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Change of Fiscal Year

2010

OMB No 1545-1150

2009

Open to Public Inspection

Form 990-EZ

Short Form
Return of Organization Exempt From Income TaxUnder 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 \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Department of the Treasury
Internal Revenue Service

A For the 2009 calendar year, or tax year beginning

January 1, 2010, and ending

June 30, 2010

B Check if applicable

Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

Please use IRS label or print or type
See Specific Instructions

C Name of organization
Tucson Meet Yourself
Number and street (or P O box, if mail is not delivered to street address)
P, O, Box 42044
City or town, state or country, and ZIP + 4
Tucson, AZ 85733-2044

D Employer identification number
51-0195434
E Telephone number
520-577-0990
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) ►

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ► www.tucsonmeetyourself.orgJ Tax-exempt status (check only one) — 501(c)(3) (insert no.) 4947(a)(1) or 527K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	24759
	2 Program service revenue including government fees and contracts	2	2165
	3 Membership dues and assessments	3	
	4 Investment income	4	9
	5a Gross amount from sale of assets other than inventory	5a	0
	b Less: cost or other basis and sales expenses	5b	0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>	6c	0
	a Gross revenue (not including \$ of contributions reported on line 1)	6a	0
	b Less: direct expenses other than fundraising expenses	6b	0
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	0
	7a Gross sales of inventory, less returns and allowances	7a	0
	b Less: cost of goods sold	7b	0
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
	8 Other revenue (describe ► OGDEN UT)	8	
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ►	9	28933
Expenses	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	14560
	14 Occupancy, rent, utilities, and maintenance	14	820
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe ► Production, Travel, Marketing, Remaining Operating Expenses)	16	11181
	17 Total expenses. Add lines 10 through 16 ►	17	28561
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	372
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ►	21	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.	(See the instructions for Part II.)	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	56532	22	56904
23 Land and buildings		23	
24 Other assets (describe ►)		24	
25 Total assets	56532	25	56904
26 Total liabilities (describe ►)		26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	56532	27	56904

S9

11

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

Identify, research, publicize & present living traditional arts

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28

(Grants \$) If this amount includes foreign grants, check here ▶

28a 10,000

10,000

29 Sabores Sin Fronteras- "Tastes without Borders" - an alliance to promote foodways and culinary culture of the Arizona Sonora Desert

(Grants \$ 10,000) If this amount includes foreign grants, check here . . .

29a

30

30a

31 Other program services (attach schedule)

Other program services (attach separate) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

- 10 -

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	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	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
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 why the organization did not report the income on Form 990-T.	35a	✓
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35b	
b If "Yes," has it filed a tax return on Form 990-T for this year?	36	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a	37b	✓
b Did the organization file Form 1120-POL for this year?	38a	✓
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 outstanding at the end of the period covered by this return?	38b	
b If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	
39 Section 501(c)(7) organizations. Enter:	39b	
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____	40b	✓
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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		
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e 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. ► <u>Arizona</u>		
42a The organization's books are in care of ► <u>Robert Shatz</u> Telephone no. ► <u>520-577-6990</u> Located at ► <u>P. O. Box 65466, Tucson, AZ</u> ZIP + 4 ► <u>85728-5466</u>	42b	✓
b 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)?	42c	✓
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 .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? _____ If "Yes," enter the name of the foreign country: ► _____		
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 ► <u>43</u>		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 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	✓

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	✓
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	✓
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b If "Yes," was the related organization a section 527 organization?	49b	
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

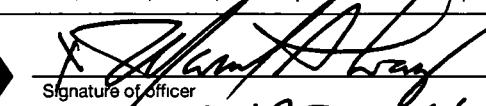
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
not applicable				

f Total number of other employees paid over \$100,000 ► _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
not applicable		

d Total number of other independent contractors each receiving over \$100,000 ► _____

