ente  | r the ho | spital's nam | ie,     |    |
| -    | ш         | city, and state  |                                 | ,   |  |                           |            |                       |           |          |              |         |    |
| 5    |           |  |                                 | of a college or university owned                | or operate                                       | ed by a go                | vernme     | ntal unit             | descrit   | oed in   |              |         |    |
| 5    |           | =  | o)(1)(A)(iv). (Complete Part    |   |  | , ,                       |            |                       |           |          |              |         |    |
|      | $\Box$    |  |                                 | overnmental unit described in s                 | ection 17  | 0(b)(1)(A)                | (ν).       |                       |           |          |              |         |    |
| 6    | 片         |  |                                 |   |  |                           |            | rom the               | genera    | aldua I  |              |         |    |
| 7    | X         | 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) |                                 |   |  |                           |            |                       |           |          |              |         |    |
|      | $\Box$    | described in section 170(b)(1)(A)(vi). (Complete Part II )  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )   |                                 |   |  |                           |            |                       |           |          |              |         |    |
| 8    | H         | An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross  |                                 |   |  |                           |            |                       |           |          |              |         |    |
| 9    | Ш         |  |                                 | npt functions—subject to certain                |  |                           |            |                       |           |          |              |         |    |
|      |           |  |                                 | nd unrelated business taxable in                |  |                           |            |                       |           |          |              |         |    |
|      |           |  |                                 | 0, 1975 See section 509(a)(2)                   |  |                           |            | ,                     |           |          |              |         |    |
| 10   | $\Box$    |  |                                 | exclusively to test for public saf              |  |                           |            |                       |           |          |              |         |    |
| 11   | H         |  |                                 | exclusively for the benefit of, to              |  |                           |            | to carry              | out the   | )        |              |         |    |
| • •  | لسسا      |  |                                 | ed organizations described in s                 |  |                           |            |                       |           |          | 1            |         |    |
|      |           |  |                                 | he type of supporting organizat                 |  |                           |            |                       |           |          |              |         |    |
|      |           | a Type   | F                               | c Type III-Function                             |  |                           | d [        | _                     | e IIIOti  | her      |              |         |    |
| е    |           |  | /·                              | janization is not controlled direc              |  |                           | ne or m    |                       |           |          |              |         |    |
| ·    |           |  |                                 | and other than one or more pu                   |  |                           |            |                       |           |          | 1            |         |    |
|      |           |  | section 509(a)(2).              | •   | ,  | Ū                         |            |                       |           |          |              |         |    |
| f    |           | • • • •  |                                 | ermination from the IRS that it is              | a Type I.  | Type II, o                | or Type I  | II suppo              | orting    |          |              |         |    |
| •    |           | =  | check this box                  |   | <b>,</b> ,                                       |                           | ,,         | • •                   | Ŭ         |          |              |         |    |
| g    |           | •  |                                 | tion accepted any gift or contrib               | oution from                                      | any of th                 | ne         |                       |           |          |              |         |    |
| 9    |           | following per  |                                 | , , , ,   |  | ,                         |            |                       |           |          |              |         |    |
|      |           | • .  |                                 | ontrols, either alone or together               | with perso                                       | ons descr                 | ibed in (i | ı)                    |           |          |              | Yes     | No |
|      |           |  |                                 | f the supported organization?                   |  |                           |            |                       |           |          | 11g          | 0)      |    |
|      |           | (ii) A family  | member of a person describ      | bed in (i) above?                               |  |                           |            |                       |           |          | 11g          | n)      |    |
|      |           | (iii) A 35% c  | ontrolled entity of a person of | described in (i) or (ii) above?                 |  |                           |            |                       |           |          | 11g          | III)    |    |
| h    |           | Provide the f  | ollowing information about t    | he supported organization(s)                    |  |                           |            |                       |           |          |              |         |    |
| (i)  | Name      | e of supported   | (ii) EIN                        | (iii) Type of organization                      | 1 ' '  | organization              | (v) Did y  |                       | (vi) l    |          | (VII) A      | mount o | f  |
|      | org       | anization  |                                 | (described on lines 1–9<br>above or IRC section | , , ,  | sted in your<br>document? | the organ  | ization in<br>of your | organızat |          | SI           | ipport  |    |
|      |           |  |                                 | (see instructions))                             |  | document.                 | supp       |                       |           | S 7      |              |         |    |
|      |           |  |                                 |   | Yes  | No                        | Yes        | No                    | Yes       | No       |              |         |    |
|      |           |  |                                 |   |  |                           |            |                       |           |          |              |         |    |
|      |           | <del>.</del>   |                                 |   | <del> </del>                                     |                           |            |                       |           |          |              |         |    |
|      |           |  |                                 |   |  |                           |            |                       |           |          |              |         |    |
|      |           | ·  | <u> </u>                        |   | <del>                                     </del> | -                         |            |                       | 1         |          |              |         |    |
|      |           |  |                                 |   |  |                           |            |                       |           |          |              |         |    |
|      |           |  |                                 |   | 1  |                           |            |                       |           |          |              |         | -  |
|      |           | · · · · ·  |                                 |   | +  | <del> </del>              |            |                       |           |          |              |         |    |
|      |           |  |                                 |   |  |                           | <u> </u>   |                       |           | L        |              |         |    |
|      | _,        |  |                                 |   | - 7  |                           |            |                       |           |          |              |         |    |

