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PEACE Form

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)

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

OMB No 1545-0047 Open to Public Inspection

	For the 200	9 calendar v	ear, or tax year beginning , and ending		
	Check if applical			) Emp	loyer identification number
	Address change	use IRS	Peace Nick Corporation		•
$\equiv$	Name change	label or print or	Doing Business As	36	-4648850
	•	type.		Tele	phone number
X	Initial return	See	P.O. Box 1882	31	3- <u>215-</u> 5767
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4	Gross re	ceipts\$ 370
	Amended return		Royal Oak MI 48068		· · · · · · · · · · · · · · · · · · ·
$\overline{\Box}$	Application pend	F Nam	e and address of principal officer	H(a) Is th	s a group return for
ш	луриоваон рет	""   Gr	egory S. Panzica		ates? Yes X No
		32	5 Oakdale	<b>d(b)</b> Are Inclu	all affiliates Yes No
		Ro	yal Oak MI 48067	If "N	o," attach a list (see instructions)
1	Tax-exempt	status X	501(c) ( <b>3</b> ) <b>◄</b> (insert no ) 4947(a)(1) or 527		
J	Website: 🕨	www.j	peacenick.org	H(c) Grou	ip exemption number
K	Type of organiz	ation X Co	rporation Trust Association Other ► L Year of formation 20	09	M State of legal domicile MI
<u> </u>	art l	Summa	ry		
	1 Brief	ly describe t	the organization's mission or most significant activities		
ø	1		ck is a nonprofit organization promoting world peace thre	_	
auc	i		n, poverty reduction, environmental protections and socia	-	
Governance	01	ır goal	is to slow down and reverse the damaging effects of the	prev	rious
્રે	2 Chec	k this box	If the organization discontinued its operations or disposed of more than 25% of its net assessed members of the governing body (Part VI, line 1a)	ts II	1 2
ంక				.11	3
Activities		•	pendent voting members of the governing body (Part VI, line 1b) employees (Part V, line 2a) volunteers (estimate if necessary)	d 4	3
;			employees (Part V, line 2a)  SEP 0 7 2010	5	3
Ac			volunteers (estimate if necessary)	2 6	3
	1	-	lated business revenue from Part VIII, column (C), line 12 usiness taxable income from Form 990-T, line 34	7 <u>a</u> 7b	0
	D Net l	inrelated bu	Isiness taxable income from Form 990-T, line 34  Prior Year	70	Current Year
-	8 Cont	ributions an	d grants (Part VIII, line 1h)		370
Revenue			revenue (Part VIII, line 2g)		1
š	_		me (Part VIII, column (A), lines 3, 4, and 7d)		
æ	1		Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	1		add lines 8 through 11 (must equal Part VIII, column (A), line 12)		370
	13 Gran	its and simil	ar amounts paid (Part IX, column (A), lines 1–3)		
	14 Bene	efits paid to	or for members (Part IX, column (A), line 4)		
S	15 Sala	ries, other c	compensation, employee benefits (Part IX, column (A), lines 5–10)		
enses	16a Profe	essional fun	draising fees (Part IX, column (A), line 11e)		
Expe	<b>b</b> Total	l fundraising	g expenses (Part IX, column (D), line 25) ▶ 478		
úì	17 Othe	r expenses	(Part IX, column (A), lines 11a-11d, 11f-24f)	,	4,318
		· · · · · · · · · · · · · · · · · · ·	Add lines 13–17 (must equal Part IX, column (A), line 25)		4,318
	19 Reve	enue less ex	openses Subtract line 18 from line 12	nt Vaar	-3,948
le Assets or	20 Tat-	Lappote /D-	Beginning of Curre	iii rear	End of Year 67
	24 Total		rt X, line 16) Part X, line 26)		4,015
Sec.	21 Total	•	nd balances Subtract line 21 from line 20	0	
	art II		re Block		
	411 11		Ities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and	d to the h	est of my knowledge
SEP		and belief, it	t is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which pre	eparer ha	is any knowledge
Sic	ın İ	N V	1 Phus AAT		5/13/10
He	re	Signatu	ure of officer	Dat	e
Z			egory (\$. Panzica / President		
8		7	r print name an byte		
Ğ		Proporada	Date Check if		Preparer's identifying number
SOANNEIG.	id	Preparer's signature	05/13/10 self- employed	<b>•</b>	(see instructions)
Pre	eparer's		Boloven, Tiano & Associates, P.C.	1	<b>→</b> 38-3325260
<b>∕</b> U\$	<b>e∙</b> Qnly	Firm's name if self-emplo	44215 Di	Phone	
4	)	address, an	• • •	1	▶ 734-453-9985
YES	the IRS di	scuss this r	eturn with the preparer shown above? (see instructions)		Yes No
Por	Rrivacy Ad		rwork Reduction Act Notice, see the separate instructions.		Form <b>990</b> (2009)
DAA	١				

