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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

Open to Public

A F	or th	e 2009	cale	ndar year	, or tax	year beg	iπning			,	2009, an	d ending				, 20		
Вс	heck if ap			C Name of	organizatio	on 7X24	EXCHA	NGE,	INC.					Employe	r identific	cation num	ber	
	Addre		use IRS label or	Doing Bu	ısıness As				-			·	\neg	22-30	7580	2		
	7 -		pnnt or	Number	and street	(or PO box	x if mail is n	ot deliver	red to stree	et addre	ss)	Room/su	ıte E	Telephon	e numbe	r		
	Instial	return	type. See	322 E	IGHTH	AVENUE						501		(646)	486-3	3818		
	Termi		Specific Instruc-	City or to	own, state	or country, a	nd ZIP + 4				· ···		_	-				
	Amen	nded	tions.	NEW Y	ORK, N	Y 1000	1						١	Gross red	ceipts \$	2,	188,	217.
		cation	F Na	ame and a	dress of	principal of	ficer RO	BERT	J. C	ASSI	LIANO		_	(a) Is this a	group retu		Yes	X No
	_] pendi		SAME	AS AB	OVE AI	DDRESS								affiliates* (b) Are all a		Chebut	Yes	No
$\overline{}$	Tax-ex	empt stat	tus	X 501/c	1/061	(insert n	10.)	4947(a)	(1) or	52	7		一''			t. (see instruc		
				7X24EX			0)	4347(4)	(1) 31		-		\dashv .	l(c) Group e				
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LE	rt l		mary															
	1	Briefly	descri	ibe the org	anization'	's mission	or most si	gnifican	t activitie	s	CE WIL	O DESIG						
9													N,_					
Governance				MAINTA				N-CKI	TICAL	PNI	ERPRI	5E 						
err S				TION IN														
6												more than 2						_
ಂಶ	3	Numbe	r of vo	oting memi	pers of the	e governin	g body (Pa	art VI, Iır	ne 1a) .						3			5
ctivities	4	Numbe	r of in	idependent	voting m	embers of	the gove	rning bo	ody (Part	VI, line	^{1b)}			. <i></i>	. 4			5
Ě	5	Total n	umber	r of employ	ees (Part '	V, line 2a)									. 5			0
Acı				r of volunte			ssary)								6			0
•	7a	Total g	ross u	inrelated b	usiness re	venue from	n Part VIII,	column	(C), line	12					7a		46,	296.
	b	Net un	related	d business	taxable ir	ncome from	Form 99	0-T, line	34						7b		2,	417.
				•										Prior Yea	ır	Curr	ent Ye	ar
	8	Contrib	utions	s and grant	s (Part VI	II, line 1h)						[• •		
, ž	i			vice revenu		•						: : : : <u>:</u> [2,221,	086.	2,	132,	767.
Revenue				ncome (Pa								: : : : : <u> </u>			202.			055.
) <u>r</u>				ue (Part VI					and/11e	· · · ·	• • • •				129.			395.
,	12	Total re	venue	e - add line	28 8 through	oh 11 (mus	ST POLIST P	art VIII	column (/ Δ\ line	12)			2,289,		2.		217.
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Expenses	I						. u. //	, ,, -	}			• • • • •		 ;				
Ä	1			sing expen					1					1,985,	· ·		017	630
				ses (Part I)														630.
	18	Total e	xpense	es Add lın	es 13-17	(must equa	al Part IX,	column	(A), line	25)				1,985,				630.
- 60		Revenu	ue less	s expenses	Subtract	t line 18 fro	m line 12	<u></u>	· · · · ·	<u> </u>		<u> </u>			857.			587.
Net Assets or Fund Balances].		ginning of			of Yea	
ala	20		,	(Part X, line]		1,145,		1,		563.
Z B	21			es (Part X, I											858.			629.
Ž.	22	Net ass	sets or	r fund bala	nces Sul	btract line 2	1 from lin	e 20						1,067,	347.	1,	337,	934.
Pa	rt II	Sig	natur	e Block														
		Under	penalti	es of perjur	y, i declar	e that I hav	e examine	d this re	tum, incli	uding a	companyir	ng schedules	and s	tatements,	and to ti	he best of	my kno	owledge
		and be	ener, it	is fore, cor	reet, and	complete D	echaration	of prepa	arer (othe	r than c	officer) is b	pased on all	ınform	ation of wi	high pres	parer has a	ny kno	wledge
S	ign	👞 _	/	4	رر									17/	21/2	2010		
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Use	Only	if self-e		∋d),		RY PARK P						••••		hone no		212-663		77
May	the II	RS disc	uss th	ns return v												X Ye		No

