

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

Depai	rtment o	f the Treasury			reate	ed as a Private F	oundation	on		2003
Intern	al Reve	nue Service			he foundation may be able		um to satisfy	state reporting	requirements	<u> </u>
		ar year 2009, or t				and ending				<u> </u>
GC	heck a	II that apply.	H	ial return		turn of a former public		•	Final return	
		None of four		nended ret	um Add	Iress change	Na	me change		
	the IR	S Name of found	ation						ployer identification numi -1280968	Der
	abel. erwise	SENTOR	T.TV	TNG M	INISTRIES,	TNC			phone number (see page 1	O of the instructions)
	orint	·			ber if mail is not delivered		Room/surl	_	prione number (see page 1	o or the insudctions)
•	type.	2202 J	•			w throat dedition,	110011000		emption application is pend	ing check here
	Specifi								oreign organizations, check	· ·
Instr	uction				TN	37064		į.	oreign organizations meetir	
H C	heck ty	pe of organization	n: 🗶 S	Section 50	1(c)(3) exempt private	foundation		1	5% test, check here and at	_
	Section	4947(a)(1) nonex	empt cha	antable tru	st Other taxab	le private foundation		· ·	vate foundation status was	. 1
I Fa	ıır mark	et value of all ass	ets at en	a J	Accounting method:	X Cash A	crual	sect	on 507(b)(1)(A), check hen	• ▶ ∟
of	year (fi	rom Part II, col. (c),		Other (specify)		,		foundation is in a 60-mont	. 1
	e 16) 🕨		_		art I, column (d) must i	be on cash basis)		unde	er section 507(b)(1)(B), che	ck here
Pe	<u>ırt i</u>	Analysis of			• '	(a) Revenue and expenses per	(b) N	et investment	(c) Adjusted net	(d) Disbursements for charitable
		total of amounts in column the amounts in column				books	(5)	income	income	purposes
							+		 	(cash basis only)
	1 2	Contributions, gifts, Check ▶ 🕱 if the			equired to attach Sch B			· · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
	3	Interest on saving			· ·	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
	4	Dividends and int		-						
	5a	Gross rents		0000		·········				
۵	b	Net rental income	e or (loss)			7			
Revenue	6a	Net gain or (loss) from s		_	0					
ξ	ь	Gross sales price for all	assets on lir	ne 6a	<u> </u>	,	-		·	
&	7	Capital gain net in	ncome (f	rom Part I	V, line 2)			0		
	8	Net short-term ca	prtal gair	n	•				0	
	9	Income modificat	ions .		•					
	10a	Gross sales less ref		owances		ļ		·	``	
	b	Less: Cost of goo		l l						
	C	Gross profit or (lo			·			· · · · · · · · · · · · · · · · · · ·		
	11	Other income (at		•	STMT 1	33			-050 (55 0	
_	13	Total. Add lines Compensation of			trustone etc] 33	3	 	ECEIVED °	
98 8	14	Other employee:	•				 -			
, 2010 Expens	15	Pension plans, ei		•	•			ISI N		<u> </u>
<u></u>	16a	Legal fees (attack			•			141.,	17	2
	ь	Accounting fees			• •					
જ.≥	C	Other professional f			•				GDEN, UT	ال
> <u>E</u>	17	Interest								
	18	Taxes (attach schedule)	(see page 1	14 of the instru	uctions) STMT 2	40	0			400
	19	Depreciation (attach	n schedule	e) and deple	tion		_			,
回す	20	Occupancy .	•							<u> </u>
E	21	Travel, conference		meetings						
SCANNED NOV 2 2 Operating and Administrative	22	Printing and publ					+			<u></u>
SC	23	Other expenses (att. sci	•			-	+		 	
äŧi	24	Total operating Add lines 13 thro		เกเรษายน	e expenses.	40	ما	O		400
6	25	Contributions, gif	-	 s naid	•	-	 			400
Ō	26				Add lines 24 and 25	40		0	0	
	27	Subtract line 26 f			mos er und Ev	†	1		l	1
	a				nd disbursements	-6	7			
	Ь	Net investment		-				0		·
	c	Adjusted net inc							0	

