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990

## **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 2009, and ending 20 For the 2009 calendar year, or tax year beginning Employer identification number C Name of organization Please B Check if applicable 510189 Address change Doing Business As tabel or Telephone number Number and street (or PO box if mail is not delivered to street address) print or Name change type. ZM Floor NOR+H MAN Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated Instruc-PROVIDENCES Amended return F Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Yes JOVCE Stievos H(b) Are all affiliates included? ☐Yes ☐ 501(c) ( 4947(a)(1) or Tax-exempt status ) ◀ (insert no ) If "No," attach a list (see instructions) RIBHS Website: ▶ H(c) Group exemption number ▶ Form of organization ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation M State of legal domicile Part I Summary Collecting Rhode Ishid 1 Briefly describe the organization's mission or most significant activities. African American Artifrets and promoting the State and in Public Schools. Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 3 Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 28 O Contributions and grants (Part VIII, line 1h) C9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses. Add lines 13-17 (must equal Part-IX-column (A), line 25) Revenue less expenses. Subtract-line 18/11/0m line (12/2) Assets or Balances Beginning of Current Year **End of Year** O 20 Total assets (Part X, line 16) O 21 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line Signature Block Part II Under penalties of perjury, I declare that I have including accompanying schedules and statements, and to the best of my knowledge Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here ce L. Sterd Type or print name and title Check if Preparer's identifying number Preparer's selfsignature employed ▶ ☑ Paid Preparer's Firm's name (or yours Use Only

St. PROVIDENCE

if self-employed), address, and ZIP + 4

Phone no

Yes

Pai	t III		nt of Program					
1	Briefl	y describe	AM	orican A	nth'FActo	- AND docu	etion of industs And Sublic Ab	1 40
2	the p	rıor Form 9	•	ny significant pro	ogram services o		h were not listed on	☐ Yes 🛂 No
3	ets, any program	☐ Yes ♠ No						
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.							
4a	(Code	):	) (Expenses \$		including grants	of \$	) (Revenue \$	)
4b	(Code	<b>:</b> :	Activ		including grants		) (Revenue \$	)
4c	(Code		) (Expenses \$	w P	including grants		) (Revenue \$	)
4d			ervices. (Describ			) (Poussus ®	<b>6</b> )	
4e	<del></del>	nses \$ program s	inc service expense	luding grants of s ▶	<u>,                                    </u>	) (Revenue \$	Ď,	

Par	rt IV	Checklist of Required Schedules			
				Yes	No
1		rganization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," the Schedule A	1		<u>'</u>
2	Is the o	rganization required to complete Schedule B, Schedule of Contributors?	2		<u></u>
3		organization engage in direct or indirect political campaign activities on behalf of or in opposition to tes for public office? If "Yes," complete Schedule C, Part I	3		
4	Schedu	501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete le C, Part II	4		
5		501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	,	<u>~</u>
6	the righ	organization maintain any donor advised funds or any similar funds or accounts where donors have to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," the Schedule D, Part I	6		<u></u>
7		organization receive or hold a conservation easement, including easements to preserve open space, ronment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
L	complet	organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," e Schedule D, Part III	8		
9	X, or p	organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part rovide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," the Schedule D, Part IV	9		<u>レ</u>
10		organization, directly or through a related organization, hold assets in term, permanent, or indowments? If "Yes," complete Schedule D, Part V	10		_
11	VII, VIII,	rganization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, IX, or X as applicable	11		
•		organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete le D, Part VI.			
•		organization report an amount for investments—other securities in Part X, line 12 that is 5% or more tal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	of its to	organization report an amount for investments—program related in Part X, line 13 that is 5% or more tal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•		organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets in Part X, line 16? If "Yes," complete Schedule D, Part IX			
	Did the	organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X organization's separate or consolidated financial statements for the tax year include a footnote that addresses nization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12		organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete e D, Parts XI, XII, and XIII.	12		-
12A		organization included in consolidated, independent audited financial statements for the tax year?  Yes No completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the o	ganization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
		organization maintain an office, employees, or agents outside of the United States?	14a		
Ь		organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, s, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		
15		organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any ation or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	to indiv	organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance duals located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17		organization report a total of more than \$15,000 of expenses for professional fundraising services IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Part VII	organization report more than \$15,000 total of fundraising event gross income and contributions on , lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	If "Yes,"	organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? complete Schedule G, Part III	19		
20	Did the	organization operate one or more hospitals? If "Yes," complete Schedule H	20		

•	Form 990 (2009)				
	Part IV	Checklist of	Required	Schedules	(continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			 م
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>~</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u></u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
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		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
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	;	
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		
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		<i>✓</i>
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
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		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38		

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<u></u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	$\longrightarrow$	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country: ▶		- 1	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		<del></del> -
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	35	-	
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	$\dashv$	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "You " indicate the number of Forms 8282 filed during the year	7c		<u> </u>
	if fes, indicate the number of forms 5252 med during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		<u></u>
†	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		ł	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	93		
	Did the organization make any taxable distributions under section 4966?	9a 9b	-+	<u> </u>
	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:	<u> </u>		
0 a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		, 1	
1	Section 501(c)(12) organizations. Enter:		.	
а	Gross income from members or shareholders	į	.	
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		·	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes." enter the amount of tax-exempt interest received or accrued during the year   12b	12a		

amounts due or received from them.)