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
	► 	Date 10-15-10		
	► Signature of Officer MARIBEL ALVAREZ	Type or print name and title Chairwoman		
Paid Preparer's Use Only	Preparer's signature ►	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► _____		EIN ►	
			Phone no ►	
May the IRS discuss this return with the preparer shown above? See instructions ► <input type="checkbox"/> Yes <input type="checkbox"/> No				

Change Fiscal Year

2010

OMB No 1545-0047

~~2009~~

**Open to Public
Inspection**

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

Employer identification number

5

0195434

Tucson Meet Yourself

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 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 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 a Type I b Type II c Type III—Functionally integrated d Type III—Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

Part II 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
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	69460	71579	80476	142506	24759	388780
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	10000	10000	16000	13500	0	49500
4 Total. Add lines 1 through 3	79460	81579	96476	156006	24759	438280
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)						9068
6 Public support. Subtract line 5 from line 4.						429212

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	77860	81579	90242	154772	24759	429212
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1381	35	14	452	9	1891
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0	0	0
11 Total support. Add lines 7 through 10						431103
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	99.56	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	98.43	%
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 ► <input checked="" type="checkbox"/>			
b 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 ► <input type="checkbox"/>			
17a 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 ► <input type="checkbox"/>			
b 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 ► <input type="checkbox"/>			
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 ► <input type="checkbox"/>			

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

Calendar year (or fiscal year beginning in) ►	(a) 2005	(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 from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
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						
c 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%
19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

COMMISSIONERS
KRISTINK. MAYES - Chairman
GARY PIERCE
PAUL NEWMAN
SANDRA D. KENNEDY
BOB STUMP



ARIZONA CORPORATION COMMISSION

ERNEST G. JOHNSON
Executive Director
JEFF GRANT
Director
Corporations Division

March 17, 2010

ROBERT SHATZ
P.O. BOX 42044
TUCSON, AZ 85733-2044

RE: TUCSON MEET YOURSELF
File Number: 05081804

We are pleased to notify you that your Amendment to Articles of Incorporation for the above-referenced corporation HAS BEEN APPROVED.

You must publish a copy of the Amendment. The publication must be in a newspaper of general circulation in the county of the known place of business in Arizona for three consecutive publications. A list of acceptable newspapers in each county is enclosed and is also posted on the Commission website. Publication must be completed **WITHIN 60 DAYS** after March 17, 2010, which is the date the document was approved for filing by the Commission. The corporation may be subject to administrative dissolution if it fails to publish. You will receive an Affidavit of Publication from the newspaper, and you may file it with the Commission.

We strongly recommend that you periodically monitor your corporation's record with the Commission, which can be viewed at www.azcc.gov/divisions/corporations. If you have questions or need further information, please contact us at (602) 542-3026 in Phoenix, or Toll Free (Arizona residents only) at 1-800-345-5819.

Sincerely,
AL Bendy
Examiner, Corporations Division

A handwritten signature in black ink that appears to read "Al Bendy".

CF:11
REV. 01/2009



03056883

MAR 10 2010

AZ CORPORATION COMMISSION
FILED

FEB 18 2010

FILE NO. 05081804

FILE NO. 05081804

NON-PROFIT CORPORATION
ARTICLES OF AMENDMENT
Pursuant to A.R.S. §10-11008

1. The name of the corporation is:

Cultural Exchange Council of Tucson, Inc.

2. Attached hereto as Exhibit A is the text of each amendment adopted.

3. The amendment was adopted the 13th day of January, 2010.

4. The amendment was duly adopted by act of (choose one):

the members

the board of directors (without member action and either member action was not required or members are not entitled to vote).

5. and with approval, in writing, by the person or persons so specified in the corporation's Articles of Incorporation or bylaws.

Dated as of this 17th day of February, 2010.

Signature: Robert Shatz Treasurer

(Pursuant to A.R.S. §10-3120 (F)(3)) the Articles of Amendment must be executed by an officer of the corporation or the Chairman of the Board of Directors).

Title: Treasurer (CFO)

Printed Name: Robert Shatz

EXHIBIT A

Article 1 : Name

The name of this organization
is Tucson Meet Yourself.
(herein referred to as "TMY").

