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Form 990-EZ

Department of the Treasury

Short Form 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)

► Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning JANUBYZY 1, 2009, and ending DECEMBER 31, 2069											
B Check if applicable. Please C Name of organization D Employer identification											
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=	label of 1111 2011 11 2011										
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	initial return Type. See P.O. Box 3505 Grib or town, state or country, and ZIP + 4						-2 855 1111				
	Amend	led return	Instruc-	City or town, state or country, and ZIP + 4	F Grou	up Exemp	tion				
<u> </u>	Applica	ation pending	tions.	CHATTANOOGO TN 37404.0505	Nun	nber 🕨					
	• Se	ection 501(c)(3)			Accounting Me	ethod: 🛭	Cash				
	a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶										
	H Check ► ☐ if the organization is not										
1 V	I Website: ► MIPSOUTHSCULFTUREALLIMCE. ORG required to attach Schedule B (Form 990,										
J T	ах-е	xempt status (c	check or	ly one) — 🔀 501(c) (3) ◀ (insert no.) 🗌 4947(a)(1) or 🔲 527	990-EZ, or 99	0-PF).					
	Check			ation is not a section 509(a)(3) supporting organization and its gross receip	ots are normally	not more	than \$25,000. A				
				urn is not required, but if the organization chooses to file a return, be sure							
				9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Fo		- \$					
	art I			enses, and Changes in Net Assets or Fund Balances (Se		ctions fe	or Part I.)				
	1			s, grants, and similar amounts received			10700.				
	2		_	evenue including government fees and contracts		2	, , , , , , , , , , , , , , , , , , , ,				
	3	~		and assessments	• • • •	3 .	4 145.				
	4	Investment	•			4	<u> </u>				
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	l .			· · · · · · · · · · · · · · · · · · ·							
				basis and sales expenses		_					
<u>o</u>	1		5c								
Ĕ	6			rities (complete applicable parts of Schedule G). If any amount is from gaming , che tincluding \$ of contributions	ack liere						
Revenue	'	Gross reve									
Œ	١.	reported or			584. 143.						
			Less: direct expenses other than fundraising expenses								
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	78										
	t										
	1 .	Gross profi	7c								
	8	Other rever)	8	31.						
	9			d lines 1, 2, 3, 4, 5c, 6c, 7c and 8 CIVLU	<u> ▶</u>	9 10	19317.				
	10		Grants and similar amounts paid (attach schedule)								
	11	•		11							
enses	12	Salaries, ot		12							
ë	13	Professiona		13	1396.						
Expe	14			rtilities, and maintenance UGUEN, U		14					
Ш	15			ns, postage, and shipping		15 16					
	16	The state of the s					918.				
. —	17	Total expe	nses. /	dd lines 10 through 16	▶	17	8314.				
28	18			for the year (Subtract line 17 from line 9)		18	11003.				
386	19	Net assets	or fun	I balances at beginning of year (from line 27, column (A)) (must	t agree with	}					
ĕ				reported on prior year's return)		19	8638.				
Net Assets	20			et assets or fund balances (attach explanation)		20					
	21	Net assets	or fund	balances at end of year. Combine lines 18 through 20	_ , ▶	21	19641.				
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 99											
ì	(See the instructions for Part II.) (A) Beginning of						(B) End of year				
22	2 Cash, savings, and investments						19099.				
23		and and build		23							
24		Other assets (c	24								
25	1	Total assets .	25	19 641.							
26	1	Total liabilities	s (desc	ibe ►)		26					
, 27		Net assets or	fund b	plances (line 27 of column (B) must agree with line 21)		27	19644				