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

JSA 9E1010 1 000 K4H00Z M261

Form 9	90 (2009) 22-3075802			Page 3
Part				
			Yes	No
1 `	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	. 1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?			X
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	· -3-		
-			1	
_	Schedule C, Part II	• 4	-	<u> </u>
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	-	١,,	
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	· 5	X	<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	1		
	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,"			
	complete Schedule D, Part III	. 8	l	X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part N	. 9		Х
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	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	-		5 4 .3
	Schedule D, Part VI	-	1	- , -
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more	-	2.5	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		1	
•	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 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		l	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	·			-
4.2	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,"	<u> </u>	X	
404	complete Schedule D, Parts XI, XII, and XIII	- }	_^	—
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No. 15 and 15 to	⊣	1]
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	<u> </u>		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising	•		١
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	· 14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	. 15	ļ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	. 16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	. 17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	. 19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			X
		_ 	•	

Par	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			l .
	in the United States on Part IX, column (A) line 1? If "Yes," complete Schedule I, Parts I and II	21	ļ	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			l v
	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		•	v
	employees? If "Yes," complete Schedule J	23	_	X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			١,,
	24b through 24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
	5 , , , , , , , , , , , , , , , , , , ,	24d		<u> </u>
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			ĺ
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			1
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			ĺ
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			ĺ
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			ĺ
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			ĺ
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L	- `, `,		v_, r
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	14	*. *	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part N	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L			ĺ
	Part N	28c		Х
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			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
•	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
•••	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	00		
	organization? If "Yes," complete Schedule R, Part V, line 2	36	,	ĺ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
J /	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R			
		27		х
38	Part VI	37		
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20	х	
	197 Note. All Form 990 filers are required to complete Schedule O	38	000	

Par	t V . Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable		•	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			Ì
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			}
	gaming (gambling) winnings to prize winners?	1 c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax ;		,	Ť
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	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)		. 1	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3 a	X	
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь	Х	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
þ	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		(· p	۲
	and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	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 question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
•	Prohibited Tax Shelter Transaction?	5 c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		•	Х
	organization solicit any contributions that were not tax deductible?	6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۲.		
7	gifts were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		-	
4	and services provided to the payor?	7a		فسلمت
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	,		-1
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	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?	9 b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
4.0	amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Form 9	90 (2009) 22-3075802			Page 6
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 71 for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, o Schedule O. See instructions.			
Sect	ion A. Governing Body and Management			
			Yes	No
а	Enter the number of voting members of the governing body		. '	
1b	Enter the number of voting members that are independent	٠, ا	Erry 5	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	* .] 1		- :
_	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Х	<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	<u></u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	"," ,		
	the year by the following	<u>.</u> :	2333	
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8 b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			Į,
<u></u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 a		<u> </u>
	ion B. Policies (This Section B requests information about policies not required by the Internal enue Code.)			
11000	nue Gode./		Yes	No
40-	Deep the ergonization have level chanters branches or afflicted?	10a	X	
	Does the organization have local chapters, branches, or affiliates?			
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	Х	
111	Desribe in Schedule O the process, if any, used by the organization to review this Form 990	4: 3,	74.1	, , ,
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by	3-		1. 1
10	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	5,	-	
а	The organization's CEO, Executive Director, or top management official	15a]	X
b	Other officers or key employees of the organization	15b		Х
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	-		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		:	
	with a taxable entity during the year?	16a		X
b	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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)		-	
	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 inte	rest		
	policy, and financial statements available to the public	•		
20		ne		
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization DOLCI MGMT SERVICES, 322 EIGHTH AVENUE, SUITE 501, NEW YORK, NY	100	01	
	646-486-3818			

JSA 9E1042 1 000

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Part VII **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A

- 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

Check this box if the organization did not compensate any current officer, director, or trustee (E) (F) Name and Title Average Position (check all that apply) Reportable Reportable Estimated compensation amount of hours per compensation ě from from related other the organizations compensation

		ual trustee ctor	lional trustee		nployee	t compensated /ee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
ROBERT J. CASSILIANO									
CHAIRMAN OF THE BOARD	3.00	X		Х			0.	0	0.
WILLIAM LEEDECKE									
PRESIDENT & DIRECTOR	3.00	Х		Х			0.	0	0.
DAVID SCHIRMACHER	_								
VICE PRESIDENT & DIRECTOR	3.00	X		Х			0.	0	0.
RUSS MYKYTYN									
DIRECTOR	3.00	X					0.	0	0.
JULI IERULLI									
DIRECTOR	3.00	Х					0.	0.	0.

