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SCANNED JV 1 7 2010

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

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

Inspection

Α	For the	e 2009 calendar year, or tax year beginning and	ending		
	Check if applicab	Please use IRS		D Employer identific	cation number
	Addre				
F	Name	type		36-4	478085
<u> </u>	chang lnitial	\	Room/suite	E Telephone number	
<u> </u>	return Termi	[06-]			
- -	lated Amen		2E	1	728-8489
<u> </u>	return	City or town, state or country, and ZIP + 4		G Gross receipts \$	509,040.
L.	tion pendi	CHICAGO, IL 60040		H(a) is this a group re	
	P • · · · ·	F Name and address of principal officer Danny Alpert		for affiliates?	Yes X No
		1222 W Wilson 2E, Chicago IL 60640		H(b) Are all affiliates inc	luded? Yes Mo
		empt status: X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527		If "No," attach a	list (see instructions)
J	Websi	te: ▶ www.thekindlinggroup.org		H(c) Group exemptio	n number 🕨
<u>K</u>	Form of	organization: X Corporation	L Year	of formation: 2002 N	A State of legal domicile: IL
P	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities The I	Kindli	ng Groups p	rimary
Governance	İ	exempt purpose is to foster documentary,			
e.	2	Check this box if the organization discontinued its operations or dispose			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	6
ဖိ	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	6
<u>ಿ</u>					0
Ęį		Total number of employees (Part V, line 2a)		5	10
Activities &		Total number of volunteers (estimate if necessary)		6	•
Ac		Total gross unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
ā	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) RECEIVED		388,000.	495,718.
eu	9	Program service revenue (Part VIII, line 2g)		2,646.	13,320.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, an@7d)	18C	79.	2.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, $9c_{\infty}^{(2)}$ 10c, $4\phi\theta$ 1/16) 1 2010	ö L		
		Total revenue · add lines 8 through 11 (must equal Part-VIII, column (A), line 12)	Si	390,725.	509,040.
		Grants and similar amounts paid (Part IX, column (A), lines(1(3))	<u> </u>	-	
	14	Benefits paid to or for members (Part IX, column (A), line 4) りなりにい、 U I			
Ø	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	-		
þe	h	Total fundraising expenses (Part IX, column (D), line 25) 62,18	84. H		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		716,175.	380,817.
	1		-	716,175.	380,817.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>		
	19	Revenue less expenses. Subtract line 18 from line 12		-325,450.	128,223.
Net Assets or Fund Balances			Re	ginning of Current Year	End of Year
SSe	20	Total assets (Part X, line 16)		123,574.	208,384.
et A	21	Total liabilities (Part X, line 26)		248,113.	204,700.
	22	Net assets or fund balances. Subtract line 21 from line 20		-124,539.	3,684.
P	art II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a	d statements, a ny knowledge	and to the best of my knowled	ge and belief, it is true, correct,
			,	. 1	1
Sig	n			10/2/0	110
Her	re	Signature of officer		Date /	10
		Danny Alpert, Executive Director			
		Type or print name and title			
	_	Preparer's Date			a's identifying number
Paid	đ	signature \(\sigma_1 \)	2/10 self	loyed ▶	structions)
Pre	parer's	Firm's name (or Filts & Associates Inc.	7-1-10.11	EIN >	
Use	Only	yours if self-employed, 3711 N. Ravenswood, Ste. 105			
		address, and		Dhora so > 7	73-525-6171
N.A	u the If		.	FIIOHE IIO. /	X Yes No
ivia	y տ IC (1	RS discuss this return with the preparer shown above? (see instructions)			LALITES LINO

Form 990 (2009) The Kindling Group
Part 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	<u> </u>
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	1		
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		X
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	ļ	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ì		
	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		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 IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			i
	If "Yes," complete Schedule D, Part V	10		X
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	<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets 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			
•	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		ĺ	
	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	Х	
12A	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 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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		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,		1	
	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		X
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		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	_20_	000	X X
		Form	33U (2009)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	į		
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	1		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_ X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K If "No", go to line 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	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		х
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			
20	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	200		
C	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		-1
30	contributions? If "Yes," complete Schedule M	30		х
24	·	30		Λ
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		х
20	If "Yes," complete Schedule N, Part I	31		^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
00	Schedule N, Part II	32		^
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		v
•	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	٠,		v
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			v
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
-	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			7.7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Note. All Form 990 filers are required to complete Schedule O	38	X	000-
		Form	990 (2009)