Form	990 (2009)		Pa	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
		\	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		14	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	195		A CONTRACT
	Statements, filed for the calendar year ending with or within the year covered by this return	Emise Ch	أعدانا	
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1 44	T. Tarking
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country: ▶	表表	16	( Section
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	_	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u></u>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		,
7	Organizations that may receive deductible contributions under section 170(c).		7	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	373.1	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	- Contract C	<del></del>
	If "Yes," indicate the number of Forms 8282 filed during the year			
8	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	illii i	· · · · · · · · · · · · · · · · · · ·
† -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	' <del>'</del>		
_	required?	7h		<u></u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	1.54	23	3/2. W
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			المراجعة أن أن المراجعة المراجعة
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts included on Form 990. Part VIII, line 12 for public use of club facilities.	y Z		rei .
	erede receipte, included on very control of the receipt and th	17 3.1		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  [11a]  [7]			
	Gross income from other sources (Do not net amounts due or paid to other sources against			

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b |

11b

12b

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

Sec	tion A. Governing Body and Management			
	ı ı <b>a</b>		Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent  1b   1			
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_		
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			مرا
	of the governing body?	7a		
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			ŀ
	the year by the following:	00	- 1	
	The governing body?	8a 8b		
_	Each committee with authority to act on behalf of the governing body?	OD		<del></del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	00		1
<del></del>	tion B. Policies (This Section B requests information about policies not required by the Inte	9a		<u> </u>
	enue Code.)	ziiiai		
nev	enue Coue./		Yes	No
	- · · · · · · · · · · · · · · · · · · ·	10a	162	No.
	Does the organization have local chapters, branches, or affiliates?	IVa		
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	<b>V</b>	
44.6	form?	<u> </u>		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	V	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			,
D	rise to conflicts?	12b	<b>V</b>	
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		
13	Does the organization have a written whistleblower policy?	13		
14	Does the organization have a written document retention and destruction policy?	14	/	
15	Did the process for determining compensation of the following persons include a review and approval by			
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<b>V</b>
	Other officers or key employees of the organization	15b		<u> </u>
D	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		/
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
U	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 Rholf TCIANA			
18	List the states with which a copy of this Form 990 is required to be filed > Rhode IS/AND Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cr	c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.	···	•	
	☑ 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 inte	erest	
. •	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 reco	rds o	f the	
-	organization			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not co	mpensate	any c	urr	ent	offic	cer, d	ırec	tor, or trustee.		
(A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average	Positi	Position (check all that apply)				Reportable	Reportable	Estimated	
NA	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
										<u>-</u> .
	:									
								·		
								-		
										_

Pa	rt VII Section A. Officers, Directors, Tru	ıstees, Key	Emp	loy	ees,	an	d Hig	hest	Compensated	I Employees	(continu	ed)	
	(A)	(B)			(6	C)			(D)	(E)		(F)	
	Name and title	Average hours per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organization (W-2/1099-MIS	n a i s cor SC) or a	Estimate amount other mpensa from th rganizati and relati ganizati	of ation ne tion ted
_		-											
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					ļ.								
					_								
1b	Total	<u>.                                    </u>	<u> </u>	<b>'</b>		1	· -	•	0	0		O	<del></del>
2	Total number of individuals (including but in reportable compensation from the organization)	not limited ation ►	to the	ose	liste	ed a	above	) wh	no received mo	ore than \$100	),000 in		No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S	er, director Schedule J	or tru	uste Ich	e, k indi	key Vidu	emplo al	oyee	e, or highest c	ompensated	3		V
4	For any individual listed on line 1a, is the s the organization and related organizations individual												
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp olete	oen: S <i>ch</i>	satıd edu	on f	rom : for s	any uch	unrelated organization	anızatıon for	5		-
Se	ction B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization.	ompensate	d ind	ере	nde	nt c	ontra	cto	rs that received	d more than	\$100,00	0 of	
	(A) Name and business add	iress							(B) Description of se	ervices		C) ensatio	n
	NA											Ŏ	
	<u> </u>		-		_	_		<u> </u>				0	
								<del> </del>				0	_
								$\vdash$				$\tilde{o}$	
-	Total number of independent contractors (i	notudina hi	ıt not	lım	.tod	l to i	thoso	licto	ad above) who	racowad		<del>-</del>	