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and I	lig	hest Compensat	ed Employ	ees (co	ontinued,)
(A)	(B)	(C)						(D)	(E)		(1	=)
Name and title	Average		 i		_	that app		Reportable	Reporta			nated
	hours per week	Individual trustee or director	Institutional	Officer	Key employee	팔호	Former	compensation from	compensa from rela			unt of ner
		dividual i	tutio	ĕ	eg .	est	ıer	the	organizat	ions		nsation
		9 =	nal		loye	e g		organization (W-2/1099-MISC)	(W-2/1099-	MISC)		the
		stee	truste		•) pen		(VV-2/1099-WISC)		- 1	-	ization elated
			60			Highest compensated employee						zations
												
		-		_	_			 				
								1		1		
									· · · · · · · · · · · · · · · · ·			
										- 1		
								_				
								:				
			-		_							
		-		_	-							
		i								- 1		
												
										1		
		-										
		İ						† - · · · · · · · · · · · · · · · · · · ·				
1b Total			• • •		٠.		▶	0.		0.		0.
2 Total number of individuals (including but not	limited to t	hose	ıste	d al	bov	e) who	o re	ceived more than	\$100,000 іг			
reportable compensation from the organization	n ▶	()									
											\	es No
3 Did the organization list any former office												
employee on line 1a? If "Yes," complete Schede	ule J for su	ch ınd	ividi	ual				• • • • • • • • • •			3	Х
4 For any individual listed on line 1a, is the												
the organization and related organizations												X
ındividual											4	- ^ 1
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"											5	X
Section B. Independent Contractors	complete	Scrieu	uie c	3 101	Su	cii pei	301	<u>, , , , , , , , , , , , , , , , , , , </u>	<u></u>	··-	131	
1 Complete this table for your five highest	compensat	ted in	iden	enc	ient	cont	rac	tors that receiver	d more tha	n \$10	0.000 0	
compensation from the organization	oomponed.		, u o p					nord that roddivor		• . •	0,000	•
(A)							Т	(B)			(C)	
Name and business address Description of services Compensation												
DOLCI MANAGEMENT SERVICES, INC.							A	DMINISTRATIO	N		222	,917.
322 EIGHTH AVE, SUITE 501, NY, NY	10001						\prod					
							\perp					
2 Total number of independent contractors (iii				rite		_	se I	isted above) who	received			į
more than \$100,000 in compensation from th	e organiza	tion 🕽				1						

Par	t VII	Statement of Revenue			22-3075802		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
fts, grants amounts	1a b c	Federated campaigns	1a 1b				
Contributions, gifts, grants and other similar amounts	d e f	Related organizations	1d 1e 1f	w			
Conf	g h	Noncash contributions included in lines 1a-1f		* ³ / ₂ ^ 0	***	, ,	, <i>j</i>
Sevenue	2 a	CONFERENCES	Business Code	1,963,567	1,963,567		2 22 1
Program Service Revenue	b c d	MEMBERSHIP		169,200	169,200		
Progra	f g	All other program service revenue Total. Add lines 2a-2f	<u></u>	2,132,767	o mar against an annaga begins or the		
	3 4 5	Investment income (including dividends other similar amounts)	bond proceeds	1,055. 0.			1,055
	6a b	Gross Rents	al (II) Personal			11 / () () () () ()	
	c d	Rental income or (loss)	. ▶	0			
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis			4		·
	c d	and sales expenses		0	-		
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)		,		-	-
ther		See Part IV, line 18	. b				
Ō	с 9 а	Net income or (loss) from fundraising ex Gross income from gaming activities See Part IV, line 19		0			
		Less direct expenses	. b	0			
	10a	Gross sales of inventory, less returns and allowances	. а				
		Net income or (loss) from sales of inven	tory ▶	0			
	11a	Miscellaneous Revenue	Business Code	46,296.		46,296	
	b	ADVERTISING		-0,200		.0,230	
	C	OTHER		8,099.	8,099		
	d e	All other revenue		54,395.			
	12	Total Revenue. See instructions		2,188,217.	2,140,866	46,296.	1,055

