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Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

benefit trust or private foundation)

Open to Public

•		nue Service	I ▶	The organization may have to	use a copy of this	return to satisfy stat	e reportin	g requirei	ments	Inspect	tion	
A F	or the	2009 calend	ar year, o	r tax year beginning			and endir	ng		, 20		
В	heck if	applicable	Please	C Name of organizationST . KAT	HERINE FOUND	ATION				Employer identi	fication no.	
	ddress	change	use IRS label or	Doing Business As	·-					33-0920922	2	
	lame ch	nange	print or	Number and street (or P O box if r	nail is not delivered to	street address)		Room/suite	, [Telephone num	ber	
<u> </u>	nitial ret	urn	type. See	P. 0. BOX 4140			_			(310)530-1	.511	
T	emina	ted	Specific Instruc-	City or town, state or country, and	ZIP + 4					G Gross receipts		
A	mende	d return	tions.	TORRANCE, CA 90510-4	1140					\$	25,168	
A	pplicati	on pending	F Name	and address of principal officer				11/-> 1- 1-				
				·				affilia	s a group ret ates?	um for Ye	es XNo	
			X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527	· · <u> </u>		H(b) Are a	all affiliates in	cluded? Yest (see instructions	es 🗌 No	
<u>J_ V</u>	Vebsite:	N/A						H(c) Grou	p exemption	number	<u> </u>	
K F	orm of	organization	Corporation	Trust Association Othe	<u>r 🕨</u>	L Year of forma	ation	M	State of lega	f domicife CA		
Par	<u>rţ </u>	Summar		<u></u>								
	1	Bnefly descri	be the org	ganization's mission or most sigr	nificant activities	ASSITANCE	TO ST	. KATHE	ERINE			
Δ												
A C G												
iv	1											
v e i r	2			the organization discontinued it	•	•			1 1			
t n i a	3		_	bers of the governing body (Par					<u> </u>			
e n	4			nt voting members of the govern				• • • • •	• 4			
s c e	5		•	yees (Part V, line 2a) · · · ·			• • • • •	• • • • •	. 5			
&	6			eers (estimate if necessary)				• • • • •	. 6			
				ousiness revenue from Part VIII,				• • • • •	· · 7a			
	Ь	Net unrelated	Dusiness	s taxable income from Form 990	-1, line 34 • • •		····	• • • • •	· · 7b			
R		0		40 (Dod) (III - bo o 45)			-	Prior Ye		Current Ye		
e v	8			ts (Part VIII, line 1h)			∵		36,711		8,440	
e	9			ue (Part VIII, line 2g)			``		7,106		2 702	
n u	10	Investment in	ncome (Pa	art VIII. cojumn (A) Lines 3, 4, ar	10 /0) • • • •		``				3,782	
е	11			II, column (A), lines 5, 6d., 8c, 9c es/8/throughol 1, must equal Hai					11,347 55,164		8,446	
	12			ounts paid (Part IX, column,(A),					12,800		12,125	
	13			nembers (Part IX, column (A), I					12,800		12,125	
E	15	Salaries other	or compar	isation, employee benefits (Part	IX column (A) lir	nes 5-10\						
X P	1			g fees (Part IX, column (A) line								
e n				nses (Part IX, column (D), line 2		0						
s			-	X, column (A), lines 11a-11d, 11	·		├		1,722		2,677	
s	18	•	•	nes 13-17 (must equal Part IX, o	•	5)			14,522		14,802	
	19	•		s Subtract line 18 from line 12	• • •	•	—		40,642		5,866	
	 		- 					inning of Cu		End of Ye	_ _	
Assets	20	Total assets	(Part X. lir	ne 16) • • • • • • • • • • •					261,105		66,971	
or Fund	21	Total liabilitie	•	•					- -			
Bad⊦ ances	22			inces Subtract line 21 from line	20				261,105	2	66,971	
Par	t II	Signatu	re Block	k						 -		
	<u> , </u>	Under penaltr	es of perjury	, I declare that I have examined this ret								
		and belief, it is	s true, correct	ct, and complete Declaration of prepare	er (other than officer)	is based on all information.\	on of which p	preparer ha	s any knowle	dge		
Sign	1		North	L Salelian	(TETER W.	VasiLion	TR	EAS-	u	122.10		
Here	•	Signatur	e of officer	0 // 1//					Date			
			/0//	into Lyndle	<u>~</u>							
		Type or	print name a	and title								
		Preparer's	parer's Date Chec							ntifying number		
Paid		signature	7				self- employed	▶ □ (s	see instructioi	ns)		
Prepa	rer's	04-16-2010										
Use C		Firm's name (or yours	ALECK SANDLER and C			EIN	, <u> </u>				
	•	if self-employed), 292 SO LA CIENEGA BLVD #212										
		<u> </u>		BEVERLY HILLS, CA			Ph	one no 🕨	310-652			
May t	he IRS	discuss this	return with	the preparer shown above? (se	ee instructions)	· · · · · · · · · · · · · · ·			• • • • •	· · ·[X]Yes	No	