12

Fo	m 990	-PF (2009) SENIOR LIVING MINISTRIES, INC.	48-12809	68	Page 2
a i	Parell	Balance Sheets Attached schedules and amounts in the description column		End o	f year
- T		should be for end-of-year amounts only (See instructions	(a) BOOK YEEGO	(b) Book Value	(c) Fair Market Value
1	1	Cash—non-interest-bearing	149	282	282
1	2	Savings and temporary cash investments		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	3	Accounts receivable ▶		4-1	
-		Less: allowance for doubtful accounts ▶			
1	4	Pledges receivable ▶	新疆。		
- 1		Less: allowance for doubtful accounts ▶			
- 1	5	Grants receivable			
1	6	Receivables due from officers, directors, trustees, and other			
1		disqualified persons (attach schedule) (see page 16 of the			
1		instructions)			
1	7	Other notes and loans receivable (att. schedule)			
- 1		Less: allowance for doubtful accounts ▶		-200	-200
গ্ৰ	8	Inventores for sale or use			
Assets	9	Prepaid expenses and deferred charges			-
¥	10a	Investments—U.S. and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
-		Less accumulated depreciation (attach sch.)			`
	12	Investments—mortgage loans			
- [13	Investments—other (attach schedule)			· , ,
	14	Land, buildings, and equipment basis			
İ		Less accumulated depreciation (attach sch)			
	15	Other assets (describe	\		
ł	16	Total assets (to be completed by all filers—see the	' · · · · · · · · · · · · · · · · · ·		
١	••	instructions Also, see page 1, item I)	149	82	82
┪	17	Accounts payable and accrued expenses			
	18	Grants payable			
98	19	Deferred revenue			· ;
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
흲	21	Mortgages and other notes payable (attach schedule)		-	
	22	Other liabilities (describe			
١	23	Total liabilities (add lines 17 through 22)	′ o	0	
┪	20	Foundations that follow SFAS 117, check here ▶ X	<u> </u>		
6		and complete lines 24 through 26 and lines 30 and 31.			
8	24	Unrestricted	149	82	
티	25	Temporanly restricted			
M	26	Permanently restricted			: !
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here ▶			
틧		and complete lines 27 through 31.			
じ	27	Capital stock, trust principal, or current funds			
2	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
쥥	29	Retained earnings, accumulated income, endowment, or other funds	·		
89	30	Total net assets or fund balances (see page 17 of the			
긼		instructions)	149	82	
윈	31	Total liabilities and net assets/fund balances (see page 17	.		
	31	of the instructions)	149	82	
	Parti		. 1	62	
_		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	ist agree with		
•		of year figure reported on prior year's return)	ist agree mili	1	149
2		amount from Part I, line 27a	• • • • • • • • • • • • • • • • • • • •	. 2	-67
		r increases not included in line 2 (itemize)	• • • • • • • • • • • • • • • • • • • •		- 0 /
		ines 1, 2, and 3	•	4	82
		eases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	· · 6	82

	550-11 (2000) 12 2012 021				<u> </u>		1 age 0
Pai	Capital Gains a	nd Losses for Tax on Investme	nt Income				
		be the kind(s) of property sold (e.g., real estate,		(b) How acquired P—Purchase	(c) Date ac		(d) Date sold
		ehouse, or common stock, 200 shs MLC Co)		D—Donation	(mo , day	/, yr)	(mo , day, yr.)
<u>1a</u>	N/A				_		
b							
С					 		
<u>d</u>	·		·		 		
θ					 		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain (e) plus (f)	or (loss) minus (g)
a							
b							
С							
<u>d</u>							
<u> </u>			1				
C	omplete only for assets showing	gain in column (h) and owned by the fou	ndation on 12/31/ T	69			(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	1	xcess of col (i) r col (j), if any	,		ess than -0-) or om col (h))
<u>a</u>			.	 	ļ		
<u>b</u>					 		
<u> </u>	· · · · · · · · · · · · · · · · · · ·						
<u>_d</u>							
θ			Death See 7				···
2 C	apital gain net income or (net ca	If gain, also enter in If (loss), enter -0- in			2		
2 M	et chart-term canital gain or (loc	s) as defined in sections 1222(5) and (6)	_		-		
		column (c) (see pages 13 and 17 of the in	_]			
	(loss), enter -0- in Part I, line 8	solution (occupance to and the or and the		•	3		
		nder Section 4940(e) for Reduce	ed Tax on Net	t Investment Inco	me		,
		foundations subject to the section 4940(a) tax on net inves	tment income)			
i If sect	ion 4940(d)(2) applies, leave thi	s nart blank					
		•			. 🖼		
		on 4942 tax on the distributable amount of		base period?	Yes 🗓 No		
	<u> </u>	fy under section 4940(e). Do not complet					
1 E	nter the appropriate amount in e	each column for each year; see page 18 o	the instructions	before making any entr	es		/d)
	Base penod years	(b) Adjusted qualifying distribution	ns Netv	(c) alue of nonchantable-use a	ssets		(d) abution ratio
	Calendar year (or tax year beginning	in)	80	**	, 663	(6) (6)	0.002609
	2008			30	, 003		0.002003
	2006						
	2005						
	2004						
2 T	otal of line 1, column (d)				2		0.002609
3 A	verage distribution ratio for the 5	5-year base period—divide the total on lin	e 2 by 5, or by the	9		.	
n	umber of years the foundation h	as been in existence if less than 5 years			3	<u> </u>	0.002609
4 E	nter the net value of nonchantat	ole-use assets for 2009 from Part X, line 5	5 .	•	4	 	291
						1	•
5 M	lultiply line 4 by line 3				5	<u> </u>	1
۰	aton 40/ of not investment incom	(40) of Dod I line 27h)				1	
8 E	nter 1% of net investment incom	ie (+76 01 Part I, line 2/0)	•		6	-	
7 ^	dd lines 5 and 6				7		1
′ ^	uu iilies v allu v		•		 	 	
8 F	nter qualifying distributions from	Part XII, line 4			8		400
	• • •	n line 7, check the box in Part VI, line 1b,	and complete that	part using a 1% tax rate		•	
	art VI instructions on page 18		<u> </u>	<u>-</u>			
							990 PE (9999)