	990 (2009) The Kindling Group		36-4478	<u>085</u>	P	age 5
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	1a	27			
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 re-	portab	le gamıng			ļ
	(gambling) winnings to prize winners?			1c		
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 retur	ns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	ınstruc	tions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by th	is return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b_		1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a			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 B	Bank ar	nd			
	Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega		Prohibited			
•	Tax Shelter Transaction?	J		5c		ł
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e orga	nization solicit			
	any contributions that were not tax deductible?	J		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or	qıfts			
_	were not tax deductible?		5	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	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		Х
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	as requ	ııred			
•	to file Form 8282?			7c		х
А	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p		 nl			
·	benefit contract?		•	7e		Ì
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f		
g g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		oured?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations					
•	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceeding the sponsoring organization and sponsoring organization.	_				
	at any time during the year?		g-	8	ļ	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter					\vdash
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
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					
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	110				
U	amounts due or received from them.)	11b				
12-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		****	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120		
	in 100, onto the amount of tax-exempt interest received of accided during the year	IZU		Corm	990	13000

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management				T:	1
		Ι.	I	6	Yes	No
_	Enter the number of voting members of the governing body	1a		<u>6</u>		1
b	Enter the number of voting members that are independent	1b	41	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any otner	, ا		.
_	officer, director, trustee, or key employee?			_2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the	ie aire	ct supervision	١,	,	v
	of officers, directors or trustees, or key employees to a management company or other person?	00	0 1110			X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		U was filed?	<u> </u>	_	
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?				X
6	Does the organization have members or stockholders?		a af tha	<u> </u>	<u>'</u>	┼^
7a		ember	S OI THE	,	_	Х
L	governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other per	reane'	>	7		X
				<u> </u>		A
8	Did the organization contemporaneously document the meetings held or written actions undertaken by the following	during	y ine year			
_	•				a X	
a	· · · · · · · · · · · · · · · · · · ·			8		1
b	Each committee with authority to act on behalf of the governing body?	achad	at the		- A	\vdash
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea organization's mailing address? If "Yes," provide the names and addresses in Schedule O	uched	at tite		.	Х
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Fi	Oven	re Code)		<u>'</u>	1 11
	TION D. 1 Onotes (This Section & requests information about policies not required by the internal re	evenu	e code /		Yes	No
10-	Does the organization have local chapters, branches, or affiliates?			10		X
	If "Yes," does the organization have written policies and procedures governing the activities of such	chant	ore affiliates	<u> </u>	-	1
Ü	and branches to ensure their operations are consistent with those of the organization?	Chapi	ors, armatos,	10	ıh	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	ilina th	ne form?	1		1
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	mig ti	ic icinii:	<u> </u>	' 	1
	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12	a X	1
	Are officers, directors or trustees, and key employees required to disclose annually interests that col	niq av	re rise			
	to conflicts?	ala gil	0.1.00	12	ь	X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes."	describe			1
Ī	in Schedule O how this is done	,		12	c	x
13	Does the organization have a written whistleblower policy?			1		X
14	Does the organization have a written document retention and destruction policy?			1		Х
15	Did the process for determining compensation of the following persons include a review and approv	al bv ı	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15	ia	Х
	Other officers or key employees of the organization			15		Х
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			<u> </u>		1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	with a			1
	taxable entity during the year?			16	ia	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	aluate	its participation	_		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org					
	exempt status with respect to such arrangements?			16	b	
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶IL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Г (501	(c)(3)s only) ava	ılable 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, or	conflic	t of interest poli	cy, and f	inancial	
	statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the org	anızatıon	▶ _	
	Daniel Alpert - 773-728-8489					
	1222 W Wilson, 2E, Chicago, IL 60640				<u> </u>	
				E,	rm 990	/2000

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

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

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

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

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

(A)	(B)	(C) Position						(D)	(E)	(F)	
Name and Title	Average hours	(cl				app	lv۱	Reportable compensation	Reportable compensation	Estimated amount of	
	per week	individual trustee or director	Institutional trustee	from the		from the	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations			
Daniel Alpert Executive Director	8.00							0.	0.	0.	
Rabbi Daniel Bronstein	8.00		\vdash					0.1	0.		
Director	1.00							0.	0.	0.	
Rachel Kraft	1.00	\vdash		\vdash				•	0.	<u> </u>	
Director_	1.00							0.	0.	0.	
J. Stephen Sheppard	1.00	 		 					0.1	<u> </u>	
Director	1.00							0.	0.	0.	
Susan White								_			
Director	1.00				Ì			0.	0.	0.	
Rich Moskal											
Director	1.00							0.	0.	0.	
	<u> </u>			<u> </u>		-					
	ľ										

Form 990 (2009)