rom :	990-FY (500a)									
Par	Statement of Program Service Accomp	plishments (See the instr	uctions for Part II	l.)		Expenses				
What	t is the organization's primary exempt purpose?	6 PROMOTE SCU	1610166			ired for section)(3) and 501(c)(4)				
Desc	ribe what was achieved in carrying out the org	anization's exempt purpos	ses. In a clear ar	na concise	organ	izations and section				
manner, describe the services provided, the number of persons benefited, and other relevant information for										
	program title.		11 - 0 - 6 -		for ot	1013-1				
28	To promote sculpture, the	ocanization	a c pro-	<u> </u>						
	information, Provides	W.TWOKELING	o blasiczn.	LLTLES,		_				
•	and presents a conference	Truck DINSI	Z.EAR.	~	28a	34 143,				
	(Grants \$) if this amount	includes foreign grants, chi	eck nere		208	ally the				
29			}							
	(Grants \$) If this amount	includes foreign grants, che	ack here	P	29a					
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	(Grants \$) If this amount	includes foreign grants, che	eck here	. • 🗇	30a					
31				• , ,						
	•	includes foreign grants, che	eck here	. ▶ 🗆	31a					
32	Total program service expenses (add lines 28a t			. , 🕨	32	37.143.				
Par	List of Officers, Directors, Trustees, and Key	Employees. List each one ev	en if not compensa	ited. (See the i	instruc					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (if not paid,	(d) Contribution employee benefit		(e) Expense account and				
	(a) rearing and accordage	devoted to position	enter -0)	deferred compar	isation	other allowances				
	erink baxteic	President			,	ф				
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33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity. 34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes 35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 930-T, attach a statement explaining why the organization did not report the income on Form 930-T. 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 37b Did the organization of Form 1120-POL for this year? 38b Did the organization file Form 1120-POL for this year? 38c Did the organization of Form 1120-POL for this year? 38b Did the organization file Form 1120-POL for this year? 38c Did the organization of Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year? 38c Did the organization file Form 1120-POL for this year. 38c Did the organization file Form 1120-POL for this year. 38c Did the organization file Form 1120-POL for this y	Part	Other Information (Note the statement requirements in the instructions for Part V.)	-	Yes	No
44 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes. 35 If the organization had income from business activities, such as those reported on lines 2, 5a, and 7a (among others), but not reported on Form 990-T, statch a statement explaining why the organization dont report the income on Form 990-T. 36 Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 8033(e) notice, reporting, and proxy tax requirements? 37 If "Yes," has it filled at tax return on Form 990-T for this year? 38 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spolicable parts of Schedule N 38 Did the organization borrow from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 39 Did the organization borrow from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 39 Did the organization borrow from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 39 Did the organization borrow from, or make any loans to, any officer, director, frustee, or key employee or were any such loans ended to not make any loans to, any officer, director, frustee, or key employee or were any such loans ended to any experiment of the such any such loans ended to the such any such loans ended to the return of the such any such loans ended to the such any such loans en	33		33	100	
185 If the organization had income from business activities, such as those reported on line 2, 6a, and 7a (among others), but not reported on Form 99.0-T. 186 If the organization have unrelated business gross income of \$1,000 or more or was it subject to section 803(9) notice, reporting, and proxy tax requirements? 187 If "Yes," has if filed at ax return on Form 99.0-T for this year? 187 If "Yes," has if filed at ax return on Form 99.0-T for this year? 188 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of not assets during the year? If "Yes," complete applicable parts of Schedule N. 187 If "Yes," complete Schedule L, Part I and enter the total amount involved 38b The Year of Year	34				<u>~</u>
6033(e) notice, reporting, and proxy tax requirements? b // "Yes," has it filed a tax return on Form 990-T for this year? 38	35				
b if "Yes," has it filed a tax return on Form 990-Tor this year? 5 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? if "Yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 38a Did the organization flor Form 1120-POL for this year? 38b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38b 17 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9. 38c Section 501(c)(3) organizations. Enter: a initiation fees and capital contributions included on line 9. 38c Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ section 4912 ▶ section 4915 ▶ 5 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year of it is transaction as not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L. Part 5 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 501(c)(4) organizations and thing the year under sections 4912, 4955, and 4958 7 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization benchmarked the sections 4912, 4955, and 4958 8 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organizations and time the sections and time the sections and time the sections and time the sections and time	a		354		У
The amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37e bid the organization file Form 1120-POL for this year? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount involved 38b Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9 and interest in the organization during the year under: section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ or If "Yes," complete Schedule L, Part I Lust the states with which a copy of this return is filed. ▶ TINNESSE Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. Lust the states with which a copy of this return is filed. ▶ TINNESSE Telephone no. ▶ 123 672 199 Located at ▶ 104 20 501 (c) 40 (c	_	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35b		下 •
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? b If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities 39e 39e 39e 39e 39e 39e 39e 3	_	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			م —
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transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filled. TINNESSEE The organization's books are in care of CAS: A LANES Telephone no. Located at LOY EVENINSS: A LANES Telephone no. At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year. 43 Ves No Yes No Ves No Located at No. 123 62 2 47 Located at No. 129 4 No. 219 4	d	reimbursed by the organization			
The organization's books are in care of ASIGA ANS Telephone no. 423 62 2 47 Located at 104 2/2ninsside 22:1, CHATA TO 2IP +4 > 37404 5007 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c X 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	е	transaction? If "Yes," complete Form 8886-T	40e		<u>γ</u>
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If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.?	6	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No ×
If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	-		
and enter the amount of tax-exempt interest received or accrued during the tax year	C		42c		X
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	43		• •	. •	· 🗆
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	44				
	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			X

