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# SCANNED MAY 1 0 2010

Form 990-EZ

Department of the Treasury

Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

The organization may have to use a copy of the pattern to satisfy state reporting requirements.

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

OMB No. 1545-1150

2009

Open to Public Inspection

_		- 1		, or tax year beginning	JAN	2009	, ~, and end	aing	Dec		, 20 69		
В		applicable.	Please	C Name of organization					D Employ	er idei	ntification number		
뭐		Address change   use IRS   use IRS							038 6450				
H	initial reti	•	print or type.	Number and street (or P	<ol><li>box, if mail</li></ol>	is not delivered to	o street address)	Room/suite	E Telepho	ne nu	ımber		
H	Terminati		See	327 Broadwa	IV			`	308	)536	2886		
Ĭ	Amended		Specific Instruc-	City or town, state or cou	intry, and ZIP	+ 4				up Exemption			
Amended return Application pending  Specific Instructions.  City or town, state or country, and ZIP + 4 Fullerton NE 68638  F Group Exemption Number									. ▶				
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).  G Accounting method □ Cash □ Accrual Other (specify) ▶								Cash Accrual				
		<del></del>		ipieted Contadure A (i Gir	7 330 07 330	U-LL).							
	\4/abai:	ta. N									organization is not		
J Organization type (check only one) — √ 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527 990-EZ, or 990-PF).									edule B (Form 990,				
_	J Organization type (check only one) —    501(c) ( )    (insert no )    4947(a)(1) or    527												
								ots are nor	nally <b>not</b> m	ore th	an \$25,000 A return is		
				zation chooses to file a ret				and of Form	000 E7	<b>▶</b> \$			
				ne 9 to determine gross rec							n David IV		
12	art I			nses, and Changes							or Part I.)		
	1		. •	s, grants, and similar amo						1	<del></del>		
	2	_		evenue including gover	nment fees	s and contract	s			2	7/3/		
	3		•							3	2681.		
	4	Investment								4	<del></del>		
	5a	Gross amo	ount from	m sale of assets other	than invent	tory							
	b	Less: cost	or othe	er basis and sales expe	nses		. <u>[5b]</u>			લ <sub>િ</sub> હું			
Ð	С			sale of assets other than					Julio, . 12	5c	·		
Š	6			vities (complete applicable part				eck here 🕨					
Revenue	а	Gross reve	enue (no	ot including \$		of contribution	ons			100 N	- •		
æ		reported or	n line 1)	)	- DIX	TOTETONE	- 6a						
	b	Less: direc	ct exper	)	sing expens	Bes V L							
	С .	Net income	e or (los	ss) from special events	and activiti	iës (Subtract I	ine (Extrom lin	e 6a), .	••	6c			
	7a	A APRIL A COLO 1011 1 A COLO 1011											
	b	Less: cost			1601 77	, , , , , ,	. <u>67</u> 6	<u> 1573</u>	9.20	<i>(* )</i>	20120 70		
	С	Gross profi	fit or (los	ss) from sales of invent scribe ►	ory (Subtra	ct.line 7b from	n⊲ine 7a) .		🗀	7c	28429 37		
	8								,	8			
	9	Total reve	nue. Ac	dd lines 1, 2, 3, 4, 5c, 6	ic, <del>7c, and</del>	8	<del></del>	<u> </u>		9	3/110,37		
	10	Grants and	d similar	r amounts paid (attach	schedule)				$\cdot \cdot \cdot \vdash$	10	············/		
	11	Benefits paid to or for members							–	11			
es	12								12	16908.			
penses	13	Professional fees and other payments to independent contractors						–	13				
Exp	14	Occupancy, rent, utilities, and maintenance						⊢	14	2748,6			
ш	15	Printing, publications, postage, and shipping					–	15	157				
	16	Other expenses (describe ►						16	12-26/30				
_	17									17	\$9\8\\0\$\		
2	18	Excess or (	(deficit)	for the year (Subtract I	ine 17 from	n line 9)				16	(4070.6b)		
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with						e with 🏻		25395.			
Ä		end-of-year figure reported on prior year's return)						🗀	19	رن المدرين			
\et	20			net assets or fund bala					–	20	<del></del>		
	21			balances at end of ye						21	<u> 21324,5</u> 2		
Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.													
		•	(Se	ee the instructions for f	art II.)			(A) Beg	inning of yea		(B) End of year		
22				estments				<u> </u>	5 <i>5</i> 95	22	21324 32		
23 Land and buildings													
24	Othe	er assets (de		<b>&gt;</b>			)	- <u>-</u> -	700	24	312-113-		
25		al assets .						1-3-5	395,	25	01574.52		
26	Tota	al liabilities (	describ	e <b>&gt;</b>			)	<u> </u>		26	127/2-		
27	Net	assets or fu	und bal	lances (line 27 of colun				<u>يح ل</u>	≥39S	27	12/5/4,32		
For	Privac	v Act and Pa	perwork	k Reduction Act Notice,	see the Inst	truction for For	m 990.	Cat No	106421		Form 990-EZ (2008)		