	1990 (2009) ST. RATHERINE FOU					33-0920922	· Page 2
	rt III Statement of Program		<u>plishments</u>				
1	Briefly describe the organization's mission						
	ASSITANCE TO ST. KATHERINE		 				
	_						
2	Did the organization undertake any sign	ificant program service	ces during the year wh	ich were not listed on			
	the prior Form 990 or 990-EZ?					· · · TYes	X No
	If "Yes," describe these new services on	n Schedule O					
3	Did the organization cease conducting,		nanges in how it condu	cts, any program			
	services?		=			· · · Yes	X No
	If "Yes," describe these changes on Sch	nedule O					
4	Describe the exempt purpose achievem		rganization's three larg	est program services	by expenses		
•	Section 501(c)(3) and 501(c)(4) organization					nd	
	allocations to others, the total expenses						
	unocations to entere, the total experience	, and revende, it any,	Tor each program con	noo roportoa			
4a	(Code) (Expenses \$		including grants of) (Revenue	\$	
44	SCHEDULE ATTACHED		including grants or 4	') (itevelide	Ψ	 ′
	SCHEDULE ATTACHED						
				<u> </u>		<u> </u>	
	···						
	·	 					
							
46	/Codo \ /Evropoo C		including grants of \$) (Revenue	\$	·····
4b	(Code) (Expenses \$ _		including grants or 4	') (Revenue	Ψ	
							
							
						_ 	
			<u> </u>				
			·				
				_			
							
							
			<u> </u>		 		
							
4c	(Code) (Expenses \$		including grants of \$	<u> </u>) (Revenue	\$)
40	(Code) (Expenses \$_		including grants or w	') (Itevellue	—	
							
							
		<u></u>					
							
		·					
	Other program convices (December 2)	hadula (C.)					
4d	Other program services (Describe in Sci) (Bourse &		,	
4.5		including grants of	·) (Revenue \$			
4e	Total program service expenses >			_			

EEA

Pa	rt IV Checklist of Required Schedules			_
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4	i	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I · · · · · · · · · · · · · · · · · ·	6	j	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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
-	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		i	
•	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	1	}	
	complete Schedule D, Part IV · · · · · · · · · · · · · · · · · ·	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	ł	Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	·•		
••	VII, VIII, IX, or X as applicable • • • • • • • • • • • • • • • • • • •	11		Х
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
•	Schedule D, Part VI			
_	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		İ	
_	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	i		
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	.		
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		- !	
	Schedule D, Parts XI, XII, and XIII · · · · · · · · · · · · · · · · ·	12		X
12A	What the consensation is higher than the state of the decision of the state of the			
	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		- 1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-+	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
-	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			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	ŀ	v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	-"	\dashv	<u>X</u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	-	v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		- +	<u>X</u>
••	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<u>X</u>
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	- ' 0		X_
15	If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · ·	19	1	v
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u>X</u>
	and diganization operate one of more hospitals. If i es, complete ocheque if	~~		Λ

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Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 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 24a 24b through 24d and complete Schedule K. If "No," go to line 25 X 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d q 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a X Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee. substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 Х 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A 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 28b Х c 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. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 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 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 X