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. parizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A)	(B)	(C)	
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
_	•			, of	
2	Grants and other assistance to individuals in	:			
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				, , , , , , , , , , , , , , , , , , , ,
	organizations, and individuals outside the				
	US See Part IV, lines 15 and 16		····	3	<u> </u>
4	Benefits paid to or for members		·		* * * * * * * * * * * * * * * * * * * *
5	Compensation of current officers, directors,	NONE			
_	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)	222,917.			
	Management	12,495.			
	Legal	6,773.			
	Accounting	0,773.			<u> </u>
	Lobbying				
	Professional fundraising services See Part IV, line 17		7 X X X X X Y X X X X X X X X X X X X X	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Investment management fees				
g					- · · · ·
12	Advertising and promotion	260,165.		-	
13	Office expenses	14,516.			
14	Information technology	11/310.	 		
15 16	Royalties				
17	Travel	15,844.			
18	Payments of travel or entertainment expenses		 -		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,338,112.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	3,232.			
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)	^		' · · ·	••
а	MISCELLANEOUS	43,576.			
b			. <u></u>		
С					
d					
е					
f	All other expenses				
	Total functional expenses. Add lines 1 through 24f	1,917,630.			
26	Joint Costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	474,606.	1	732,165.
	2	Savings and temporary cash investments	591,417.	2	592,474.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	67,236.	4	52,370.
	5	Receivables from current and former officers, directors, trustees, key		,,.	
		employees, and highest compensated employees Complete Part II of Schedule L)	 . 5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	* * *	ν, ο. ν, ζ, ο. ν, ζ	
s		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7_	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	11,946.	9	35,554.
	10a	Land, buildings, and equipment cost or 10a		~	
		other basis Complete Part VI of Schedule D		7.	
	b	Less accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		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)	1,145,205.	16	1,412,563.
	17	Accounts payable and accrued expenses	38,958.	17	17,829.
	18	Grants payable		18	
	19	Deferred revenue	38,900.	19	56,800.
	20	Tax-exempt bond liabilities		20	
s	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	, -		
þi		employees, highest compensated employees, and disqualified		, .	
Ľ		persons Complete Part II of Schedule L		22	latina katat Bara Akaban. L
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	- · · · · · - · · · · · · · · · · · · ·
	26	Total liabilities. Add lines 17 through 25	77,858.		74,629.
es –		Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	1,067,347.	27	1,337,934.
3alá	28	Temporarily restricted net assets	, = = , , = = , .	28	=, ==, , , , , , , , , , , , , , , , ,
Ā	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			. ,
ts c	30	Capital stock or trust principal, or current funds		30	
86	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	<u> </u>
Net Assets	33	Total net assets or fund balances	1,067,347.	33	1,337,934.
_	34	Total liabilities and net assets/fund balances	1,145,205.	34	1,412,563.
		. Star mas mass and not association balances	1,140,200.	34	1, 112, 303.

Part XI Financial Statements and Reporting		1	
,		Yes	No
1 Accounting method used to prepare the Form 990. L Cash X Accrual Cher		۱۰۰۰,	\$ 1
If the organization changed its method of accounting from a prior year or checked "Other," explain in			١
Schedule O			`
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	1	X
b Were the organization's financial statements audited by an independent accountant?	2b	Х	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigi	ht of	T	
the audit, review, or compilation of its financial statements and selection of an independent accountant?	· 2c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain	ın		-4 '
Schedule O			
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer	re l		, ,
issued on a consolidated basis, separate basis, or both	1.	1	, 4
Separate basis Consolidated basis Both consolidated and separate basis		, ř	100
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	ı .	"	-
the Single Audit Act and OMB Circular A-133?	3a		Х
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			
	Form	990	(2009