	9) Peace Nick Corpor		648850	Page 2
	Statement of Program Serving Servi	ice Accomplishments		
the prior If "Yes," 3 Did the conservices	Form 990 or 990-EZ? describe these new services on Scheo organization cease conducting, or make	e significant changes in how it conducts, any pro		Yes X No
4 Describe Section :	the exempt purpose achievements fo 501(c)(3) and 501(c)(4) organizations a	r each of the organization's three largest program and section 4947(a)(1) trusts are required to repo evenue, if any, for each program service reporter	ort the amount of grants and	
4a (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
4b (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	
4d Other pr	ogram services (Describe in Schedule		Revenue \$	

4e Total program service expenses ▶

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A	1	X	
3	Is the organization required to complete Schedule B, Schedule of Contributors?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		X
·	candidates for public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	3		X
	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)	<del>                                     </del>	<b>-</b>	
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	۳		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	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? If "Yes," complete Schedule D, Part V	10		<u> </u>
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	
•	<ul> <li>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete</li> <li>Schedule D, Part VI</li> </ul>			
	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		I	
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets		I	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		1	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		I	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		I	
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	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No		Ī	
	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		<u>X</u>
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,			77
15	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	-	<u>X</u> _
13	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	45		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15	-+	<u> </u>
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	46	Ì	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16	<del></del>	
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		-+	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			<del></del> -
	If "Yes," complete Schedule G, Part III	19	- 1	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	$\neg \dagger$	X
			990	

	analys of too knot of troductor (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	<u></u> -		
	United States on Part IX, column (A), tine 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			
-0	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization minest any proceeds or 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	1		
·	to defease any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
LJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b				
U	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	100		
20	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,			
20	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		х
a b	A Maria Company of the Company of th			
D	Schedule L, Part IV	28b		х
С	and the second s	1		
·	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	1		
	Part IV	28c		х
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			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		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			
-	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
•	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	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	,		T
- <b>-</b>	19? Note. All Form 990 filers are required to complete Schedule O	38		x

1 14	otatements regarding other into rinings and rax compliance				1	Т
12	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			<u></u>	Yes	No_
	U.S Information Returns Enter -0- if not applicable	1a	0	į.		Ī
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			Ī
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rej					Ī
·	gaming (gambling) winnings to prize winners?	Jortabio	5	1c	Ì	x
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		"	1	<del>  **</del> -
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			•
h	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	Ì	Ť
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	113,			-	<u> </u>
	Instructions)					Ī
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by				Ī
Ja	this return?	и Бу		3a	Ì	x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3 <u>a</u> 3b	+	<del></del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authorit	tv.	32	1 -	
74	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		.,			
	account)?	anolai		4a		x
h	If "Yes," enter the name of the foreign country				· · · · · · · · · · · · · · · · · · ·	<del> </del>
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				Ī
	and Financial Accounts					1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega					
	Prohibited Tax Shelter Transaction?	Ū		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	е				
	organization solicit any contributions that were not tax deductible?			6a	<u></u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					Ī
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods				ŧ
	and services provided to the payor?			7a		
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	s		į		
	required to file Form 8282?	1		7c	<del> </del>	<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				•
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	I	ŀ	1	ŧ
	benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f	<del> </del>	├──
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			<u>7g</u>	┼	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as			!	
	required?			7h		<del> </del>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			8	İ	1
0	organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.				<del> </del>	<del> </del>
9	Did the organization make any taxable distributions under section 4966?			9a	İ	Ī
a	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	+-	
ь 10	Section 501(c)(7) organizations. Enter			35	1	<del> </del>
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				Ī
11	Section 501(c)(12) organizations. Enter					1
a	Gross income from members or shareholders	11a				Ī
b	Gross income from other sources (Do not net amounts due or paid to other sources against		<u>-</u> -			Ī
-	amounts due or received from them )	11Ь				Ī
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	<u> </u>	
	The state of the s	12ь				