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

19? Note. All Form 990 filers are required to complete Schedule O

Pa	rt 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 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return • • • • • 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)		: [
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return? $\cdots \cdots	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)^{9} \cdot	4a		X
b	If "Yes," enter the name of the foreign country			_
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts		ŀ	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • •	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? •••••••••	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or]	J	
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	· _		
	and services provided to the payor?	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		<u>X</u>
a	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7.	ļ	37
•		7e 7f		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		<u>X</u>
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	<u>'9</u>		X
••	required?	7h		Х
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		Х
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	Did the organization make any taxable distributions under section 4966?	9a	ŀ	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			·
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·		- 1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·	ł	1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1	
	amounts due or received from them.) · · · · · · · · · · · · · · · · · · ·			
12a	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		000 10	000:
	EEA .	rorm	990 (2	:UU9)

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Section A. Governing Body and Management Yes No ٥ Enter the number of voting members of the governing body · · · · · 1a ь Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Does the organization have local chapters, branches, or affiliates? 10a X b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO. Executive Director, or top management official Other officers or key employees of the organization 15b 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 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply X Upon request Own website Another's website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ PETER VASILON (310)530-1511

PO BOX 4140 Torrance, CA 90510

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order, individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any current officer, director, or trustee (D) (E) (F) Reportable Reportable Name and Title Average Position (check all that apply) Estimated It d It nr I nr dur su I se t s vt c I t I et t e de o ue H c e m g m p l e e n y t s e t K e y hours per ç compensation compensation amount of o r m week from related other organizations compensation the cer i t t e u e e m p l o y e organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related a o organizations e SCHEDULE ATTACHED

· Page **8**

Part VII Section A. Officers, Directors, Trustees (A)	(B)	T		(C)			(D)	(E)		(F)	
Name and Title	Average hours per week	ltd nrı dur ıse vtc ıet	d l t I nr I s u s e t s I c I t e t t e	Office		Hce I om g mp heeoy t se t e	F	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con	Estimater imount of other mpensal from the rganizati and relate ganization	of tuon e tion ted
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h Tatal								0	0	-		
Total number of individuals (including but not limited							re th			1	 -	
reportable compensation from the organization									0		<u> </u>	T
Did the organization list any former officer, director of	-										Yes	No
employee on line 1a? If "Yes," complete Schedule J									• • • • • • • •	3_		X
For any individual listed on line 1a, is the sum of repo												
the organization and related organizations greater th							uie .	o for such		4	}	X
Did any person listed on line 1a receive or accrue co							atıor	ı for		<u> </u>		
services rendered to the organization? If "Yes," comp	•									5		Х
ection B. Independent Contractors Complete this table for your five highest compensate	d independen	t contra	actor	rs th	at re	ceived	l mo	re than \$100,000 c	of			
compensation from the organization												
(A) Name and business addre	ess							(B) Description of s	ervices		(C) ensation	n
								<u> </u>				
								+				
Total number of independent contractors (including both more than \$100,000 in compensation from the organ		to thos	e lisi	ted a	abov	e) who	rec	eived				