Form 990 or 990-EZ.

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

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part 1.) Section A. Public Support (a) 2005 (d) 2008 **(b)** 2006 (c) 2007 (e) 2009 Calendar year (or fiscal year beginning in) (f) Total Gifts, grants, contributions, and membership fees received (Do not 67,368 130,525 94,746 211,740 include any "unusual grants") 541,546 1,045,925 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge 94.746 211.740 130,525 1,045,925 4 Total. Add lines 1 through 3 541,546 67,368 The portion of total contributions by each 5 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) Public support. Subtract line 5 from line 4 1,045,925 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 94,746 211,740 541,546 67,368 130,525 1,045,925 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 2,554 5,005 2.446 sources 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) Total support. Add lines 7 through 10 1,050,930 11 Gross receipts from related activities, etc. (see instructions) 12 103,563 12 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 14 99.52% 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 99.40% 16a 33 1/3 % support test—2009. 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 33 1/3 % support test-2008. 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

10%-facts-and-circumstances test-2009. 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

10%-facts-and-circumstances test—2008. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

Schedule A (Form 990 or 990-EZ) 2009

20-1774789 Schedule A (Form 990 or 990-EZ) 2009 Franklin's Charge, Inc. Page 3 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 (d) 2008 (e) 2009 Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's 4 benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 10a Gross income from interest, dividends payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b 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 Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2008 Schedule A, Part III, line 15 16 %

#### Section D. Computation of Investment Income Percentage

- 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))
- 18 Investment income percentage from 2008 Schedule A, Part III, line 17
  - 33 1/3 % support tests-2009. 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
  - 33 1/3 % support tests—2008. 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 | n did not check a box on | ine 14, 19 | a, or 19b | , check this box and see instructions |
|----|---------------------|-----------------------|--------------------------|------------|-----------|---------------------------------------|
|----|---------------------|-----------------------|--------------------------|------------|-----------|---------------------------------------|

17

18

Page 4

Schedule A (Form 990 or 990-EZ) 2009 Franklin's Charge, Inc. 20-1774789

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

# FRANKLIN'S CHARGE, INC. 2010 BOARD OF DIRECTORS

| Address & Email               |
|-------------------------------|
| 341 Cool Springs Blvd.        |
| Suite 100                     |
| Franklin, TN 37067            |
| 224 Fourth Avenue South       |
| Franklin, TN 37064            |
| 604 West Main Street          |
| Franklin, TN 37064            |
| 1005 Scramblers Knob          |
| Franklin, TN 37069            |
| 1331 N. Street NW, Ste. 1001  |
| Washington, D.C. 2005-4761    |
| Meeting of the Waters         |
| 3200 Del Rio Pike             |
| Franklin, TN 37069            |
| P.O. Box 156                  |
| Franklin, TN 37065            |
| 2000 Meridian Blvd., Ste. 250 |
| Franklin, TN 37067            |
| 205 King Arthur Circle        |
| Franklin, TN 37067            |
| 315 Deaderick Street          |
| MC: NA-0502                   |
| Nashville, TN 37238-0707      |
|                               |