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

► 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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organizations Complete Part III											
Na	me of organization			Employer identi	fication number							
7X2	4 EXCHANGE, INC.				75802							
Pai	rt I-A Complete if the	organization is exempt under	r section 501(c) or	r is a section 527 organ	nization.							
1	Provide a description of the	ne organization's direct and indirect	political campaign	activities in Part IV								
2	Political expenditures			▶ \$								
3	Volunteer hours			· · · · · · · · · · · · · · · · · · ·								
	Openhate if the		4: 504(-)(2)									
		organization is exempt under			· · · · · · · · · · · · · · · · · · ·							
1		excise tax incurred by the organizat										
2	Enter the amount of any excise tax incurred by organization managers under section 4955 . ▶ \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year?											
ა 4a	Was a correction made?											
b	If "Yes," describe in Part IV	; · · · · · · · · · · · · · · · · · · ·			L Yes L No							
Pai	Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).											
1		expended by the filing organizatio	n for section 527 ex	xempt function								
	activities			> \$								
2	Enter the amount of the fil	ing organization's funds contributed	d to other organizati	ons for section								
		vities										
3	· · · · · · · · · · · · · · · · · · ·	penditures Add lines 1 and 2 Er										
												
4		file Form 1120-POL for this year? .										
5		es and employer identification number										
		anization listed, enter the amount eived that were promptly and direc										
		ical action committee (PAC) If additional										
		T	<u> </u>	T	1							
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and							
				funds If none, enter -0-	promptly and directly							
					delivered to a separate political organization If							
					none, enter -0-							
			_									
												
												

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

Schedule C (Form 990 or 990-EZ) 2009

JSA 9E1264 1 000

Sche	dule C (Form 990 or 990-EZ) 2009			22-3	073602	Page 2
Pa	rt II-A Complete if the cunder section 50		npt under section	501(c)(3) and	d filed Form 5768 (ele	ection
		ganization belongs to ganization checked			sions apply.	
	Lim	its on Lobbying Expen ditures" means amou	ditures		(a) Filing organization's totals	(b) Affiliated group totals
 1 а	Total lobbying expenditures t	o influence public opin	ion (grass roots lobb	ying)	 	
b	Total lobbying expenditures t					
c	Total lobbying expenditures (-	• •			
d						
e	Total exempt purpose expen-	ditures (add lines 1c ar	nd 1d)			
f	Lobbying nontaxable amount columns	Enter the amount fro	m the following table	n both		
	If the amount on line 1e, column	ı (a) or (b) is: The lobbyir	ng nontaxable amount i	s:		
	Not over \$500,000	20% of the	amount on line 1e			
	Over \$500,000 but not over \$1,0	000,000 \$100,000 p	lus 15% of the excess	over \$500,000	3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
	Over \$1,000,000 but not over \$1	,500,000 \$175,000 p	lus 10% of the excess	over \$1,000,000		المراجع المراج
	Over \$1,500,000 but not over \$1	17,000,000 \$225,000 p	lus 5% of the excess o	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				133
	Grassroots nontaxable amou					
_	Subtract line 1g from line 1a			. 	•	
i	Subtract line 1f from line 1c					
j	If these is an amount other the			_		□vaa □Na
	section 4911 tax for this year	<u>′</u>	 	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	. Yes No
				n do not have	to complete all of the f	īve
		Lobbying Expe	nditures During 4-Y	ear Averaging F	Period	
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a	Lobbying non-taxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))				A STATE OF S	
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
	Grassroots ceiling amount (150% of line 2d, column (e))				7	
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