Part VII Section A. Officers, Directors, Tru	istees, Key Er	nplo	yee	s, a	nd l	ligh	<u>est</u>	Compensated Employ	ees (continued)			
(A)	(B)			(0)			(D)	(E)		(F)	
Name and title	Average			Pos	itior	1		Reportable	Reportable		Estimat	ed
	hours	(ct	neck	all t	that	арр	ly)	compensation	compensation		amount	
	per	ctor						from	from related		other	
	week	Individual trustee or director				Pa .		the	organizations (W-2/1099-MISC	1	ompens from th	
		tee o	ustee			ensat		organization (W-2/1099-MISC)	(00-2/1099-101130		organiza	
		al trus	nstitutional trustee		loyee	Highest compensated employee		(***271033141100)			and rela	
		Mdu	tıtutıo	Officer	Key employee	hest	Беттег				rganızat	
		ᆵ	lns	#o	\$	프트	[윤					
			_									
								·-			-	
. =								1				
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						<u> </u>				-		-
		_										
										_		
		:										
	L	L								_		
1b Total						<u> </u>		0.	<u> </u>	0.		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d al	bove	e) wh	no re	eceived more than \$100	,000 in reportable			_
compensation from the organization												0
											Yes	No
3 Did the organization list any former officer,	director or tru	stee	, ke	y em	ıplo	yee,	or h	nighest compensated er	nployee on			
line 1a? If "Yes," complete Schedule J for s	uch ındıvıdual									_3	3	X
4 For any individual listed on line 1a, is the su									the organization			
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual			<u> </u>	X
5 Did any person listed on line 1a receive or a	accrue compe	nsati	on f	rom	any	unr/	elat	ed organization for serv	ices rendered to		į	
the organization? If "Yes," complete Sched	ule J for such	oers	on								<u> </u>	X
Section B. Independent Contractors												
1 Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ont	racto	ors t	hat received more than	\$100,000 of comp	ensatio	n from	
the organization NONE												
(A)								(B)			(C)	
Name and business	address							Description of s	ervices	Com	pensation	on
							_					
	, -											
							1					
	···											
					_		\neg					
2 Total number of independent contractors (i	ncludina but n	ot lu	nıte	d to	the	se lis	sted	l above) who received m	ore than			
\$100,000 in compensation from the organization				0		0						
								 		Fo	m 990	(2009)

12011005 797808 KIN-002

Part IX | Statement of Functional Expenses

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

	All other organizations must comple not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) 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				
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 U S				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	-			
Ŭ	trustees, and key employees				
6	Compensation not included above, to disqualified				
Ĭ	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)	i i			
а	Management				
b	Legal	5,187.			5,187
С	Accounting	4,480.			4,480
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	- F00			F F00
16	Occupancy	5,500.	14 666		5,500
17	Travel	14,666.	14,666.		
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings				
20	Interest	1,257.	1,257.		
20 21	Payments to affiliates	1,237.	1,257.		
21 22	Depreciation, depletion, and amortization	1,481.			1,481
23	Insurance	-,			
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	Subcontractors	201,364.	201,364.		
b	Production	69,766.	69,766.		
С	Website development	37,918.			37,918
d	Loss in Do No Harm LLC	25,623.	25,623.		
е	Administrative fees	3,864.			3,864
f	All other expenses	9,711.	5,957.		3,754
25	Total functional expenses. Add lines 1 through 24f	380,817.	318,633.	0.	62,184
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			j	
	educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
-	1	Cash - non-interest-bearing			67,089.	1	158,855.
	2	Savings and temporary cash investments				2	3,880.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	469.
	5	Receivables from current and former officers, di	rectors	s, trustees, key			
		employees, and highest compensated employe				ļ	
		of Schedule L		'		5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)) and persons described in section 495					
		Part II of Schedule L	. , .	. , .		6	
y)	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	Prepaid expenses and deferred charges				9	
	10a		1				
		basis Complete Part VI of Schedule D	10a	12,017.			
	ь	Less accumulated depreciation	10b	2,455.	2,983.	10c	9,562.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities See Part IV, line	11			12	
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	53,502.	15	35,618.		
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	123,574.	16	208,384.
	17	Accounts payable and accrued expenses			113,199.	17	69,786.
	18	Grants payable		18			
	19	Deferred revenue	Ì		19		
	20	Tax-exempt bond liabilities		Ì		20	
s	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director		F			-
apıı		highest compensated employees, and disqualifi		1			
ت		of Schedule L	·	·		22	
	23	Secured mortgages and notes payable to unrela	ated th	ird parties	134,914.	23	134,914.
	24	Unsecured notes and loans payable to unrelate		· · ·	•	24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			248,113.	26	204,700.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
S		lines 27 through 29, and lines 33 and 34.					
Š	27	Unrestricted net assets			51,089.	27	-23,396.
ala	28	Temporarily restricted net assets			-175,628.	28	27,080.
g B	29	Permanently restricted net assets				29	
၌	ĺ	Organizations that do not follow SFAS 117, c	heck t	ere 🕨 🔲 and			
ē		complete lines 30 through 34.					
ş	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or ed	uipme	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ľ		32		
ž	33	Total net assets or fund balances			-124,539.	33	3,684.
	34	Total liabilities and net assets/fund balances			123,574.	34	208,384.