| Name             | Address & Email  |
|------------------|--|
| Ken Green        | 640 Broadmor Blvd., Ste. 100<br>Murfreesboro, TN 37129 |
|                  | With the estation, Try 37129                           |
| Robert Hicks     | Labor in Vain<br>5330 Indian Valley Road               |
|                  | Franklin, TN 37064                                     |
| Eric Jacobson    | 1345 Carnton Lane                                      |
| Dire successii   | Franklin, TN 37064                                     |
| Tom Murdic       | 1428 Mayberry Lane                                     |
|                  | Franklin, TN 37064                                     |
| Mary Pearce      | P.O. Box 723   |
|                  | Franklin, TN 37065                                     |
| Tom Powell       | 810 Crescent Center, Ste. 160                          |
|                  | Four Corporate Center<br>Franklin, TN 37067            |
| Joe Smyth        | 708 Shadowlawn Ct.                                     |
|                  | Franklin, TN 37069                                     |
| Greg Wade        | 113 Century Oak Drive                                  |
|                  | Franklin, TN 37069-6104                                |
| Rick Warwick     | P.O. Box 723 Fronklin, TN 37065                        |
|                  | Franklin, TN 37065                                     |
| Stacey Watson    | 604 West Main Street<br>Franklin, TN 37064             |
|                  | ,  |
| Carroll Van West | P.O. Box 80<br>Murfreesboro TN 37132-0001              |
|                  |  |

| Regions Bank                 | 5,000 00 121 First Avenue, South           | Franklin          | Z<br>⊢     | 37064 |
|------------------------------|--|-------------------|------------|-------|
| AmSouth Bank                 | 5,000 00 315 Deaderick Street              | Nashville         | N<br>H     | 37237 |
| Joseph Cashia                | 10,000 00 3200 Del Rio Pike                | Franklin          | N          | 37069 |
| Civil Constructors           | 25,000 00 425 Downs Blvd                   | Franklın          | N<br>L     | 37064 |
| First Tennessee              | 5,000 00 231 Public Square                 | Franklın          | N<br>L     | 37064 |
| Marcia & JN Franks           | 10,000 00 4683 Columbia Pike               | Thompsons Station | Z          | 37179 |
| HA Heller Foundation, Inc    | 22,500 00 3 Lenape Drive                   | Montville         | Z          | 37045 |
| Charles Mann                 | 5,000 00 200 River Hills Drive             | Nashville         | N<br>L     | 37210 |
| National City Bank           | 5,000 00 810 Crescent Ctr Drive, Suite 160 | Franklın          | N<br>L     | 37064 |
| PNC Foundation               | 5,000.00 211 Commerce Street, Suite 300    | Nashville         | <b>N</b> ⊢ | 37201 |
| Bunny Price                  | 10,000 00 P O Box 2868                     | Brentwood         | N          | 37024 |
| Starfish Foundation          | 5,000 00                                   |                   |            |       |
| SunTrust Foundation          | 5,000 00 201 Fourth Ave, N 2nd Floor       | Nashville         | N<br>F     | 37219 |
| Civil War Preservation Assoc | 5,000 00 1331 H Street NW, Suite 1001      | Washington DC     |            | 20005 |
|                              | 122,500 00                                 |                   |            |       |
|                              |  |                   |            |       |

Franklin's Charge, Inc 20-1774789 Schedule B - Schedule of Contributors 2009

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

2009
Open to Public Inspection

Employer identification number Name of the organization 20-1774789 Franklin's Charge, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_ \_ \_ \_ \_ Number of states where property subject to conservation easement is located ▶ \_ \_ \_ \_ \_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? 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. b 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 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

| Organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)   a   | Sche     | dule <u>D (Form 990) 2009 Franklin's</u>          |   |              |  |              | <u> 20-17</u> |              |             |                  | Page 2      |
|--|----------|---|---|--------------|--|--------------|---------------|--------------|-------------|------------------|-------------|
| collection tems (check all that apply)  a   Public exhibition   d   Loan or exchange programs   b   Scholarly research   e   Other   c   Preservation for future generations  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 air, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's exempt purpose in Part XIV  Fart IV Escrow and Custodial Arrangements. Complete if the 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, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  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  2 Did the organization include an amount on Form 990, Part X, line 21?  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 Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment  %  b Permanent endowment  %  a Are there endowment  |          |   | Collections of                            | Art, His     | storical Treas                         | sures, c     | or Other      | Similar /    | Assets      | (contini         | ued)        |
| b   Scholarly research   e   Other   Preservation for future generations  4  | 3        |   | n, and other record                       | s, check a   | any of the following                   | ng that ar   | e a significa | ant use of i | ts          |                  |             |
| b   Scholarly research   C   Preservation for future generations   4   | а        | Public exhibition                                 | d 🗍                                       | Loan or e    | xchange program                        | ns           |               |              |             |                  |             |
| c  |          |   | _   |              | <b>U</b> . <b>U</b>                    |              |               |              |             |                  |             |
| 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV  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 answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part XI, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table.  1b If "Yes," explain the arrangement in Part XIV and complete the following table.  2a Did the organization include an amount on Form 990, Part X, line 21?  2b If the organization include an amount on Form 990, Part X, line 21?  2c Did the organization include an amount on Form 990, Part X, line 21?  Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  c Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  c Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  D Permanent endowment ► %  Eremanent endowment ► %  The remanent endowment Funds not in the possession of the organization that are held and administered for the   | -        |   |   | _            |  |              |               |              |             |                  |             |
| 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?  Part IV   |          | Provide a description of the organization's coll- | ections and explair                       | n how they   | y further the orga                     | ınızation's  | s exempt pu   | ırpose ın    |             |                  |             |
| Part IV Escrow and Custodial Arrangements. Complete if the 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?    b   f "Yes," explain the arrangement in Part XIV and complete the following table.    c   Beginning balance   1d   1d   1e   1e   1d   1e   1e   1  | 5        | During the year, did the organization solicit or  | receive donations of the maintained as of | of art, hist | orical treasures,<br>organization's co | or other s   | sımılar       |              |             | Ye               | s No        |
| 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  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 2a Did the organization include an amount on Form 990, Part X, line 21? 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 Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% c Term endowment Index not in the possession of the organization that are held and administered for the   | Pa       | rt IV Escrow and Custodial Arra                   | <b>ngements.</b> Co                       | mplete       | if the organiz                         | ation a      | nswered       | "Yes" to     | Form 9      |                  |             |
| Included on Form 990, Part X?  Included on Form 990, Part X!   |          |   |   |              |  | her asset    | s not         |              |             |                  |             |
| b If "Yes," explain the arrangement in Part XIV and complete the following table.    Amount   Ic   Amount  |          |   |   | ,            |  |              |               |              |             | Ye               | s No        |
| c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.    Amount   | h        | •   | and complete the fo                       | ollowing ta  | ble.                                   |              |               |              |             |                  |             |
| d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  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 Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment Indis not in the possession of the organization that are held and administered for the   | •        | Troo, explain the arrangement in activity a       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,    |              |  |              |               |              | T           | Amount           |             |
| d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  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 Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment Indis not in the possession of the organization that are held and administered for the   | _        | Reginning halance                                 |   |              |  |              |               | 10           | 1           |                  |             |
| Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21?  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 Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  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  |          | 0 0   |   |              |  |              |               |              |             |                  |             |
| f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21?  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.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  2 Provide the estimated percentage of the year end balance held as  a Board designated or quasi-endowment  %  b Permanent endowment  %  c Term endowment  %  a Are there endowment funds not in the possession of the organization that are held and administered for the  |          |   |   |              |  |              |               |              |             |                  |             |
| Did the organization include an amount on Form 990, Part X, line 21?    If "Yes," explain the arrangement in Part XIV   Part V   Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back     1a   Beginning of year balance  | _        |   |   |              |  |              |               |              |             |                  |             |
| 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.    (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   |          | •   | rm QQA Part Y line                        | 212          |  |              |               |              |             | □ v <sub>a</sub> |             |
| Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Four years back (e) Four years back (e) Four years back  Descriptions (e) Four years back (e) Fo |          |   | ini 990, Fait A, inie                     | 521'         |  |              |               |              |             | Ye               | S   NO      |
| (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back  1a Beginning of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  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   |          | t V Endowment Funds Comple                        | ete if organizat                          | ion ans      | wered "Ves"                            | to Form      | 1990 Pa       | rt IV line   | a 10        |                  |             |
| b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  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   | <u> </u> | tt v Endowment runds. Compre                      |   |              |  |              |               |              |             | (e) Four         | vears back  |
| b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  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   |          | D   | (a) Current year                          |              | (b) I not year                         | (0) 1110     | years back    | (d) Times y  | cars back   | (6) 1 001        | years back  |
| c Net investment earnings, gains, and losses  d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  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   |          | • •   |   | -            |  | <del>[</del> | <del></del>   |              | <del></del> | <del> </del>     |             |
| and losses  d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  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   | -        |   |   |              |  |              |               |              |             | <del> </del>     |             |
| d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment \(   | C        | · · ·   |   |              |  | -            |               |              |             |                  |             |
| e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment \(   |          |   |   |              |  |              |               |              |             | <del> </del> -   | <del></del> |
| and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment  |          | ·   | <del></del>                               |              |  | ļ            |               | <del> </del> |             | <del> </del>     |             |
| f Administrative expenses g End of year balance  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   | е        | '   |   |              |  | 1            |               |              |             | 1                |             |
| g End of year balance  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   |          | . •   | · · · · · · · · · · · · · · · · · · ·     |              |  | <del> </del> |               |              |             | <del> </del>     | <del></del> |
| 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  | f        | •   |   |              | <del> </del>                           | <del> </del> | <b>****</b>   |              |             | <u> </u>         |             |
| 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  | g        |   | L   |              |  |              |               | L            |             | <u></u>          |             |
| 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   | 2        |   |   | as           |  |              |               |              |             |                  |             |
| c Term endowment ▶%  3a Are there endowment funds not in the possession of the organization that are held and administered for the   | а        |   | <b>–</b> – – %                            |              |  |              |               |              |             |                  |             |
| 3a Are there endowment funds not in the possession of the organization that are held and administered for the  | þ        | <del></del>                                       |   |              |  |              |               |              |             |                  |             |
|  | С        |   |   |              |  |              |               |              |             |                  |             |
| organization by Yes   No   | 3a       | Are there endowment funds not in the possess      | sion of the organiza                      | ation that   | are held and adn                       | nınıstered   | I for the     |              |             |                  | T           |
|  |          | organization by                                   |   |              |  |              |               |              |             |                  | Yes No      |
| (i) unrelated organizations 3a(i)  |          | - · · · · · · · · · · · · · · · · · · ·           |   |              |  |              |               |              |             | 3a(ı)            |             |
| (ii) related organizations 3a(ii)  |          | - · ·   |   |              |  |              |               |              |             | 3a(ii)           |             |
| b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R?  | b        | •           | · ·                                       |              |  |              |               |              |             | 3b               |             |
| 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.   | Pa       |   |   |              |  |              | X, line 1     | 0.           |             |                  |             |
| Description of investment (a) Cost or other basis (b) Cost or other (c) Accumulated (d) Book value (investment) basis (other) depreciation   |          | Description of investment                         | ` '                                       |              |  |              |               |              |             | (d) Book         | value       |
| <b>1a</b> Land 954,576 954,576   | 1a       | Land  |   |              | 954                                    | ,576         |               |              |             | 9:               | 4,576       |
| <b>b</b> Buildings   | b        | Buildings   |   |              |  |              |               |              |             |                  |             |
| c Leasehold improvements   |          | •   |   |              |  |              |               | •            |             |                  |             |
| d Equipment  |          | •   |   |              |  |              |               |              |             |                  |             |
| e Other  |          |   |   |              |  |              |               |              | <del></del> |                  |             |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) 954, 576  |          |   | qual Form 990, Par                        | t X, colum   | nn (B), line 10(c)                     | )            |               |              | •           | 91               | 54 576      |