 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see page 19 of the TN instructions) ▶ If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Form 990-PF (2009)

8b | X

X

names and addresses

Total number of other employees paid over \$50,000

Form 990-PF (2009) SENIOR LIVING MINISTRIES, INC.	48-1280968	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation F and Contractors (continued)	Managers, Highly Paid Empl	oyees,
3 Five highest-paid independent contractors for professional services (see page 23 of the	instructions). If none, enter "NONi	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		•
Part IX-A. Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information organizations and other beneficianes served, conferences convened, research papers produced, etc.	on such as the number of	Expenses
1 N/A		
2		
3	•	
	·	
4		
Part IX:Bu Summary of Program-Related Investments (see page 24 of	the instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	?	Amount
1 N/A		
2		
·		
All other program-related investments. See page 24 of the instructions		
3		
Total. Add lines 1 through 3		

Form 990-PF (2009)

400

3b

4

5

5

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

1	Distributable amount for 2009 from Part X		(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
•	line 7	''		,		15
2	Undistributed income, if any, as of the end	l of 2009.			c -	
a	Enter amount for 2008 only		-		1,453	
ь	Total for prior years: 20 , 20	. 20				
3	Excess distributions carryover, if any, to 2					-
a	From 2004		•			*
b	From 2005		*			•
c	From 2006		,	,		
d	From 2007					, .
8	From 2008			,		`
f	Total of lines 3a through e			٠, ،		j
4	Qualifying distributions for 2009 from Part	XII.	,	·		
	line 4. ▶ \$ 400	·	•		,	
а	Applied to 2008, but not more than line 2a	1			400	, ·
ь						
	(Election required—see page 26 of the ins		-]		,
c						
	required—see page 26 of the instructions	1				
d			,	·		
e	Remaining amount distributed out of corp	us				
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the s					_
	amount must be shown in column (a).)		<i>t</i>	,		
6	Enter the net total of each column as				-	
	indicated below:					
a	Corpus. Add lines 3f, 4c, and 4e Subtrac	t line 5				
b	Prior years' undistributed income Subtrac				,	
	line 4b from line 2b		,		-	
c	Enter the amount of prior years' undistribu	rted				
	income for which a notice of deficiency ha					'
	been issued, or on which the section 494	2(a)		1		
	tax has been previously assessed			ŀ		
d	Subtract line 6c from line 6b Taxable	•			,	
	amount—see page 27 of the instructions					
е	Undistributed income for 2008 Subtract li	ne				
	4a from line 2a. Taxable amount-see pa	ge		}		
	27 of the instructions				1,053	
f	Undistributed income for 2009 Subtract li	ines				
	4d and 5 from line 1. This amount must be	e				
	distributed in 2010					15
7	Amounts treated as distributions out of co	orpus				
	to satisfy requirements imposed by section			,		-
	170(b)(1)(F) or 4942(g)(3) (see page 27 of	of the				
	instructions)					
8	Excess distributions carryover from 2004	not				
	applied on line 5 or line 7 (see page 27 of	the				
	instructions)					
9	Excess distributions carryover to 2010).				
	Subtract lines 7 and 8 from line 6a					
10	Analysis of line 9:			-]	
a	Excess from 2005			.[
b	Excess from 2006					
C	Excess from 2007		[1	į	
đ	Excess from 2008					
A	Excess from 2009		l	I	ī	_