Part	VIII_	Statement of Revenue					
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns · · · · · · 1a					
	Ь	Membership dues · · · · · · · · 1b					
Contri- butions,	C	Fundraising events · · · · · · 1c					
gifts,	d	Related organizations · · · · · · 1d					
grants	e	Government grants (contributions) • • 1e	_				
and other similar	f	All other contributions, gifts, grants, and similar amounts not included above	8,440				
amounts	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f	▶	8,440			
			Business Code				
	2a						·
	Ь						
Program Service	С						
Revenue	d						
	е						_
	f	All other program service revenue • • • • • •					_
	g	Total. Add lines 2a-2f	• • • • •				
	3	Investment income (including dividends, interest, and other similar amounts)		3,782	3,782		
	4	Income from investment of tax-exempt bond proceed	ds · · · ▶				
	5	Royalties	▶ ↑				
		(ı) Real	(II) Personal				
	6a	Gross Rents · · · · · ·					
	ь	Less rental expenses · · ·					İ
	C	Rental income or (loss) · · ·					
	d	Net rental income or (loss) • • • • • • • • • • • • • • • • • •	• • • • •				
	7a	Gross amount from sales of assets other than inventory	(II) Other				
	b	Less cost or other basis and sales expenses · · · ·				!	
0	۰	Gain or (loss)					
t h		Net gain or (loss)				İ	
e		Gross income from fundraising					
Г		events (not including \$					
R	l	of contributions reported on line 1c)					
e v		See Part IV, line 18 · · · · · · · a	12,946				
е	ь	Less direct expenses b	4,500				
n u	С	Net income or (loss) from fundraising events • • •	▶	8,446	8,446		
e	9a	Gross income from gaming activities				-	
		See Part IV, line 19 · · · · · · · a					
	ь	Less direct expenses · · · · · · · b					
	С	Net income or (loss) from gaming activities	• • • • • •				
	10a	Gross sales of inventory, less returns and allowances · · · · · · · a					
	ь	Less cost of goods sold b					
		Net income or (loss) from sales of inventory · · · ·	• • • • •				
	_		lusiness Code				
	11a			· -			
	ь						
	С						
	d	All other revenue · · · · · · · · · · · · · · · · · · ·					
		Total. Add lines 11a-11d · · · · · · · · · · · · · · · · · ·	••••				
	12	Total revenue. See instructions	▶ ↑	20,668	12,228	q	

· Page 10

Part IX Statement of Functional Expenses

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

	All other organizations must complete column	II (A) but are not requ	ned to complete cold	inis (b), (c), and (b).	
Do	o not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
_7b	, 8b, 9b, and 10b of Part VIII.	rotal expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22 · · · · · · · · · · · ·	12,125	12,125		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16 · · · · · · · · ·				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	·			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
_	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B) · · · · ·				
7	Other salaries and wages · · · · · · · · · · · ·				
8	Pension plan contributions (include section 401(k)		· - · - · · · · · · · · · · · · · · · ·		
•	and section 403(b) employer contributions) • • • • •				1
9	Other employee benefits				
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·				
11	Fees for services (non-employees)				
	Management · · · · · · · · · · · · · · · · · · ·		ĺ		
a	Legal · · · · · · · · · · · · · · · · · · ·				
b	Accounting	600	600		
¢	<u> </u>	600	600		
þ	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees • • • • • • • • • • • • • • • • • •			 	
g	Other				
12	Advertising and promotion	545	545		
13	Office expenses	1,532	1,532		
14	Information technology				
15	Royalties				
16	Occupancy · · · · · · · · · · · · · · · · · · ·				
17	Travel · · · · · · · · · · · · · · · · · · ·			<u> </u>	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials • • • • • _				
19	Conferences, conventions, and meetings · · · · · ·				
20	Interest · · · · · · · · · · · · · · ·				
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •				
22	Depreciation, depletion, and amortization • • • • • •				
23	Insurance · · · · · · · · · · · · · · · · · · ·				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				1
	5% of total expenses shown on line 25 below)				
a					
b					
C					
q					
6					
f	All other expenses · · · · · · · · · · · · · · · · · ·				
25	Total functional expenses. Add lines 1 through 24f · ·	14,802	14,802	0	0
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	İ			

Par	t X	Balance Sheet			
_		•	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·		1	
	2	Savings and temporary cash investments	185,880	2	191,746
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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			
As		Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
e	8	Inventories for sale or use		8	
S	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or		 	
		other basis Complete Part VI of Schedule D · · · · · 10a			
	ь	Less accumulated depreciation · · · · · · · · · · 10b		10c	
	11	Investments - publicly traded securities · · · · · · · · · · · · · · · · · · ·	75,225	11	75,225
	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)	261,105	16	266,971
\dashv	17	Accounts payable and accrued expenses	201,103	17	200,371
	18	Grants payable		18	<u> </u>
. [19	Deferred revenue		19	
i		Tax-exempt bond liabilities		20	
a	20	·		20	
b	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
-i	22	Payables to current and former officers, directors, trustees, key			
!		employees, highest compensated employees, and disqualified			
1		persons Complete Part II of Schedule L		22	
е	23	Secured mortgages and notes payable to unrelated third parties	-	23	
s	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	0	26	0
		Organizations that follow SFAS 117, check here			
N F		complete lines 27 through 29, and lines 33 and 34.		_	
e u t n	27	Unrestricted net assets		27	
_ d	28	Temporarily restricted net assets		28	
A sB	29	Permanently restricted net assets	···	29	
s a		Organizations that do not follow SFAS 117, check here ► X			
e I		and complete lines 30 through 34.			
ta sn	30	Capital stock or trust principal, or current funds		30	
c	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
oe rs	32	Retained earnings, endowment, accumulated income, or other funds	261,105	32	266,971
`	33	Total net assets or fund balances	261,105	33	266,971
	34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	261,105	34	266,971