		(election under section 501(h)).	1 .						
			((a)		a) (b)		b)	
			Yes	No		Am	ount		
1	During	the year, did the filing organization attempt to influence foreign, national, state or local				, ,			
	legislat	ion, including any attempt to influence public opinion on a legislative matter or	- :	, ,				٠,	
	referen	dum, through the use of				,	· ·		
а	Volunte	ers?	<u> </u>		-	, ,	4.	*	
b		aff or management (include compensation in expenses reported on lines 1c through 1i)?	<u></u>	ļ			24		
С		advertisements?	ļ	<u> </u>					
d	_	s to members, legislators, or the public?	ļ	ļ					
e		tions, or published or broadcast statements?							
f		to other organizations for lobbying purposes? contact with legislators, their staffs, government officials, or a legislative body?		ļ					
g h		demonstrations, seminars, conventions, speeches, lectures, or any similar means?							
i									
j									
ј 2 а		activities in line 1 cause the organization to be not described in section 501(c)(3)?	-	. 4	<u> </u>	, (
- a b		enter the amount of any tax incurred under section 4912	1,3	,	. ,,``	•			
c		enter the amount of any tax incurred by organization managers under section 4912	1	,					
d		ling organization incurred a section 4912 tax, did it file Form 4720 for this year?		,			,		
Pa	rt III-A		(c)(5)	. or s	section				
		501(c)(6).	(-/(-/	,,	_				
			-				Yes	No	
1		ubstantially all (90% or more) dues received nondeductible by members?				1	<u> </u>	X	
2		organization make only in-house lobbying expenditures of \$2,000 or less?				2	Х	ļ	
3		organization agree to carryover lobbying and political expenditures from the prior year?						X	
Pa	rt III-B	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, "Yes."							
1	Duos a	ssessments and similar amounts from members							
2		162(e) nondeductible lobbying and political expenditures (do not include amounts of	 Dolitia		1				
_		es for which the section 527(f) tax was paid).	pontic	di	*				
а	Current	• ,			2a				
b		ver from last year			2b	_			
c	Total				2 c				
3	•	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du	es		3				
4		es were sent and the amount on line 2c exceeds the amount on line 3, what portion	•	 ne	· ·				
		does the organization agree to carryover to the reasonable estimate of nondeductible is							
		itical expenditure next year?	-	-	4				
5	Taxable	amount of lobbying and political expenditures (see instructions)	<u> </u>	<u> </u>	5				
Pa	rt IV	Supplemental Information							
		is part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, te this part for any additional information							

Schedule C (Fo	orm 990 or 990-EZ) 2009	22-3075802 Page 4
Part IV	Supplemental Information (continued)	

JSA

SCHEDULE D (Form 990)

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.

OMB No 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

22-3075802 7X24 EXCHANGE, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 5 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, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of a 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 Year 2 b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ 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 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 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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. 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 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:

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

Schedule D (Form 990) 2009

Par	t III Organizations Maintaini	ng Collections	of Art, Histor	ical Treasure	s, or Ot	her Similar A	Assets (d	ontinue	<u> </u>
	•						_		
3	Using the organization's acquisition		other records,	check any of the	he follow	ving that are a	significan	t use of its	8
	collection items (check all that app	ly)	 -						
а	Public exhibition		d	Loan or ex	change	programs			
b	Scholarly research		e	Other					
С	Preservation for future ge								
4	Provide a description of the organic	zation's collections	s and explain h	low they further	r the org	anization's ex	empt pur	oose in	
	Part XIV								
5	During the year, did the organization	on solicit or receiv	e donations of	art, historical t	reasures	s, or other simil	lar		
	assets to be sold to raise funds rati	her than to be ma	intained as par	t of the organiz	zation's d	collection?	[Yes	No
Par	t IV Escrow and Custodial A IV, line 9, or reported an				n answe	ered "Yes" to	Form 99	0, Part	· · · · · ·
			<u> </u>	<u> </u>					
1a	is the organization an agent, truste	e, custodian or ot	her intermedia	ry for contribut	ions or c	ther assets no	ot		
	included on Form 990, Part X?			-				Yes	No
h	If "Yes," explain the arrangement in								
•	17 Too, explain the arrangement in	in all years and our	inplote the folio	wing table		Δ	mount		
С	Beginning balance				10		anount		
	Additions during the year								
d	Distributions during the year				-				
e									
r	Ending balance					· · · · · · · · · · · · · · · · · · ·	Т	1	No
	Did the organization include an am		u, Part A, line 2				L	Yes	□ NO
	If "Yes," explain the arrangement in		- · · · · · · · · · · · · · · · · · · ·	1 113/ 11 4- 5		D - + N / 1	- 40		
Par	t V Endowment Funds. Con							/-\ =	
	Danis and sand halance	(a) Current Year	(b) Prior yea	r (c) Two ye		(d) Three ye		(e) Four y	ears back
1 a	Beginning of year balance					* ****	* * * * * *	- `	
b	Contributions		ļ		*, , ,				· · · · · · · · · · · · · · · · · · ·
С	Net investment earnings, gains,								
	and losses	 	ļ		3, ,	;		, 3, , ,	* جامق
d	Grants or scholarships				•		<i>,</i> .,	<u> </u>	, ,
е	Other expenditures for facilities .						, 3,	عد اد م ما	
	and programs			*, , , 2,,	- 2 2	7		, , , , , , , , , , , , , , , , , , ,	, 7 (Z)
f	Administrative expenses			. ` `	, ,	7 4		×5	\ 1 ₃ *
g	End of year balance		1		• -	, -	-	, -	
2	Provide the estimated percentage	of the year end ba	alance held as						
а	Board designated or quasi-endown	nent ▶	<u></u> %						
b	Permanent endowment ▶	%							
С	Term endowment ▶	%							
3a	Are there endowment funds not in	the possession o	f the organizat	on that are he	ld and a	dministered for	the		
	organization by							Y	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related org	anizations listed	as required on s	Schedule R? .				3 b	
4	Describe in Part XIV the intended i		•					LL_	
Par	t VI Investments - Land, Buil				rt X. lin	e 10			
	Description of investment		t or other basis	(b) Cost or othe) Accumulated	10	i) Book valu	
			vestment)	basis (other)	. '	depreciation	· ` `	2, DOOK 1010	•
1a	Land								
b	Buildings								
2	Leasehold improvements		·				·		
d	Equipment						 		
_	Other						ļ		
e Tota			om 000 Port	Coolumn (D) III	10/01	1	 		
<u>ı ota</u>	II. Add lines 1a through 1e (Column	i (u) must equal F	unn 990, Part X	., coluinn (b), III	ie iu(c)	<u>,</u>			