The name, address, and telephone number of the person to whom applications should be addressed

The form in which applications should be submitted and information and materials they should include

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

,	
	Form 990-PF (2009)

N/A

N/A

Any submission deadlines:

Form 990-PF (2009) SENIOR LIVING MINISTRIES, INC. 48-1280968 Page 11 PartXV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment if recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or status of **Amount** contribution recipient Name and address (home or business) Paid during the year N/A ▶ 3a Total **b** Approved for future payment N/A

▶ 3b

Total

DAA

		OS) DENIOR HIVING MINIDIR					Paye 12
	TOXXVI AT		tivities				
Ente	r gross amou	ints unless otherwise indicated.	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e)
1	Program serv	rice revenue·	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
	_				1	· -	
					1		
			_				
					† 		
				- '''	 		
	' ———		-		 -		
		1			 		
	~	contracts from government agencies	 		 		· · · · · · · · · · · · · · · · · · ·
		dues and assessments	 				
		avings and temporary cash investments					
		d interest from securities	12F 4000051600253	MANAGE STERRINGS MARKET MARK	0055625		
5		come or (loss) from real estate.			Section 4		The state of the s
		nced property			<u> </u>		
		-financed property			ļ		
6	Net rental inc	come or (loss) from personal property			ļ		
7	Other investr	nent income			<u> </u>		
8	Gain or (loss)) from sales of assets other than inventory					
9	Net income o	r (loss) from special events					
10	Gross profit o	or (loss) from sales of inventory					
	-	e: a					
	_		-		3	333	
					I -		
				1	1		
			_		1		
12	Subtotal Add	columns (b), (d), and (e)				333	0
		ne 12, columns (b), (d), and (e)	(ASSESSMENT OF THE PARTY OF THE	·	18 -4-46-46	13	333
		n line 13 instructions on page 28 to verify calculated	one \				
	and XVI-B			ent of Exempt Pu	rnosas		
		Explain below how each activity for which income					
	ine No. ▼	accomplishment of the foundation's exempt purp instructions)					the
-	N/A				-		
							
					· · · ·		
_							
							
					.		
						 	
						· · · · · · · · · · · · · · · · · · ·	
							
			-				
							
_						<u> </u>	
_						· · · · · · · · · · · · · · · · ·	
_							

orm	990-PF (2	2009) SENIOR L	IVING N	MINISTRIES, I	NC.	48-1280	968			Pa	ge 13
	rt XVII	Information Reg	•	ansfers To and Trans	sactions and	d Relationship	s With None	charitab	le		
_	Didtha	Exempt Organiz		a va anu af tha fallacena ci					E. 35-39	V	Na
1		-		e in any of the following wit	-				1000	Yes	No
			si uian secuo	n 501(c)(3) organizations)	Ji ili section 52	7, relating to politica	21		4.2		
_	organizat		lation to a no	nahaatahla ayamat amaniz	ation of						
a		•	adon to a noi	nchantable exempt organiz	auon oi.				1a(1)		X
	(1) Cash					•	•		1a(1)		X
_	(2) Other Other trans										
D		nsactions s of assets to a nonchant	able averant :	organization					1b(1)		X
	. ,	hases of assets from a no	•	-		•			1b(1)		X
		al of facilities, equipment,		-					1b(3)		X
	• •	ar or racinities, equipment, ibursement arrangements		CIS					1b(4)		X
	• •	s or loan guarantees	,						1b(5)		X
	• •	ormance of services or mo	embershin or	fundraising solicitations					1b(6)		X
_			-	her assets, or paid employe	၁၉၃				1c		X
	•		-	plete the following schedule		hould always show t	the fair market				
u		-		ven by the reporting founda							
				it, show in column (d) the v							
-	a) Line no.	(b) Amount involved	T	of noncharitable exempt organ		(d) Description of tra			ring arrange	ments	
<u>1/2</u>			 								
		<u> </u>	+								
			1								
			1				***				
			1			-					
			1								
_			 			···· · · · · · · · · · · · · · · · · ·					
			1								
									·		
			1								
2a	Is the fou	indation directly or indirec	ctly affiliated v	with, or related to, one or m	ore tax-exempt	organizations					
				than section 501(c)(3)) or II					Y	es 🛚] No
b	If "Yes,"	complete the following sc	hedule.			•					
		(a) Name of organization		(b) Type of organizat	noı	(0	c) Description of r	relationship			
	N/A										
											