| Part VII Investments—Other Securities. See Form 9                          | 90, Part X, line 12.             | 20-17/4709                             | Page 3                                |
|--|----------------------------------|--|---------------------------------------|
| (a) Description of security or category                                    | (b) Book value                   | (c) Method of v                        |                                       |
| (including name of security)   |                                  | Cost or end-of-year                    | market value                          |
| Finançial derivatives  |                                  |  |                                       |
| Closely-held equity interests  |                                  |  |                                       |
| Other  | -                                |  |                                       |
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| Fotal. (Column (b) must equal Form 990, Part X, col (B) line 12)           | <u> </u>                         |  | <del></del>                           |
| Part VIII Investments—Program Related. See Form 9                          |                                  | Zah 12.11                              |                                       |
| (a) Description of investment type   | (b) Book value                   | (c) Method of v<br>Cost or end-of-year |                                       |
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| Total. (Column (b) must equal Form 990, Part X, col (B) line 13)           | <b>&gt;</b>                      |  |                                       |
| Part IX Other Assets. See Form 990, Part X, line 15                        |                                  |  |                                       |
| (a) Description  |                                  |  | (b) Book value                        |
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| Total. (Column (b) must equal Form 990, Part X, col (B) line 15)           |                                  | <b>•</b>                               |                                       |
| Part X Other Liabilities. See Form 990, Part X, line                       |                                  | <del></del>                            |                                       |
| 1 (a) Description of liability   | (b) Amount                       |  |                                       |
| Federal income taxes  Mortgage payable                                     | 680,000                          |  |                                       |
| Mortgage payable   | 000,000                          |  |                                       |
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| Total. (Column (b) must equal Form 990, Part X, coi (B) line 25)           | ▶ 680,000                        | <u> </u>                               |                                       |
| 2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the or | rganization's financial statemer | nts that reports the                   |                                       |
| organization's liability for uncertain tax positions under FIN 48          |                                  |  |                                       |