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.

	Schedule O. See instructions.			
<u>Sec</u>	tion A. Governing Body and Management	· · · · · · · · · · · · · · · · · · ·		
			Yes	No
1a				
b	Enter the number of voting members that are independent  1b 3			
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?	2		<u>X</u>
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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	i _ l		3.7
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		7	
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			v
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	enue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u> </u>
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			v
	form?	11		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			37
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	40.		
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		77
13	Does the organization have a written whistleblower policy?	13		X
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?			4.5
а	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
þ	Other officers or key employees of the organization	15b		X
	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	·······	<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ MI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	X Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Gregory S. Panzica 325 Oakdale Street			
R	oyal Oak MI 48067			

## 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 (A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average hours per week	individual trustee or director		Officer		Mighest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Gregory S. Panzi	ta	.,						•		
Executive Director Xavier Moore	10.00	X		_	<del> </del>		-	0	0	<u>_</u>
Director_	1.00	x					ļ	О	o	o
Marty Hegheringto	on		<del> </del>							
Director	1.00	x			<u> </u>	<u> </u>	_	0	0	0
		┼	<del> </del>			-	_			
						<del>                                     </del>				<del></del>
						<u> </u>				
		├	-							
							_	<u>-</u>		
	ļ	_	_	_	-	<del> </del>	ļ			
<del></del>			<del>                                     </del>		t	<del> </del>	<del>                                     </del>			
					_		L			
	-	├			-		-			· <del>-</del>
<del></del>		<del> </del>	$\vdash$			$\vdash$				

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and Title	(B) Average hours per	<u> </u>		chec	_	that a		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of			
	•	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations			
	go got go													
							_							
	4				-									
	***************************************								:					
1b	Total							<b></b>						
2	Total number of individuals (in reportable compensation from				thos	e list	ted a	bove	e) who received more than	\$100,000 in				
3	Did the organization list any fo								yee, or highest compensat	ed		No		
4	employee on line 1a? If "Yes," For any individual listed on line the organization and related or	e 1a, is the sum	of rep	porta	able	com	pens	atio			3	<u> </u>		
5	individual  Did any person listed on line 1 services rendered to the organ									r	5	X X		
Sec	tion B. Independent Contracto		CON	ipiet	<u>e 30</u>	, neu	uie J	101 :	such person					
1	Complete this table for your five compensation from the organization	e highest compe	nsat	ted II	ndep	end	ent c	ontr	actors that received more t	han \$100,000 of				
	Name and	(A) business address							Descript	(B) uon of services	(C) Compensatio	nc		
		·							· · · · · · · · · · · · · · · · · · ·					
	<del> </del>				_									
•										······································				
2	Total number of independent of more than \$100,000 in competitions.		_				ed to	thos	se listed above) who receiv	ed	0			
DAA	e regiese in compo		<u>3u</u>								Form <b>990</b> (2	2009)		