Form **990-EZ** (2009)

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	7(a)(1) nonexempt char	exempt charitab itable trusts mus	le trusts only. A t answer questio	ll sec ns 46	tion 3–49t)	
46	Did the organization engage in direct or indirect	political campaign activit	ies on behalf of or	in opposition to		Yes	No	
	candidates for public office? If "Yes," complete S	Schedule C, Part I			46		×	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II							
48	Is the organization a school as described in sectio	n 170(b)(1)(A)(ii)? If "Yes," o	complete Schedule	E	48		x _	
49a	Did the organization make any transfers to an ex	empt non-charitable relate	ed organization? .		49a		×	
	If "Yes," was the related organization a section 5				49b		<u> </u>	
	Complete this table for the organization's five high employees) who each received more than \$100,0		the organization.	If there is none, ent				
	(a) Name and address of each employee paid more hours per week than \$100,000 (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans & deferred compensation							
f	Total number of other employees paid over \$100		ependent contract	ors who each rece	eived	more	than	
	\$100,000 of compensation from the organization (a) Name and address of each independent contractor	n. If there is none, enter "N	lone."			npensa		
						-		
d	Total number of other independent contractors e	each receiving over \$100,0	000▶					
	Under penalties of penury, I declare that I have examine and belief, it is true, correct, and complete. Declaration	od this return, including accompar of preparer (other than officer) is I	nying schedules and sta based on all information	itements, and to the bes	t of my any kno	knowle	edge e.	
Sign Here	Aug 7, 20							
	Signature of officer RESURZE Type or print name and title	· · · · · · · · · · · · · · · · · · ·		Date V				
Paid Prepare	Preparer's signature @5:	ila Janes) Date /	Check if self- employed ► K				tions)	
Use On	Firm's name (or \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		EII	V ► 62.118	127672			
	address, and ZIP + 4	CHATTANOGEN, TN 37	404 Pr	one no. ▶ 423-6	22.	4911	,	
May the	e IRS discuss this return with the preparer shown	above? See instructions		▶ 🕏	Yes		٧٥	

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(s)(1) nonexempt charitable trust.