| Sche |  | -1774789 <sup>-</sup> | Page 4          |
|------|--|-----------------------|-----------------|
| _    | art XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan   | cial Statements       |                 |
| 1    | Total revenue (Form 990, Part VIII, column (A), line 12)   | 1                     | 241,248         |
| 2    | Total expenses (Form 990, Part IX, column (A), line 25)  | 2                     | 396,624         |
|      | Excess or (deficit) for the year Subtract line 2 from line 1   | 3                     | -155,376        |
| 4    | Net unrealized gains (losses) on investments   | 4                     |                 |
| 5    | Donated services and use of facilities   | 5                     |                 |
| 6    | Investment expenses  | 6                     |                 |
| 7    | Prior period adjustments   | 7                     |                 |
| 8    | Other (Describe in Part XIV)   | 8                     |                 |
| 9    | Total adjustments (net) Add lines 4 through 8  | 9                     |                 |
| 10   | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9                             | 10                    | <u>-155,376</u> |
| Pá   | art XII Reconciliation of Revenue per Audited Financial Statements With Reve   | nue per Return        |                 |
| 1    | Total revenue, gains, and other support per audited financial statements   | 1 1                   | 241,248         |
| 2    | Amounts included on line 1 but not on Form 990, Part VIII, line 12   |                       |                 |
| а    | a Net unrealized gains on investments  |                       |                 |
| b    | Donated services and use of facilities 2b  |                       |                 |
| С    | Recoveries of prior year grants  |                       |                 |
| d    | d Other (Describe in Part XIV )  |                       |                 |
| е    | A A L L L L L A A Marriagh A A   | 2e                    | <del></del>     |
| 3    |  | 3                     | 241,248         |
| 4    | Amounts included on Form 990, Part VIII, line 12, but not on line 1:   | ]                     |                 |
| а    | a Investment expenses not included on Form 990, Part VIII, line 7b   |                       |                 |
| b    | 4b   |                       |                 |
| С    |  | 4c                    |                 |
| 5    | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  |                       | 241,248         |
| Pá   | art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses                                   | enses per Retur       | <u>n</u>        |
| 1    | Total expenses and losses per audited financial statements   | 1                     | 396,624         |
| 2    | Amounts included on line 1 but not on Form 990, Part IX, line 25   |                       |                 |
| а    | a Donated services and use of facilities 2a  |                       |                 |
| b    | b Prior year adjustments   |                       |                 |
| C    | c Other losses 2c  |                       |                 |
| d    | d Other (Describe in Part XIV )  |                       |                 |
| е    | e Add lines 2a through 2d  | 2e                    | 225 521         |
| 3    | <b>_      </b>   | 3                     | 396,624         |
| 4    | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |                       |                 |
|      | a Investment expenses not included on Form 990, Part VIII, line 7b   |                       |                 |
| b    | b Other (Describe in Part XIV )  |                       |                 |
| C    | c Add lines 4a and 4b  | _ <u>4c</u>           | 206 604         |
| 5_   |  | 5                     | 396,624         |
|      | Part XIV Supplemental Information  |                       | <del></del>     |
|      | mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part |                       |                 |
|      | d 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Als | o complete            |                 |
| this | s part to provide any additional information   |                       |                 |
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| Schedule D (Fr  | orm 990\ 2009 | Franklin's Charge.                              | Inc.             | <u> 20-1774789°                                    </u> | Page 5     |
|-----------------|---------------|---|------------------|---|------------|
| Scriedule D (1) | Complement    | Franklin's Charge, ntal Information (continued) |                  |   |            |
| Pan XIV         | Supplemen     | ital information (continued)                    |                  |   |            |
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SCHEDULE O (Form 990) **Supplemental Information to Form 990** 

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

• Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Franklin's Charge, Inc.

Employer identification number 20-1774789

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990
Tax return is reviewed by members of the board prior to filing with
Internal Revenue Service.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are available upon request during office hours.