P	art V	Statement of Rever	nue						
		*				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
SU C	12	Federated campaigns	4.0	<u> </u>	••••••		revenue		512, 513, or 514
a i	la L	· -	1a		015				
P	9	Membership dues	1b		215				
\$ 5	C	Fundraising events	<u>1c</u>		155				<b>‡</b>
يقتو	ď	Related organizations	1d						
Si	е	Government grants (contributions)	1e						
iti e	f	All other contributions, gifts, grants,							
Ę		and similar amounts not included above	1f						
Ę	g	Noncash contributions included in lines 1a-	1f	\$					1
٥ س	h	Total. Add lines 1a-1f			•	370			
Program Service Revenue   Contributions, gifts, grants					Busn. Code				
ē	2a						***************************************		
æ	Ь						<del></del>		
<u>8</u>	٦					<del></del>	······································		<del></del> .
ē	d				F		<del></del>		
S	ľ								
ᅙ	e	All of							
ĕ	1	All other program service rever	nue				<del></del>		
	- 3				▶				
	3	Investment income (including of	livider	ids, intere	est, and				
	ľ	other similar amounts)			▶				
	4	Income from investment of tax	-exem	pt bond p	roceeds 🕨				
	5	Royalties			<b>_</b> _				
		(ı) Real		(II) P	'ersonal				
	6a	Gross Rents							<u> </u>
	b	Less rental exps							<b>‡</b>
	c	Rental inc or (loss)							
	ď	Net rental income or (loss)			•	Ī			Ī
	7a	Gross amount from (i) Securities		(11)	Other				
		sales of assets other than inventory		· · · · ·		1			
	h	Less cost or other		<u> </u>		1			
	~								1
	_	basis & sales exps				1			
		Gain or (loss)		[		ŧ			İ
	d	• ,							
ne	8a	Gross income from fundraising ever	its			1			
_		(not including \$				1			
Š		of contributions reported on line 1c)				Ī			
Other Reve		See Part IV, line 18	а			I			
흎		Less direct expenses	b			1			
٥	С	Net income or (loss) from funda	aısıng	events	▶				
	9a	Gross income from gaming activities	;						
		See Part IV, line 19	a			1			
	b	Less direct expenses	b						
	С	Net income or (loss) from gami	ng act	ivities	<b>•</b>				
	10a	Gross sales of inventory, less	Ĭ						
		returns and allowances	a		l	Ī			
	b	Less cost of goods sold	ь			1			
		Net income or (loss) from sales	~ L	enton	<b>-</b>	İ	:	į	
		Miscellaneous Revenue	OI IIIV		Busn. Code				
	110	Wisocialicous (Ceetiae			Busii. Code	ŧ			
j	11a								
	b								
	C	A.I							<del></del>
		All other revenue						-	·
		Total. Add lines 11a-11d			▶				
	12	Total Revenue. See instruction	s			370	0	0	0

#### Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		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				
2					
•	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,				
_	trustees, and key employees	<del></del>			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				<del></del>
7	Other salaries and wages			-	
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)			<del> </del>	
9	Other employee benefits		<del>"</del>		
10	Payroll taxes	<del></del>	·		
11	Fees for services (non-employees)				
а	Management	,			<del></del>
	Legal				
	Accounting				
	Lobbying				
_	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	1 074		506	470
12	Advertising and promotion	1,074		596	478
13	Office expenses	3,023		3,023	<del></del>
14	Information technology	175		175	
15	Royalties				<del></del>
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	4 -		4 -	· · · · · · · · · · · · · · · · · · ·
	Conferences, conventions, and meetings	15		15	
20	Interest	31		31	
21	Payments to affiliates		- 44		
22	Depreciation, depletion, and amortization				
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					
b					<del></del>
C	j				<del></del>
d					
е					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	4,318	<u> </u>	3,840	478
26	Joint costs. Check here I 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			<u> </u>	

		(A)		(B)
<del></del>		Beginning of year		End of year
1	Cash—non-interest bearing		_1_	<u>6</u> ′
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, ke	ey	Ī	
	employees, and highest compensated employees. Complete Part I	of	ŧ	
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under sect		1	
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	te	ŧ	
,	Part II of Schedule L		6	<u>.</u>
7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or			
-	other basis Complete Part VI of Schedule D 10a		1	
b	Less accumulated depreciation 10b		10c	
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11		12	
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	<del></del>
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	0	16	6'
17	Accounts payable and accrued expenses		17	3,20
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule	D	21	
22	Payables to current and former officers, directors, trustees, key			· · · · · · · · · · · · · · · · · · ·
5	employees, highest compensated employees, and disqualified		1	
21 22	persons Complete Part II of Schedule L	İ	22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	810
26	Total liabilities. Add lines 17 through 25		26	4,015
	Organizations that follow SFAS 117, check here ► X and		-20	7,01.
ן צ	complete lines 27 through 29, and lines 33 and 34.		I	
27	Unrestricted net assets	İ	27	-3,948
28	Temporarily restricted net assets		27	-3,940
29	•	<u> </u>		
29	Organizations that do not follow SFAS 117, check here ▶		29	·····
<u>.</u>			I	
20	and complete lines 30 through 34.	<u> </u>	<b>30</b>	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other fund		32	2.040
27 28 29 30 31 32 33 34	Total net assets or fund balances	0	_33	-3,948 67
Z 34	Total liabilities and net assets/fund balances	0	34	