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organizate

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

Inspection -Employer identification number

OMB No. 1545-0047

Name	or u	e organization	Mid-So	uth Sculft	me	Allia	ار ح	•	20	586 .	2330
Par	_			arity Status (All or							ctions.
The 1 2		A church, co A school de	onvention of chu scribed in section	idation because it is: rches, or association on 170(b)(1)(A)(ii). (At	of church tach Sch	nes desci edule E.)	ribed in a	section 1	70(b)(1)(/	A) (i).	
3 4		A medical re		nospital service organition operated in conj ate:)(A)(III). Enter the
5		•	tion operated for (b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or uni	versity ov	vned or (operated	by a gov	ernmenta	l unit described in
6 7 8 9		An organizat described in A communit An organizat receipts fror	tion that normally section 170(b)(y trust described tion that normally n activities relate	ernment or government or government or government or government of the factor of the f	al part of Part II.) (A)(vi). (C an 331/3 % tions—su	its suppo complete of its sup bject to o	ort from a Part II.) pport fro certain e	n governn m contrib xceptions	nental uni outions, m s, and (2)	t or from nembersh no more	ip fees, and gross than 33/s % of its
10 11 e		acquired by An organizat An organizat purposes of 509(a)(3). Cl a Type By checking persons other 509(a)(1) or the	the organization tion organized at tion organized at one or more pulneck the box that I b to this box, I certar than foundation section 509(a)(2)	a after June 30, 1975. Ind operated exclusive and operated exclusive blicly supported organite describes the type. Type II cliffy that the organization managers and others.	See sec	tion 509(t for public ne benefit described rting orga ne III—Fund t controlle or more	a)(2). (Co ic safety t of, to d in secti anization ctionally led direct publicly	omplete in See second perform to 509(a) and committee and committee atty or incomment of the supporter second performance and committee atty or incomment of the supporter second performance and th	Part III.) ction 5096 the function (1) or secondete line d directly by do organiz	(a)(4). ons of, o otion 509(as 11e thr d y one or eations de	r to carry out the a)(2). See section ough 11h. Type III-Other more disqualified iscribed in section
9		organization	, check this box st 17, 2006, has	a written determination the organization acce							ill supporting
		and (lli) to (ii) A family (iii) A 35% o	pelow, the gover member of a per controlled entity	r indirectly controls, on ning body of the supperson described in (i) a of a person described ation about the support ation about the support in reconstruction support in reconstruction support in reconstruction support in reconstruction support in reconstruction in reconstruction reconstruction in reconstruction reconstruct	ported or above? d in (i) or	ganization (ii) above	n? . ?	th persor	ns descrit	ped in (ii)	Yes No 11g(i)
<u>n</u> (7)		of supported anization	(II) EIN	(Hi) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(hv) is the o	rganization	(v) Did y the organ col (i)	you notify nization in of your port?	organizat (i) organi	s the lon in col. zed in the S.7	(vii) Amount of support
					Yes	No	Yes	No	Yes	No	
											i
							, ,	-			
Tota	ı		1	, · · · · · · · · · · · · · · · · · · ·		1 · 3	-	1	{	!	

Par	(Complete only if you chec					and 170(b)(1)(A)(vi)	
Sec	tion A. Public Support							
Cat	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				***************************************			
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3					 	 	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
<u>6</u>	Public support. Subtract line 5 from line 4.	<u> </u>	L.,				<u> </u>	
	tion B. Total Support		T			T	T	
Ca	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-						
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10 .						<u></u>	
12	Gross receipts from related activities, etc	. (see instructio	ons)			12		
13	First five years. If the Form 990 is for organization, check this box and stop he	re					on 501(c)(3)	
	tion C. Computation of Public Sup							
14	Public support percentage for 2009 (line		•	i, column (f))		14	<u>%</u>	
15	Public support percentage from 2008 Sch	•	•			15	<u>%_</u>	
16a	331/2 % support test—2009. If the organiz							
	and stop here. The organization qualifies		-				-	
D	33% % support test—2008. If the organization gua							
47.	box and stop here. The organization qua							
1/a	10%-facts-and-circumstances test2009. 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							
b 18								

Page 3 Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support **√(e)** 2009 (d) 2008 (f) Total (a) 2005 **(b)** 2006 (c) 2007 Calendar year (or fiscal year beginning in) 6497 64038 1 Gifts. grants. contributions, membership fees received. (Do not include 4908. 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 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 56429. 84807. 8616. 13265. Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . c Add lines 7a and 7b 8480 Public support (Subtract line 7c from line 6.) Section B. Total Support (b) 2006 (c) 2007 (d) 2008 (e) 2009 (a) 2005 Calendar year (or fiscal year beginning in) (f) Total 84807 56429 13265 8616 Amounts from line 6 . 10a Gross income from interest, dividends, payments received on securities loans, 1 30 31 104 rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 6498. 13295. Total support. (Add lines 9, 10c, 11, 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 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f) 17 % 18 331/3 % support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line

17 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization > 33% % support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33% %, and line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🔲 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ □

MIDSOUTH SCULPTURE ALLIANCE FEDZRAL ID# 20-5862330 1/1/2009-12/31/2009

RE: EXPLANATION FUR AMENDED RETURN-FORM990-EZ

ITEMS AMENDED:

990-EZ PART I LINES_ 68,60,9,18,19,21 PARTIT LINES - 22,25,26,27

TO CORRECT CLERICAL ERRORS

990-EZ-SCHEDULEB - NOTORIGINALLY SUBMITTED

Thank you - Casilda James, Administrator