	(2009)	

CT.	TATUTO THE	FOUNDATION

33-0920922

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Par	t XI Financial Statements and Reporting			
	•		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its methods of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		l	
	issued on a consolidated basis, separate basis, or both			
{	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		_ X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

EEA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions. OMB No 1545-0047

2009

Open to Public Inspection

		e organi									r identification	number		
	_		NE FOUNDA								0920922			
<u>Pa</u>					y Status (All organiz				See instri	uctions.				
The	orga		-		use it is: (For lines 1 thro	•	•	•						
1	닏				ssociation of churches d		section 1	70(D)(1)(A	.)(1).					
2	Щ)(A)(ii). (Attach Schedul	•								
3	Ц		•	•	rvice organization descri									
4				organization opera	ted in conjunction with a	hospital de	escribed in	section 1	70(b)(1)(A	.)(iii). Entei	r the hospit	al's nan	ne,	
		•	nd state											
5	Ш		•		it of a college or universi	ty owned o	r operated	by a gove	rnmental	unit descrit	oed in			
				(iv). (Complete Pa	•									
6	\square			-	r governmental unit desc		-							
7	X				a substantial part of its s	support from	n a govern	mental un	it or from t	he general	l public			
				n 170(b)(1)(A)(vi). (
8	\sqcup		-		170(b)(1)(A)(vi). (Comp									
9			-	•	(1) more than 33 1/3%	• •				-	_			
					empt functions - subject									
		• •	•		and unrelated business		,		1 tax) fron	n business	es			
		-			30, 1975 See section !									
10	\square		-	-	d exclusively to test for p		-	•						
11			_	•	d exclusively for the ben	•				•				
					orted organizations desc		•				section			
			-	. —	s the type of supporting o	¬*					□			
	_		Type I	b Тур	-		Functional	•		d	∐ lype l	II-Other		
е	Ш	-	=	•	organization is not contro									
					rs and other than one or	more publ	icly suppor	ted organi	zations de	scribed in	section			
		•)(1) or section											
f					etermination from the IRS	S that it is a	i Type I, Ty	ype II, or I	ype III sur	porting				_
		•	ization, check			• • • • •	• • • •				• • • • •	• • • •	• • •	•• _
g			- ·	006, has the organi	zation accepted any gift of	or contribut	ion from a	ny of the						
			ing persons?											
		• •	•	•	controls, either alone or	•	th person	s describe	d in (ii)				Yes	No
			• •	• •	y of the supported organi		• • • • •	• • • • •				11g(i)	ļ	
					cribed in (i) above? • •		• • • • •			• • • • •		11g(ii)	<u> </u>	<u> </u>
_					n described in (i) or (ii) a		• • • • •	• • • • •		• • • • •	• • • • •	11g(m		<u>L</u>
<u>h</u> _		Provid	le the following	g information about	the supported organizat	T								
	(i) N	ame of so	supported	(ii) EIN	(m) Type of organization (described on lines 1-9	1	organization sted in your	(v) Did y the organ	•	(vi) I organizat	ls the		Amount support	of
					above or IRC section		document?	col (i)	of your	(i) organiz	zed in the		арро	
					(see instructions))	<u> </u>	:		port?	 -	S?			
						Yes	No	Yes	No	Yes	No			
				1					}	}	}			
				-										
			·										_	
						ļ								
										 				