Form **990** (2009)

the Single Audit Act and OMB Circular A-133?

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	990 (2009) Peace Nick Corporation	36-4648850		Pa	ge <b>12</b>
Pa	rt XI Financial Statements and Reporting				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash	X Accrual Other			
	If the organization changed its method of accounting from a prior ye	ear or checked "Other," explain in			
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed l	by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent	dent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that	at assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and sele	ection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection	process during the tax year, explain in	1		
	Schedule O		•		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the f	financial statements for the year were			
	issued on a consolidated basis, separate basis, or both				
	Separate basis Consolidated basis Both consolida	ted and separate basis			
3a	As a result of a federal award, was the organization required to und	ergo an audit or audits as set forth in			

Form **990** (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Peace Nick Corporation

Employer identification number 36-4648850

P	art i	Reas	on for Public Charity	Status (All organizations	s must o	complet	te this	part.)	See ii	nstruc	tions.			
The	orga	nization is not	a private foundation because	se it is (For lines 1 through 11,	check onl	y one box	()							
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).												
2			cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3				ce organization described in se	ction 170	(b)(1)(A)(	iii).							
4	П			d in conjunction with a hospital				)(1)(A)(i	iii). Ente	er the h	ospital's	name		
		city, and state												
5														
	ш	section 170(b)(1)(A)(iv). (Complete Part II )												
6														
7	X	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public												
·		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)												
8				170(b)(1)(A)(vi). (Complete Part	- 11 \									
9	H			1) more than 33 1/3 % of its sup		contribut	ione m	mberck	un faac	and ar	.000			
J		=	•	npt functions—subject to certain					•	•				
				nd unrelated business taxable in	•	•	•				1			
			•	0, 1975 See section 509(a)(2)	•			x) 110111 1	Jusines	363				
10	$\Box$		<del>-</del>	exclusively to test for public safe			•							
11	H			exclusively for the benefit of, to					v out th	<b>P</b>				
•	LJ	•	•	ed organizations described in s	•		•		•		1			
				he type of supporting organizati							•			
		a Type		c Type III–Function		•	d		e III–O	her				
е			•·	janization is not controlled direc										
_		-		and other than one or more pul	•				•		1			
			section 509(a)(2)	,	,,		,							
f			` ` ` `	ermination from the IRS that it is	a Type I	Type II	or Type	III supp	ortino					
•		=	check this box		,,,	.,,,,	,,,		······3					
g		-		tion accepted any gift or contrib	ution from	any of th	ne.							
9		following per	_	non docopioù am, gm er eemme	4	,								
				ontrols, either alone or together	with nerse	nns descr	ihed in (	m)					Yes	No
			· · · · · · · · · · · · · · · · · · ·	f the supported organization?	Willi poroc	3110 00001		,				11g(i)		
			member of a person describ									11g(ii)		
				described in (i) or (ii) above?								11g(iii)		
h			•	he supported organization(s)							,			
	Name	of supported	(iı) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did v	ou notify	(vi)	s the	(v	ii) Amo	ount of	
ν-,		anization	<b>(, -</b>	(described on lines 1–9		sted in your	the organ	nzation in	organizat	ion in col	suppo			
				above or IRC section	governing	document?		of your port?		zed in the S ?				
				(see instructions))	Yes	No	Yes	No	Yes	No				
	-													
									İ					
			,		İ	-								
					ļ									
									İ					