Part VII	Investments - Other Securities. Sec	e Form 990, Part X, In	e 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Einancial de	erivatives		
	d equity interests		
-		• •	
04.0			
Total. (Columi	n (b) must equal Form 990, Part X, col (B) line 12)	>	
Part VIII	Investments - Program Related. Se	e Form 990, Part X, lir	ne 13
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
			
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 13.)	>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Part IX	Other Assets. See Form 990, Part 2	K, line 15	
		(a) Description	(b) Book value
		·	
		. <u> </u>	
			
			
		 	
	n (b) must equal Form 990, Part X, col (B) line 15).		
Part X	Other Liabilities. See Form 990, Pa		
1.	(a) Description of liability	(b) Amount	
Federal inc	ome taxes		
	-, · · · · · · · · · · · · · · · · · · ·	 	-
			-
			-
			-
			4
			4

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Schedu	(of the 300/2000		rage 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem		2 100 217
1,	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,188,217.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,917,630.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	270,587.
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		10	270,587.
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret		
1	Total revenue, gains, and other support per audited financial statements	. 1	2,188,217.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2	
а	Net unrealized gains on investments	`	
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	2,188,217.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b		
_ 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	2,188,217.
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	turn	
1	Total expenses and losses per audited financial statements	1	1,917,630.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	. 3	1,917,630.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	_] - [
b	Other (Describe in Part XIV)	7	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	1,917,630.
Part	XIV Supplemental Information		
and 21	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pa o, 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 art to provide any additional information	rt IV, lines to comple	1b te
SEE	PAGE 5		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
		School	lule D (Form 990) 2009
		Conet	( ,

LIABILITY FOR UNCERTAIN TAX POSITIONS PART X - QUESTION 2

THE EXCHANGE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE EXCEPT FOR A TAX ON ITS NET UNRELATED BUSINESS INCOME. THE UNRELATED BUSINESS INCOME CONSISTS OF CERTAIN ADVERTISING INCOME. PROVISION FOR SUCH TAXES HAS BEEN MADE IN THE FINANCIAL STATEMENTS. AS OF DECEMBER 31, 2009 AND DECEMBER 31, 2008, NO AMOUNTS WERE RECOGNIZED FOR UNCERTAIN TAX POSITIONS TAKEN DURING THOSE YEARS. IN ADDITION, THE EXCHANGE'S TAX RETURNS FOR THE YEARS 2006 AND FORWARD ARE SUBJECT TO REVIEW BY THE APPROPRIATE TAXING AUTHORITIES.

#### 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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization 7X24 EXCHANGE, INC. Employer identification number

22-3075802 ATTACHMENT 1

PART VI, SECTION A - QUESTION 3

GOVERNANCE, MANAGEMENT & DISCLOSURE

DOLCI MANAGEMENT SERVICES, INC. MANAGES ALL ADMINISTRATIVE DUTIES.

GOVERNANCE, MANAGEMENT & DISCLOSURE

PART VI, SECTION A - QUESTION 6 AND QUESTION 7A

THE MEMBERS ELECT THE GOVERNING BODY THROUGH AN ANNUAL BALLOT PROCESS.