Total								,						

33-0920922

Par	Support Schedule for Or (Complete only if you checked the			ctions 170(b)	(1)(A)(iv) and	170(b)(1)(A)(vi)		
<u>Sec</u>	tion A. Public Support								
Calen	idar 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")	25,010	63,695	53,300	36,711	8,411	187,12		
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 · · · · · ·	25,010	63,695	53,300	36,711	8,411	187,12		
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)								
6	Public support. Subtract line 5 from In 4						187,12		
Sect	tion B. Total Support								
Calen	dar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
7	Amounts from line 4	25,010	63,695	53,300	36,711	8,411	187,12		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar								
	sources	2,958	4,014	15,979	7,106	3,782	33,83		
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)			3,040	11,347		14,38		
11	Total support. Add lines 7 through 10						235,353		
12	Gross receipts from related activities, etc. (s	see instructions)				12			
	First five years. If the Form 990 is for the or organization, check this box and stop here		<u> </u>			(3)	· · · · ▶[X		
	tion C. Computation of Public Su					7.1			
	Public support percentage for 2009 (line 6, c				, , , , , , , , , , , , , , , , , , ,		<u>%</u>		
	Public support percentage from 2008 Sched						%		
	33 1/3% support test - 2009. If the organiza						▶ □		
	and stop here. The organization qualifies as		-				••••		
	33 1/3% support test - 2008. If the organiza						▶□		
	box and stop here. The organization qualified						••••		
	10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the								
	•			•	•				
	organization meets the "facts-and-circumsta	_			_		••••		
	10%-facts-and-circumstances test - 2008.	-							
	more, and if the organization meets the "factorganization meets the "facts-and-circumstate"			-		v now the			
	Private foundation. If the organization did n					etructions -			
18	r invate foundation. In the organization did n	OF CHECK & DOX OU I	ווכ וט, וטם, וטט, ו	ra, or irb, check	una pox and see if		· · · · · •		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Se	ction A. Public Support						
	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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf · · · · · · · · · · · · · · · · · · ·						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · ·						
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6 · · · · · · · · ·					<u> </u>	<u> </u>
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b · · · · · · ·						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12) • • • • • • • • • • • •						
14	First five years. If the Form 990 is for the orgonganization, check this box and stop here	janization's first, s	second, third, fourth	n, or fifth tax year a	as a section 501(c)	(3)	▶ 🗀
	ction C. Computation of Public Su						
15	Public support percentage for 2009 (line 8, co	• •	•			15	%
16	Public support percentage from 2008 Schedu				•••••	16	
	tion D. Computation of Investmen			 	 		
17	Investment income percentage for 2009 (line	• • • • • • • • • • • • • • • • • • • •	-			17	
18	Investment income percentage from 2008 Sc					18	%
19a	33 1/3% support tests - 2009. If the organiza 17 is not more than 33 1/3%, check this box a	tion did not check and stop here . Th	the box on line 14 ne organization qua	, and line 15 is mo lifies as a publicly	ore than 33 1/3%, a supported organiz	and line ation •••••	▶ □
b	33 1/3% support tests - 2008. If the organizatine 18 is not more than 33 1/3%, check this b						▶ □
20	Private Foundation: If the organization did no	ot check a box on	line 14, 19a, or 19	b, check this box	and see instruction	ns • • • • •	▶ 🗍

SCHEDULE C

(Form 990 or 99Q-EZ)