	Under pen	alties of perjury, I declare the	at I have examin	ned this return, including accom	ipanying schedule	es and statements, and	to the best of my	knowledge	and		
	Delief, it is	true, correct and complete.	Declaration of p	preparer (other than taxpayer o	nduciary) is base	ed on all information of	1	as any know	reage		
1	—		7		11/12/1	<u>o</u>	(CSIDCA	<u> </u>			
2	Signa	ture of offices of trustee	<u>/</u>		Date /	▼ Tr	itle				
Sign Here		! <i>\\\\\</i>	00	1 1 000	- 44	Date	Check if		eparer's identr imber (see Sig		วก
5	اجے ج	Preparer's	(Wto	LISIL (י מי	11/05/10	self-employed	▶	ge 30 of the in	struction	s)
Š	Paid Preparer's Use Only	signature	J-W			<u> </u>	<u> </u>	<u>F</u>	200080	291	
	2 6 8 8 8 9	Firm's name (or yours if			OUP, PL			-			_
İ	ا د ہے	self-employed), address,		ESTPARK DRIVE					5-049		
l		and ZIP code	' BREN'	TWOOD, TN 37	027-503	2	1	Phone no 6	15-37	3-3	77.

37027-5032

BRENTWOOD,

TN

Phone no 615-373-3771

Forms		
990	/·990-P	F

Other Notes and Loans Receivable

2	Λ	Λ	e
Z	v	U	•

For calendar year 2009, or tax year beginning

and ending

Name

Employer Identification Number

SENIOR	LIVING	MINISTRIES,	INC.

48-1280968

FO	RM 990-PF, PAR		7 - ADDI	TION	AL INFORMA	TION	
	Name (of borrower				Relationship to disqualified p	person
(1)	OTHER LOANS RE	CEIVABLE					
(2)							
(3)							
(4)							
(5)					-		
(6)							
(7)							
(8)	,,,						
(9)							
(10)	Tella Comment	A AND THE RESERVE AND ADDRESS OF THE PARTY O	en a e	Addition of the Principle			
7.4							
	Onginal amount borrowed	Date of loan	Maturity date		R	epayment terms	Interest rate
(1)							
(2)						-	
(3)	<u> </u>						
<u>(4)</u>							
<u>(5)</u>							
(6)							
(7)			-				
(8)							
(9)							
(10)				* V .			
भूग्रह					بيوطويما بعال من الكاملات فقيلا و على		المطالعة في المطالعة المسالية المطالعة المسالية المسالية الما المطالعة المطالعة المسالية المسالية المسالية الم
	Security or	ovided by borrower				Purpose of loan	
(1)						•	
(2)							
(3)							
(4)							
(5)			·				
(6)						<u> </u>	
(7)							
<u>(8)</u>							
<u>(9)</u>							, <u></u>
(10)	STATE VENEZA DE LA COMPANIO			A MAN CORNE		TENERAL TO ALCOHOMY S.	ZUWARESEASTA 2019-14/-47
- 84				A CONTRACTOR			
	Consideration fu	mished by lender		B	alance due at eginning of year	Balance due at end of year	Fair market value (990-PF only)
<u>(1)</u>			<u> </u>	 		-200	-200
(2)				+		ļ	
(3)				├		 -	
(4)				 	 -		
<u>(5)</u>				+			
<u>(6)</u>				 			
(7)				+-			 .
<u>(8)</u>							
(9) (10)				†			
Tot	ais			1		-200	-200
				•			

SENILIV SENIOR LIVING MINISTRIES, INC. 48-1280968 FYE: 12/31/2009

Federal Statements

	Statement 1		Form 990-PF, Part I, Line 11 - Other Income	er Income		
Description			Revenue per Books	Net Investment Income	Adjusted Net Income	
TOTAL			\$ 333	w w	o o	
	Statemen	nt 2 - Form 990	Statement 2 - Form 990-PF, Part I, Line 18 - Taxes	Taxes		
Description		Total	Net Investment	Adjusted Net	Charitable Purpose	
INDIRECT TAXES/LICENSES	w w	400	\$ \$	w w	\$ 400	