Form **990** (2009)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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.

2009

Open to Public Inspection

Employer identification number Name of the organization 36-4478085 The Kindling Group Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) Я A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III · Functionally integrated d ___ Type III - Other a Type I b ____ Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes 11g(i) the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organizátion in col. organization in col. (i) listed in your organization in col. support organization (i) organized in the (described on lines 1-9 aovernina document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Yes No No LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2009

Form 990 or 990-EZ.

	edule A (Form 990 or 990-EZ) 2009				VI. V. A.V. A.V. A. V. A. V. A. V. A.V. A		Page 2
Pa	rt II Support Schedule for	-)(b)(1)(A)(iv) an	id 170(b)(1)(A)(VI)
	(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I)				
Sec	ction A. Public Support		I	· · · · · · · · · · · · · · · · · · ·	- -	,	
	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						
	ınclude any "unusual grants ")			-			
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf					 	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3				 		
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on					ļ. 	
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
	Total support. Add lines 7 through 10			ţ		 	
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for		s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3)	. —
Sac	organization, check this box and store ction C. Computation of Publ		rcentage				
_			-	(0)		144	0/
	Public support percentage for 2009 (•	column (i))		15	<u>%</u> %
	Public support percentage from 2008 33 1/3% support test - 2009. If the o	Ť	•	n line 13 and line	14 is 33 1/3% or n		
10a	stop here. The organization qualifies	-			14 15 55 17570 61 11	nore, check this	box and ►
h	33 1/3% support test - 2008. If the o		-		1 line 15 is 33 1/3%	6 or more check	this box
· ·	and stop here. The organization qual	_			1 IIIIC 13 13 00 1707	o or more, erreen	▶
172	10% -facts-and-circumstances tes		· · ·		e 13, 16a, or 16b :	and line 14 is 109	% or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶ □
h	10% -facts-and-circumstances tes					17a, and line 15	ıs 10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ						ightharpoons
18	Private foundation. If the organization						ons
							90 or 990-EZ) 2009

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Schedule D

Department of the Treasury

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

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

Part IV, line 6, 7, 8, 9, 10, 11, 01 12.

2009 Open to Public Inspection

OMB No 1545-0047

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

Employer identification number

	The Kindling Group	The Kindling Group							
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the						
	organization answered "Yes" to Form 990, Part IV, lin	e 6							
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds						
	are the organization's property, subject to the organization's		Yes No						
6	Did the organization inform all grantees, donors, and donor a		used only						
	for charitable purposes and not for the benefit of the donor of								
	impermissible private benefit?		Yes No						
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, i	Part IV, line 7						
1	Purpose(s) of conservation easements held by the organizat	* ****							
•	Preservation of land for public use (e.g., recreation or		storically important land area						
	Protection of natural habitat		tified historic structure						
	Preservation of open space								
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last						
_	day of the tax year.								
	,		Held at the End of the Tax Year						
а	Total number of conservation easements		2a						
b	Total acreage restricted by conservation easements		2b						
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c						
d	Number of conservation easements included in (c) acquired	···	2d						
3	Number of conservation easements modified, transferred, re		e organization during the tax						
-	year >	,	3						
4	Number of states where property subject to conservation ea	sement is located							
5	Does the organization have a written policy regarding the pe								
	violations, and enforcement of the conservation easements	· · · · · · · · · · · · · · · · · · ·	Yes No						
6	Staff and volunteer hours devoted to monitoring, inspecting,		furing the year 🕨						
7	Amount of expenses incurred in monitoring, inspecting, and								
8	Does each conservation easement reported on line 2(d) abor								
	and section 170(h)(4)(B)(ii)?		Yes No						
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	e statement, and balance sheet, and						
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for						
	conservation easements								
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.						
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8							
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and b	palance sheet works of art, historical						
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide, in Part XIV, the text of						
	the footnote to its financial statements that describes these	items							
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balar	nce sheet works of art, historical treasures,						
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to						
	these items.								
	(i) Revenues included in Form 990, Part VIII, line 1		> \$						
	(ii) Assets included in Form 990, Part X		► \$ ► \$						
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia							
	the following amounts required to be reported under SFAS 1	16 relating to these items.							
а	Revenues included in Form 990, Part VIII, line 1	-	> \$						
b	Assets included in Form 990, Part X		► \$ ► \$						
	·								