Schedule A (Form 990 or 990-EZ) 2009 Peace Nick Corporation 36-4648850 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 370 370 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total, Add lines 1 through 3 370 370 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) Public support. Subtract line 5 from line 4 370 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 370 370 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 370 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 100.00% Public support percentage from 2008 Schedule A, Part II, line 14 15 15 16a 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box

and stop here. The organization qualifies as a publicly supported organization

33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

5	(Complete only if you che	ecked the box	on line 9 of P	art I.)		·		
	ction A. Public Support	() 2005	T	T - 7				
Ca	alendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</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 business under section 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						1	
	from other than disqualified persons that							
	exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year							<del>- y</del>
С 8	Add lines 7a and 7b  Public support (Subtract line 7c from						-	<del></del>
U	line 6)							
Sec	tion B. Total Support	·····			<u></u>	L		
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total
9	Amounts from line 6					<del> </del>		
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 carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11,							
	and 12 )							
14	First five years. If the Form 990 is for the		t, second, third, foi	urth, or fifth tax yea	ir as a section 501	(c)(3)		
	organization, check this box and stop here							<u> </u>
	tion C. Computation of Public Su							
15	Public support percentage for 2009 (line 8,		•	ın (f))		1:		<u></u>
<u>16</u>	Public support percentage from 2008 Sche					110	<u> </u>	
	tion D. Computation of Investmen							
17 18	Investment income percentage for 2009 (lin			, column (t))		1	$\rightarrow$	<u></u> %
16 19a	Investment income percentage from 2008 and 33 1/3 % support tests—2009. If the organ			14 and line 15 is	more than 33 4/2	% and line	<u> </u>	%_
	17 is not more than 33 1/3 %, check this be	ox and stop here.	The organization	qualifies as a publi	cly supported orga	nızatıon		<b>&gt;</b>
b	33 1/3 % support tests—2008. If the organ						1	▶ □
20	line 18 is not more than 33 1/3 %, check the		_		Jubilicity supported	organization		₹ H

Page 4

Schedule A (Form 990 or 990-EZ) 2009 Peace Nick Corporation 36-4648850

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

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Nam	e of the organization		Employ	er identification number
₽	eace Nick Corporation		36-4	648850
	Organizations Maintaining Donor Advised Futhe organization answered "Yes" to Form 990,	nds or Other Similar Funds or Part IV. line 6		
		(a) Donor advised funds	(b	) Funds and other accounts
1	Total number at end of year			<u></u>
2	Aggregate contributions to (during year)			<del></del>
3	Aggregate grants from (during year)		1	· · · ·
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing tha	t the assets held in donor advised		
	funds are the organization's property, subject to the organization's excl			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be		
	used only for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other		
	purpose conferring impermissible private benefit?			Yes No
P	art II Conservation Easements. Complete if the organic	anization answered "Yes" to Fo	rm 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check	all that apply)		
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically in	mportant la	nd area
	Protection of natural habitat	Preservation of certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a cons	servation	
	easement on the last day of the tax year		ļ	ı <u></u>
				Held at the End of the Tax Year
a	Total number of conservation easements		2a	
b	,		2b	
C	Number of conservation easements on a certified historic structure incl		2c	
đ	(-)		2d	
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiz	ation during	g
	the taxable year	and N		
4	Number of states where property subject to conservation easement is I			
5	Does the organization have a written policy regarding the periodic moni	toring, inspection, handling of		□ Vaa □ Na
6	violations, and enforcement of the conservation easements it holds?	una accessation accessation division the		∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ang conservation easements during the	year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	conceniation agreements during the year		
•	\$	conservation easements during the year		
8	Does each conservation easement reported on line 2(d) above satisfy t	he requirements of section		
Ū	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ne requirements of section		Yes No
9	In Part XIV, describe how the organization reports conservation easem	ents in its revenue and expense stateme	ent and	
•	balance sheet, and include, if applicable, the text of the footnote to the	•	•	
	the organization's accounting for conservation easements			
Pa	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other	Similar	Assets.
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116, not to report	in its revenue statement and balance sh	neet works	of
	art, historical treasures, or other similar assets held for public exhibition	, education, or research in furtherance of	of public se	rvice,
	provide, in Part XIV, the text of the footnote to its financial statements t	hat describes these items		
b	If the organization elected, as permitted under SFAS 116, to report in it	s revenue statement and balance sheet	works of a	rt,
	historical treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of pu	ublic servic	e,
	provide the following amounts relating to these items.			
	(i) Revenues included in Form 990, Part VIII, line 1		<b>•</b>	\$_ <b></b> _
	(ii) Assets included in Form 990, Part X		<b>•</b>	\$
2	If the organization received or held works of art, historical treasures, or	other sımılar assets for financıal gaın, p	rovide the	
	following amounts required to be reported under SFAS 116 relating to t	hese items		
	Revenues included in Form 990, Part VIII, line 1		<b>•</b>	\$
b	Assets included in Form 990, Part X		<b>•</b>	\$