Department of the Treasury

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 <u>Inspection</u>

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	s Complete Part III			
Nar	ne of organization			Employer i	dentification number
ST	. KATHERINE FOUNDATION			33-092	20922
Pa		nization is exempt under sec			anization
1	Provide a description of the organization				
2	Political expenditures · · · · · · · ·				
3	Volunteer hours	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	-	. <u> </u>
	,	<u></u>			
	rt I-B Complete if the organ	ization is exempt under sec	tion 501(c)(3).		
1	Enter the amount of any excise tax incur				
2	Enter the amount of any excise tax incur				
3	If the organization incurred a section 495				
4a	Was a correction made?				· ·YesNo
	If "Yes," describe in Part IV		4: F04(-)		<u> </u>
<u>Pai</u> 1	rt I-C Complete if the organ Enter the amount directly expended by the	ization is exempt under sec		cept section 501(c)	(3).
•	activities • • • • • • • • • • • • • • • • • • •			> s	
2	Enter the amount of the filing organization				······
•	527 exempt function activities • • • • •			> \$	
3	Total exempt function expenditures Add				
•	line 17b · · · · · · · · · · · · · · · · · · ·			> \$	
4	Did the filing organization file Form 1120				Yes No
5	State the names, addresses and employ				
	were made. For each organization listed	` '	•	• • • • • • • • • • • • • • • • • • • •	
	contributions received that were promptly	•		·	
	fund or a political action committee (PAC) If additional space is needed, provide	le information in Pa	rt IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly
					delivered to a separate political organization. If none, enter -0-
					political organization If
					political organization If
					political organization If
					political organization If
					political organization If

Sch	edule C (Form 990 or 990-EZ) 2009 ST. KATHERING	FOUNDATION			33-0920	922 🐪 - Page :			
P	art II-A Complete if the organization	n is exempt u	nder section 50	1(c)(3) and filed	Form 5768 (ele	ction			
	under section 501(h)).	·							
Α	Check if the filing organization belongs to	o an affiliated group)						
<u>B</u>	Check I if the filing organization checked to	oox A and "limited o	control" provisions ap	ply					
		bying Expenditure			(a) Filing	(b) Affiliated			
	(The term "expenditures" n				organization's totals	group totals			
1a			• •						
b		= =	:						
С		o) • • • • • • •		• • • • • • • • •					
d	a man amanipi panpada ampanamana	• • • • • • • •		• • • • • • • • •					
е	total onempt perpose on periodices (and inter-	•		• • • • • • • •					
f	Lobbying nontaxable amount Enter the amount columns	from the following	table in both						
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000		nontaxable amount	t is:					
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000					
	Over \$17,000,000	\$1,000,000	\$1,000,000						
g	Grassroots nontaxable amount (enter 25% of lin	e 1f) • • • • • •							
h	Subtract line 1g from line 1a If zero or less, ente	er-0- • • • • •		• • • • • • • • •					
i	Subtract line 1f from line 1c If zero or less, enter -0-								
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did	the organization file	Form 4720 reporting					
	section 4911 tax for this year?	· · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •	<u> </u>	Yes No			
	(Some organizations that is columns below	made a section 50° w. See the instruct	ions for lines 2a thro	have to complete all ough 2f on page 4.)	of the five				
	Lobby	ing Expenditures	During 4-Year Avera	aging Period	· · · · · · · · · · · · · · · · · · ·				
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column (e))								
С	Total lobbying expenditures								
d	Grassroots nontaxable amount								
е	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

	(election under section 501(h)).	(a)				
		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local		 			
	legislation, including any attempt to influence public opinion on a legislative matter or	ł				
	referendum, through the use of					
а			_X_			
þ			X			
С	Media advertisements?		<u>X</u>		_	
d		ļ	X			
e	Publications, or published or broadcast statements?		X		_	
f	Grants to other organizations for lobbying purposes?		X			
9	Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • •		X		_	
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? • • • • • • • • • • • • • • • • • • •		X			
i :	Total Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·					
j 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		}			
za b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		[
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		•			-
Pa	int III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	1(5).	or se	ction		
<u> </u>	501(c)(6).	,,-,,				
			<u>-</u>		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? • • • • • • • • • • • • • • • • • • •			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	• • •	· · ·	3		
<u>Pa</u>	complete if the organization is exempt under section 501(c)(4), section 501(c)				_	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, li	ne 3	is ar	iswer	eď	
1	"Yes." Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	• •	<u> </u>			
4	expenses for which the section 527(f) tax was paid).					
а	Current year · · · · · · · · · · · · · · · · · · ·		2a			
b	Carryover from last year · · · · · · · · · · · · · · · · · · ·		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
	and political expenditure next year?	• •	4			
5	Taxable amount of lobbying and political expenditures (see instructions) • • • • • • • • • • • • • • • • • • •	• •	5			
Pa	rt IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line	11				
VIso,	, complete this part for any additional information					
						_
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