more than \$100,000 in compensation from the organization ▶

Par	VII	Statement of Revenue				Ţ
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	and similar amounts not included above 1f 0	0			
Program Service Revenue	2a b c d e f	All other program service revenue  Total. Add lines 2a-2f  Business Code  O  O  D  D  D  D  D  D  D  D  D  D  D	000000	0	0	0 0 0 0
	3 4 5	Investment income (including dividends, interest, and other similar amounts)  Income from investment of tax-exempt bond proceeds Royalties  (i) Real (ii) Personal  Gross Rents	0	0 0 0	0	0
	b c d	Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of  (i) Securities  (ii) Other	D	0	0	0
	С	Less cost or other basis and sales expenses Gain or (loss)  Net gain or (loss)	0	0	0	0
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Less: direct expenses b				
₹		Net income or (loss) from fundraising events	0	0	0	0
	b	Gross income from gaming activities. See Part IV, line 19 Less: direct expenses  Net income or (loss) from gaming activities		0	0	0
	10a b	Net income or (loss) from gaming activities  Gross sales of inventory, less returns and allowances  Less. cost of goods sold  Net income or (loss) from sales of inventory	0	0	0	0
	_	Miscellaneous Revenue Business Code	U			
	11a b c	0 0 0	2	000	9	0
	_	All other revenue	5	Ö	0	0
	е 12	Total. Add lines 11a-11d  Total revenue. See instructions. ▶	0	D	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, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0					
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	<u> </u>					
4	Benefits paid to or for members		0					
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	Ŏ	0	0	<u>0</u>			
7	Other salaries and wages							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0	0	0	0			
9	Other employee benefits	<u> </u>	7	V	<u> </u>			
10	Payroll taxes	<i>U</i>	U	<u> </u>	υ			
11	Fees for services (non-employees).	$\mathcal{O}$	D	0	D			
_	Management		<u>0</u>	1 /	0			
b	Legal	6	٥	7	Ö			
	Accounting	Ô	ň	1 0	Ŏ			
	Lobbying	Ď		V	Ď			
	Professional fundraising services. See Part IV, line 17	<u> </u>	0	1	Ö			
	Investment management fees Other	Ď	Ŏ	Ď	Ď			
-		Ď	Ď	D	Ö			
12 13	Advertising and promotion	0	Ŏ	Ď	0			
14	Office expenses Information technology	Ō	0	O	0			
15	Royalties	Ŏ	0	0	0			
16	Occupancy	0	0	0	0			
17	Travel	0	Ò	0	<u> </u>			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0			
19	Conferences, conventions, and meetings	$\mathcal{O}$	U	0	Q			
20	Interest	0	()	Q	<u>U</u>			
21	Payments to affiliates	0	Q	Q	<u> </u>			
22	Depreciation, depletion, and amortization	0	L	0	<u> </u>			
23	Insurance	U	U	U	<u> </u>			
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	Movire >	27,829	0	0	Q			
b	Movire >	0	<u>Q</u>	0	<i>C)</i>			
С	), v, (	0	<u> </u>	0				
d		<u> </u>	<u>ó</u>	0	<u>Q</u>			
e		0	<u> </u>	<u> </u>	Ö			
25_	All other expenses  Total functional expenses. Add lines 1 through 24f	77,829	8	0	0			
26	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	0
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	D
τ.	_	200000000000000000000000000000000000000	5	7	0
Assets	7	Notes and loans receivable, net	0	8	Ö
ASS	8	Inventories for sale or use	0	9	0
,	9 10a	Prepaid expenses and deferred charges  Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D			
	h	Less: accumulated depreciation 10b	0	10c	D
	11	Investments—publicly traded securities	0	11	0
	12	Investments—publicly traded secondes  Investments—other securities. See Part IV, line 11	Ō	12	0
	13	Investments—program-related. See Part IV, line 11	D	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	Ō	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	0	16	0
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Ĭŧ	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified			
_		persons. Complete Part II of Schedule L	0	22	<u> </u>
	23	Secured mortgages and notes payable to unrelated third parties	0		- 5
	24	Unsecured notes and loans payable to unrelated third parties	0	24 25	<del></del>
	25 26	Other liabilities. Complete Part X of Schedule D  Total liabilities. Add lines 17 through 25	0	26	0
ces		Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
<u>la</u> n	27	Unrestricted net assets	Q	27	0
Ва	28	Temporarily restricted net assets	Q	28	<u> </u>
Þ	29	Permanently restricted net assets	0	29	
or Fund Balanc		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds	0	30	0
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
As	32	Retained earnings, endowment, accumulated income, or other funds	0	32	D
et	33	Total net assets or fund balances	0	33	0
_	34	Total liabilities and net assets/fund balances	0	34	0

	4	•
Page		4

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

Form **990** (2009)