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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047 Open to Public

		of the Treasury enue Service	▶ A1	ttach to Form 990 or Fo	orm 990-E	Z. ▶ See	separate	instructio	ns.	, 0	nen to Publi Inspection	
		he organization	MUNIO	Him Chris	Hunk	esch	الكران	\mathfrak{L}	X(0:1	r identificati	el091_	
Pai				arity Status (All or						e instruc	tions)	
	_			dation because it is						,	•	
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3							ın saatia	n 170(h)/	4\/A\/;;;\	(Attach S	chadula U)	
4	_	A medical re	nospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the spital's name, city, and state:							r the		
5		An organizat	•	the benefit of a colle				perated t	by a gove	ernmental	unit describ	ed in
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d ın sect i	ion 170(b)(1)(A)(v)) .		
7		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				d in section 170(b)(1)								
9		receipts from	organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross selpts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its opport from gross investment income and unrelated business taxable income (less section 511 tax) from businesses quired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)						of its			
10 11 e		An organizar purposes of 509(a)(3). Clia Type By checking persons other	tion organized a one or more pul heck the box tha ! b — g this box, I cert	tify that the organiza in managers and othe	vely for the nizations of suppose tion is no	ne benefi describer rting orga e III-Fun et control	t of, to point of the section of the	perform the con 509(a) and com integrated the contraction the contraction in the contract	ne function (1) or section of the contraction of th	ons of, or otion 509(ces 11e through the center of the cen	r to carry ou a)(2). See se ough 11h Type III-Ot more disqua	ut the ction ther alified
f				a written determinat	ion from	the IRS	that it is	a Type I	, Type II	, or Type	III supportii	ng _
g		Since Augus	nization, check this box a August 17, 2006, has the organization accepted any gift or contribution from any of the wing persons?		•		<u>L</u> .					
		(i) A persor	person who directly or indirectly controls, either alone or together with persons described and (iii) below, the governing body of the supported organization?		oed in (ii)	Yes 11g(ı)	No					
				rson described in (i)							11g(ii)	<u> </u>
			-	of a person described						•	[11g(iii)]	<u> </u>
<u>h</u>		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the organization (v) Did you notify the organization in col (i) listed in your governing document? (vi) Did you notify the organization in col (i) of your support?		ou notify nization in of your	(vi) is the organization in col (i) organized in the US?		(vii) Amount of support		
					Yes	No	Yes	No	Yes	No		
				IA		<u> </u>						
			1			<u> </u>						
					-		<u> </u>					
	-											
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chedule	Α	(Form	990	or	990.	٠F <i>7</i> ۱	2008

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Par	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(Á) (vi)
Sec	tion A. Public Support	NOC INC SOX	011 11110 0, 7,	51 0 01 1 are 1	··/	·	
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006 /	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		1				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		'				
4	Total. Add lines 1-3	100 / 100 mg	SAME A CONTROL OF LAT	100 to 51 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	120° 120° 120° 120° 120° 120° 120° 120°	200 10 10 20 20 20 10 10 10 10	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					Market M.	
_6	Public support. Subtract line 5 from the 4	"是你是我们的	7: M	19 3.40 C. 4	Sala salate an	Brand Ballouthin	
	tion B. Total Support		T ",			1	- ,=
Ca	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4			/			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1				•	
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		(F 1 1 2 2 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1		156 8 45 7 15	Carl Carl	
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for organization, check this box and stop years.	ere		nd, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
Sec	tion C. Computation of Public Su	pport Perce	ntage				
14	Public support percentage for 2008 (line	6, column (f) d	ivided by line 1	1, column (f))		14	%
15	Public support percentage from 2007 Sc	hedule A, Part	IV-A, line 26f	\ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		15	%_
16a	33½% support test—2008. If the organiand stop here. The organization qualifies	zation did not	check the box		line 14 is 33½	% or more, che	ck this box
b	331/3 % support test—2007. If the organization quality and stop here. The organization quality				and line 15 is	331/3 % or more.	, check this ▶ □
17a	10%-facts-and-circumstances test – 2008. 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.						
b	10%-facts-and-circumstances test — 2007 more and if the organization meets the "organization meets the "facts-and-circumstant"	facts-and-circur ances" test. The	nstances" test. organization qu	check this box alifies as a publi	and stop here cly supported or	Explain in Part rganization	IV how the ▶ □
18	Private foundation. If the organization did	d not check a bo	ox on line 13 16	a 16b 17a. or	17b check this	box and see ins	structions. ► □

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (a) 2004 (c) 2006 (d) 2007 (e) 2008 Calendar year (or fiscal year beginning in) (b) 2005 (f) Total contributions. grants, membership fees received (Do not include any "unusual grants ") 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. Gross receipts from activities that are not an unrelated trade or business under section 513 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 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b Public support (Subtract line 7c from 12 B 14 三、高加工 化重压 line 6) Section B. Total Support (e) 2008 Calendar year (or fiscal year beginning in) 🍃 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Totai Amounts from line 6 . . . 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 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. (1) · 以是是加工(1) 心理(5) 产品(1) (以上、产品(4) and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a\settion 501(3) 14 organization, check this box and stop here / Section C. Computation of Public Support Percentage <u>%</u> Public support percentage for 2008 (line 8, column (f) divided by line 13. column (f)) 15 Public support percentage from 2007 Schedule A. Part IV-A. line 27g 16 % Section D. Computation of Investment Income Percentage *7 % 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 19a 331/3 % support tests - 2008. If the organization did not check the box on line 14, and line 15/s more than 331/3 %, and line 17 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization > b 331/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and

line 18 is not more than 33% %, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🗌

SCHEDULE E (Form 990 or 990-EZ)

Schools

▶ To be completed by organizations that

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ.

Name	of the organization of the	n num	ber	
	100	rw.	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	, 1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain	3		×
	No solicitation done threats envolt			
	from word of mooth of other parents			
4	Does the organization maintain the following?		Ì	ĺ
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a		X
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		X
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	1
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	4d		1)10
		1		
5	Does the organization discriminate by race in any way with respect to.			\ <u>\</u>
а	Students' nghts or privileges?	<u>5a</u>	 -	1
b	Admissions policies?	5b	<u> </u>	X
С	Employment of faculty or administrative staff?	5с		X
d	Scholarships or other financial assistance?	′5d		X
е	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs? .	5g	1	X
h	Other extracurncular activities?	5h	1	12
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
			1	
			i	!
C -	Dana the assessment of the state of the stat	6-	i	X
_	Does the organization receive any financial aid or assistance from a governmental agency?	6a 6b	!	1
ь	Has the organization s nght to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement	50	<u> </u>	1
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation.	7	1	10