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Schedule D (Form 990) 2009

<u>S</u> che	dule D (Form 990) 2009 The Kin	dling Grou	.p					36-44	7808	5_ Pa	age 2
Pai	rt III Organizations Maintaining C			torical Tr	easures,	or Othe	er Simil	ar Asse	ts (conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	at are a s	ignificant	use of its	collection	ıtem	s
	(check all that apply)										
а	Public exhibition	c	, <u> </u>	Loan or exc	hange progr	ams					
b	Scholarly research	e	, []	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how th	ney further t	he organizat	ion's exe	mpt purpo	ose in Par	t XIV		
5	During the year, did the organization solicit of	r receive donations	of art, h	storical trea	sures, or oth	er sımılaı	r assets				_
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's co	ollection?				Yes		No
Pai	t IV Escrow and Custodial Arran	gements. Compl	ete if org	ganization ai	nswered "Ye	s" to For	m 990, Pa	ırt IV, line	9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other a	ssets not	included		_		_
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				_		Yes		No
b	If "Yes," explain the arrangement in Part XIV										
Pai	rt V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 1	0				
		(a) Current year	(b) F	rior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions	•									
С	Net investment earnings, gains, and losses					Ì					
d	Grants or scholarships										
е	Other expenditures for facilities					j					
	and programs					1					
f	Administrative expenses										
g	End of year balance							-			
2	Provide the estimated percentage of the year	r end balance held a	as.		•	•			•		
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
c	· ———	 **									
	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	ered for t	he organiz	ation			
	by	ŭ					J		Γ	Yes	No
	(i) unrelated organizations								3a(ı)		
	(ii) related organizations								3a(ii)		
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sched	dule R?					3b		
4	Describe in Part XIV the intended uses of the								<u> </u>		
Par	t VI Investments - Land, Building				, Part X, line	10					
L	Description of investment	(a) Cost or c			or other		ccumulate	ed	(d) Book	value	9
	. p 2 23	basis (investr		, , ,	(other)		preciation		(-, -00)		-
	Land	 :	•								
	Buildings	-				,					
	Leasehold improvements	_									
	Equipment			1	2,017.		2,4	55.	-	9 5	62.
	Other	-			<u>-, - , •</u>	_	<u>~ , ±</u>			,,,	
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colur	nn (B). line 1	0(c).)	1				9,5	62.

Schedule D (Form 990) 2009

932053 02-01-10

	dule D (Form 990) 2009 The Kindling Group				78085	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finar	icial Stat	tements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		509	040.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		380,	817.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		128,	223.
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			0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10		128	223.
Par	t XII Reconciliation of Revenue per Audited Financial Statemer	nts With Reve	nue per	Return		
1	Total revenue, gains, and other support per audited financial statements			1	509	040.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.					
а	Net unrealized gains on investments	2a		_		
b	Donated services and use of facilities	2b		_		
С	Recoveries of prior year grants	2c		_		
d	Other (Describe in Part XIV)	2d		_		
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	509	040.
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)	4b		_		
С	Add lines 4a and 4b			4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	509	040.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Exp	enses pe	r Return		
1	Total expenses and losses per audited financial statements			1	380	817.
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)	2d		_		
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	<u> 380</u>	817.
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	4a		_		
b	Other (Describe in Part XIV)	4b		_		
С	Add lines 4a and 4b			4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	380	<u>817.</u>
Pa	t XIV Supplemental Information					_
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl	•	=	•	•	4, Part

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

The Kindling Group

Employer identification number 36-4478085

Form 990, Part I, Line 1, Description of Organization Mission:					
the civic and educational impact of such media. These activities					
further all aspects of the mission through the production of					
documentary films and videos, films and television programs;					
educational curricula; and educational websites. Productions by the					
Kindling group investigate, document, & present important social,					
civic, political, historical, and educational issues.					
Form 990, Part III, Line 1, Description of Organization Mission:					
programs; educational curricula; and educational websites. Productions					
by the Kindling group investigate, document, & present important					
social, civic, political, historical, and educational issues.					
Form 990, Part VI, Section B, line 11: Board gets together to sign 990 tax return and review it prior to submission					
Form 990, Part VI, Section C, Line 19: All documents are available for					
public review upon request					
The board gets together to review the annual audit					