<u>S</u> che	dule D (Form 990) 2009 Peace Nick				<u>648850</u>	Page 2
Pa	rt III Organizations Maintaining	Collections of Art,	<b>Historical Trea</b>	sures, or Othe	r Similar Asset	s (continued)
3	Using the organization's acquisition, accession collection items (check all that apply)	n, and other records, che	eck any of the follow	ng that are a signifi	cant use of its	
а	Public exhibition	d Loan	or exchange prograr	ns		
b	Scholarly research	e Other	,			
С	Preservation for future generations					
4	Provide a description of the organization's colle Part XIV	ections and explain how	they further the orga	anızatıon's exempt ı	purpose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to be	be maintained as part of	the organization's c	ollection?		Yes No
Pa	rt IV Escrow and Custodial Arra	ngements. Comple	ete if the organiz	ation answered	d "Yes" to Form	990, Part
	IV, line 9, or reported an am	ount on Form 990,	Part X, line 21.		··-	
1a	Is the organization an agent, trustee, custodiar	n or other intermediary for	or contributions or ot	her assets not		
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following	ig 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 For	m 990, Part X, line 21?				Yes No
	If "Yes," explain the arrangement in Part XIV					
	ert V Endowment Funds. Comple	ete if organization a	answered "Yes"	to Form 990, F	art IV, line 10.	
	<u> </u>	(a) Current year	(b) Prior year	(c) Two years back		ck (e) Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains,					
·	and losses					
ч	Grants or scholarships					
	Other expenditures for facilities					
·	and programs					
£	Administrative expenses			<del> </del>		
_	End of year balance			<del>-   /1/11/1/11/11/1/1/1/1/1/1/1/1/1/1/1/1</del>		***************************************
y	Provide the estimated percentage of the year	and halance hold as				<b>l</b>
2	Board designated or quasi-endowment	o/				
a		<sup>76</sup>				
b	Term endowment > %					
2-	Are there endowment funds not in the possess	sion of the organization t	that are held and adi	ministered for the		
зa		Sion of the organization	illat are neid and adi	ministered for the		Yes No
	organization by					3a(i)
	(i) unrelated organizations					3a(ii)
	(ii) related organizations	hatad as ramurad an Ca	hadula D2			3b
ď	If "Yes" to 3a(II), are the related organizations					
4	Describe in Part XIV the intended uses of the			O Port V line	10	<del></del>
<u>P</u> 3	irt VI Investments—Land, Buildin			· ·		(d) Book value
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or o basis (othe	1 ' '.	preciation	(d) Book Value
1a	Land					
b	Buildings					
	Leasehold improvements					
	Equipment					
	Other					
	II. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X, c	olumn (B), line 10(c)	)	<b>&gt;</b>	