GOVERNANCE, MANAGEMENT & DISCLOSURE

PART VI, SECTION A - QUESTION 8B

THERE ARE NO COMMITTEES THAT HAVE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

GOVERNANCE, MANAGEMENT & DISCLOSURE

PART VI, SECTION B - QUESTION 11A

THE FORM 990 IS PRESENTED TO THE CHAIRMAN OF THE BOARD PRIOR TO FILING.

GOVERNANCE, MANAGEMENT & DISCLOSURE

PART VI, SECTION C - QUESTION 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

Name of the organization 7X24 EXCHANGE, INC.

Employer identification number 22-3075802

ATTACHMENT 2

### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO BE THE LEADING KNOWLEDGE EXCHANGE FOR THOSE WHO DESIGN, BUILD, MAINTAIN AND USE MISSION-CRITICAL ENTERPRISE INFORMATION

INFRASTRUCTURES. THE EXCHANGE'S GOAL IS TO IMPROVE END-TO-END RELIABILITY BY PROMOTING DIALOGUE AMONG THESE GROUPS.

# Form **8868**

(Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Internal Revenue S		► File a separate application for each return.					
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
• If you are find not complete	iling for ar te Part II u	n Additional (Not Automatic) 3-Month Extension, complete only Part II (on page nless you have already been granted an automatic 3-month extension on a prev	e 2 of this lously filed	form) d Form (	3868		
Part I Auto	matic 3-	Month Extension of Time. Only submit original (no copies needed).	_				
		o file Form 990-T and requesting an automatic 6-month extension - check this bo	ox and cor	mplete			
Part I only					▶ 📖		
All other corpetime to file inco		including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 eturns	04 to re	quest a	n extension of		
one of the reference electronically returns, or a co	turns note f (1) you omposite	Generally, you can electronically file Form 8868 if you want a 3-month auto- ed below (6 months for a corporation required to file Form 990-T). However, want the additional (not automatic) 3-month extension or (2) you file Forms or or consolidated From 990-T. Instead, you must submit the fully completed and on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Cil	er, you ca 990-BL, 6 signed pa	annot fil 5069, o age 2 (F	le Form 8868 r 8870, group Part II) of Form		
Type or	Name of	Exempt Organization	Employe	r identific	cation number		
print		4 EXCHANGE, INC.	22-3	07580	2		
File by the	Number,	street, and room or suite no. If a P.O. box, see instructions					
due date for filing your		EIGHTH AVENUE					
return See	City, tow	n or post office, state, and ZIP code. For a foreign address, see instructions					
instructions		YORK, NY 10001			<del></del>		
		be filed (file a separate application for each return)					
X Form 990			n 4720				
Form 990			m 5227 m 6069				
Form 990			n 8870				
		1 0111 104174					
		care of ► DOLCI MGMT SERVICES,  546 486-3818 FAX No ►			مد تد		
retepriorie	NO P _ C	140 400-3010 PM NO P					
_		pes not have an office or place of business in the United States, check this box Return, enter the organization's four digit Group Exemption Number (GEN)			▶ ☐		
for the whole g	group, che		d attach a	a list wi			
				oxton	cion of time		
until		atomatic 3-month (6 months for a corporation required to file Form $08/15$ , $200$ , to file the exempt organization return for the organization of section is return for					
ioi the of	garnzanor	13 Telum IOI					
<b>▶</b> X	calendar	year <u>20,00</u> or					
▶	tax year	beginning, and ending		,	<del></del>		
2 If this tax	year is fo	r less than 12 months, check reason.  Initial return  Final return	Change	ın accc	ounting period		
3a If this ap	polication	is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, I	ess anv				
-	nonrefundable credits. See instructions						
		s for Form 990-PF or 990-T, enter any refundable credits and estimated tax pa	ayments	3a \$			
made Inc	clude any	prior year overpayment allowed as a credit	•	3b \$	5		
c Balance	Due. Sub	tract line 3b from line 3a Include your payment with this form, or, if required,	deposit				
		or, if required, by using EFTPS (Electronic Federal Tax Payment System	n) See				
Instructio				3c \$			
Caution. If you	are going	to make an electronic fund withdrawal with this Form 8868, see Form 8453-EC	) and Forr	n 8879-l	EO		
for payment in							
For Privacy Ad	ct and Pa	perwork Reduction Act Notice, see Instructions.		Form 88	68 (Rev 4-2009)		