Part II) Statement of Program Service Accomplishments (See the instructions for Part III.)						Expenses
What is the organization's primary exempt purpose?						uired for 501(c)(3)
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner,						(4) organizations 4947(a)(1) trusts;
describe what was at	and	4947(a)(1) trusts; onal for others.)				
describe the services provided, the number of persons benefited, or other relevant information for each program title.  optional for						
(Grants \$	) If this amount inc	dudes foreign grants, check	k here	<u>. ▶                                   </u>	28a	
29		***************************************				: 
			. 4			
(Grants \$	) If this amount inc	ludes foreign grants, check	k here	. ▶ □	29a	
						· · · · · · · · · · · · · · · · · · ·
	) If this amount inc	ludes foreign grants, check	c horo	. ▶ 🗆	30a	
(Grants \$	rvices (attach schedule)				Sua	
	· · · · · · · · · · · · · · · · · · ·					
(Grants \$	) If this amount inc	ludes foreign grants, check	cnere ,	<u>. ▶ ∪</u>	31a	
	ervice expenses (add lines 28a t				32	
Part IV List of Off	icers, Directors, Trustees, and Key					<del></del>
(a)	Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribution		(e) Expense account and
(σ)	, really and address	devoted to position	enter -0)	deferred compen	sation	other allowances
Bōb Voichahos	ke			i		
803 Trying St	Fullerton NE	President	1-0-			
Stuart Anders				<u> </u>		
Fullerton NE	••••	Secretary	-0-			
Paul Bialas	912 5th ST -	Secretary		-		
Fullerton NE			-0-			
rufferton Nr	. 00030	' <u>Treasurer</u>	<del>  -U-</del>	1		
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Pa	Other Information (Note the statement requirements in the instructions for Part VI.)					
ŧ۶			Yes No			
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	$\times$			
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	7			
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.					
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	. 1			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X			
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36	1			
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a Did the organization file Form 1120-POL for this year?	37b				
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	1			
b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b   Section 501(c)(7) organizations. Enter:					
39	Cochon 50 /(c)(r) organizations. Enter.					
	initiation rees and capital contributions included on line 9					
	Gross receipts, included on line 9, for public use of club facilities					
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶					
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule					
	L. Part	40b				
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958					
d	Enter amount of tax on line 40c reimbursed by the organization ▶					
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e				
41	List the states with which a copy of this return is filed. ▶	\506	2010			
42a	The books are in care of ▶ Paul Bialas  Located at ▶ 912 5th St Fullerton NE  Telephone no. ▶ 808 )536 3212  ZIP + 4 ▶ 68638					
	At any time during the calendar year, did the organization have an interest in or a signature or other authority					
D	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes No			
	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	17			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. ▶□			
	and enter the amount of tax-exempt interest received or accrued during the tax year					
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	Yes No			
<b>45</b>	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	<b>イ</b>			
	_	000	) E7 (600)			

Par	Section 501(c)(3) organizations only and complete the tables for lines 50 a		ganizations mu	ist answer questi	ons 46	<b>–49</b>	
46 47 48 49a b	and complete the tables for lines 50 a  Did the organization engage in direct or indirect p candidates for public office? If "Yes," complete S  Did the organization engage in lobbying activities Is the organization operating a school as describe Did the organization make any transfers to an exc  If "Yes," was the related organization(s) a section Complete this table for the five highest compensate each received more than \$100,000 of compensate  (a) Name and address of each employee paid more than \$100,000	political campaign activities Schedule C, Part I	ule C, Part II  If "Yes," compl organization?  officers, director	ete Schedule E	46 47 48 49a 49b emplo	xpense	who
<del></del> 51	number of other employees paid over \$100,000  Complete this table for the five highest compensation from the organization. If there is no  (a) Name and address of each independent contractor	ated independent contractor one, enter "None."		eived more than \$1	00,000 (c) Comp		
Total	number of other independent contractors each re	eceiving over \$100,000 .	<b></b>				
Sign Here		on of preparer (other than officer)	is based on all infor	statements, and to the b nation of which prepared 4/9/10 Date	est of my	knowle	edge edge.
Paid Prepa Use C	The Firm's name (or yours Morgan & MOT	Date 4/9/1 gan ton Ne 68638			9258 40 4		
May 1	the IRS discuss this return with the preparer show	vn above? See instructions			Ye:	_=	No
				E-	<sub>س</sub> ۹۹۸	-Fフ 〃	2000

# F.O.E. 1981

### #47-0386450

# Form 990-EZ Line 16- Other Expenses

Supplies	\$5003.71
License	\$ 829.12
Donations	\$ 765.00
Insurance	\$1556.75
Aerie Expenses	\$ 565.00
Misc.	\$ 183.64

### Taxes

Real Estate	\$ 197.16
Social Security	\$ 1293.46
Sales Tax	\$ 2738.48

Total \$12,367.38