(a) Book value (c) Method of virulation Cost or end-drysam mander value) Financial delivatives Cost or end-drysam mander value Cost or end-drysam mander value Cost or end-drysam mander value Cost or end-drysam mander value Cost or end-drysam mander value Cost or end-drysam mander value Cost or end-drysam mander value Cost or end-drysam mander value  Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)  Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Book value Cost or end-drysam mander value Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or end-drysam Cost or en	Part VII	Investments—Other Securities. See Form 99	00, Part X, line 12.		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)  Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Book value  Cost or end-of-year masted value  Cost or end-of-year masted value  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)  Part X  Other Assets. See Form 990, Part X, line 15.  (a) Description  (b) Book value  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15)  Part X  Other Liabilities. See Form 990, Part X, line 25.  Federal income laws  Note Payable — Gregory Panzica  B10  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25)			(b) Book value		
Total. (Column (b) must equal Form 950, Part X, col. (B) line 12)  Part VIII Investments—Program Related. See Form 950, Part X, line 13.  (a) Description of investment type  (b) Ecok value  Cost or end-of-year market value  Total. (Column (b) must equal Form 950, Part X, col. (B) line 13)  Part IX Other Assets. See Form 950, Part X, line 15.  (a) Description  (b) Book value  (c) Method of valuation  Cost or end-of-year market value  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (b) Ecok value  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (c) Method of valuation  (d) Ecok value  (e) Description  (b) Ecok value  (c) Method of valuation  (d) Ecok value  (e) Method of valuation  (b) Ecok value  (c) Method of valuation  (d) Ecok value  (e) Method of valuation  (b) Ecok value  (c) Method of valuation  (d) Description  (e) Description  (b) Ecok value  (c) Method of valuation  (d) Description  (e) Description  (f) Ecok value  (g) Ecok value  (h)	Financial deriv	atives			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Book value  (c) Method of valuation Cost or end-of-year market value  (c) Method of valuation Cost or end-of-year market value  (c) Method of valuation Cost or end-of-year market value  (d) Description  (e) Description  (g) Description  (h) Book value  Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part X Other Liabilities. See Form 990, Part X, line 25.  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.  Part X Other Liabilities. See Form 990, Part X, line 25.  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.  Federal income taxes  Note Payable — Gregory Panzica  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.	Closely-held e	quity interests			
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Cost or end of year market value    Total. (Column (b) must equal Form 990, Part X, col (B) line 13)   Part IX Other Assets. See Form 990, Part X, line 15.    Total. (Column (b) must equal Form 990, Part X, col (B) line 15)   Part X Other Liabilities. See Form 990, Part X, line 25.    1	Part VIII				
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organization's liability for uncertain tax positions under FIN 48

. Sche	dule D (Form 990) 2009 Peace Nick Corporation	<del></del>	1648850	Page 4
Pa	Reconciliation of Change in Net Assets from Form	990 to Audited Financia	al Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	_
8	Other (Describe in Part XIV )		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines	3 and 9	10	
Pa	at XII Reconciliation of Revenue per Audited Financial St	atements With Revenu	e per Return	
1	Total revenue, gains, and other support per audited financial statements	·	1	
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	
3	Subtract line 2e from line 1		3	
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		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			
Pa	rt XIII Reconciliation of Expenses per Audited Financial S	tatements With Expens	ses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
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			
3	Subtract line 2e from line 1	1 1	3	
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		
_	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u>)</u>	5	
	nt XIV Supplemental Information			<del></del>
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, P			
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Par	t XIII, lines 2d and 4b Also co	omplete	
this p	part to provide any additional information			
				<del>-</del>

Schedule D (F	orm 990) 2009	Peace N	ick Corporati ion (continued)	on 36-4648850	Page <b>5</b>
Part XIV	Suppleme	ental Informat	ion (continued)		
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## SCHEDULE O

Department of the Treasury Internal Revenue Service

#### 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

Name of the organization

Peace Nick Corporation

Employer identification number 36-4648850

Form 990 - Organization's Mission or Most Significant Activities

Peace Nick is a nonprofit organization promoting world peace through
education, poverty reduction, environmental protections and social justice.

Our goal is to slow down and reverse the damaging effects of the previous
decade of flawed and outdated domestic and foreign policies that the United

States has employed. "Staying the course" is no longer an option as war
and violence persist, the world economy crumbles, poverty increases, global
warming and environmental degradation continues and social injustices rise.

Peace Nick will focus on local, regional and worldwide issues that demand urgent action, solutions, and measurable results.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public