AFFIDAVIT OF PUBLICATION

STATE OF ARIZONA)
COUNTY OF PIMA) ss.
)

Diane Cuff, being first duly sworn, deposes and says that (s)he is the **Legal Advertising Manager of THE DAILY TERRITORIAL**, a daily newspaper printed and published in the County of Pima, State of Arizona, and of general circulation in the City of Tucson, County of Pima, State of Arizona and elsewhere, and the hereto attached.

ARTICLES OF AMENDMENT

Cultural Exchange Council of Tucson, Inc. to Tucson Meet Yourself

was printed and published correctly in the regular and entire issue of said **THE DAILY TERRITORIAL** for 3 issues, that was first made on the 29th day of March 2010 and the last publication thereof was made on the 31st day of March 2010 ; that said publication was made on each of the following dates, to-wit

03/29/10
03/30/10
03/31/10

RECEIVED

MAR 31 2010

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

at the Request of. Robert Shatz

by _____, Legal Advertising Manager

Subscribed and sworn to before me this 31st day of March 2010.

Notary Public in and for the County of Pima, State of Arizona

My commission expires: 10/31/2011

CELINDA ARGUE
Notary Public - Arizona
Pima County
Expires 10/31/2011



NON-PROFIT CORPORATION

ARTICLES OF AMENDMENT

Pursuant to A.R.S. §10-11006

1. The name of the corporation is Cultural Exchange Council of Tucson, Inc.

2. Attached hereto as Exhibit A is the text of each amendment adopted.

3. The amendment was adopted the 13th day of January, 2010.

4. The amendment was duly adopted by act of the members.

5. and with approval, in writing, by the person or persons so specified in the corporation's Articles of Incorporation or bylaws.

Dated as of this 17th day of February, 2010, As Treasurer (CEO) Robert Shatz

EXHIBIT A

Article 1. Name. The name of this organization is Tucson Meet Yourself (herein referred to as "TMY"). AZ CORPORATION COMMISSION FILED MAR 10 2010 FILE NO 0508180-4

PUBLISH. The Daily Tarrkonei
March 29, 30, 31, 2010
atucson dc

2:13 PM

10/05/10

Accrual Basis

TMY2010
Profit & Loss
January through June 2010

	<u>Jan - Jun 10</u>
Income	
10. Contracted Services	
10.e Welcome Booths	200 00
10.g Contract Work	1,964 60
Total 10. Contracted Services	2,164 60
11. Other Revenue	
Interest Income	8 78
Total 11. Other Revenue	8 78
12. Corporate Contributions	4,250 00
13. Foundation Grants	11,600 00
14. Other Private Contributions	
Board Members	177 00
Individuals	8,732 29
Total 14. Other Private Contributions	8,909 29
Total Income	26,932 67
Expense	
2. Contract Services	
2.a) Artists	
Iron Chef	75 00
Total 2.a) Artists	75 00
2.b) Consultants/Other Experts	7,785 30
2. Contract Services - Other	6,700 00
Total 2. Contract Services	14,560 30
3. Production Expenses	2,999 39
4. Space/Facilities Rentals	
Office	820 00
Total 4. Space/Facilities Rentals	820 00
5. Travel	
Hotel	107 13
Gas	498 18
5. Travel - Other	29 20
Total 5. Travel	634 51
6. Marketing/PR/Promotion	
Affiliated Organization	307 00
Posters, Programs, Other	1,129 11
6. Marketing/PR/Promotion - Other	815 16
Total 6. Marketing/PR/Promotion	2,251 27
7. Remaining Operating Expenses	
7.b) Special Events	459 50
7.c) Equipment Rental	
Ace Pumping	412 61
Arizona Party Rentals	936 93
Total 7.c) Equipment Rental	1,349 54
7 d) Supplies/Materials	880 92
7 f) Communications	
Phone and Cell Phone	814 62
Website	155 40
7 f) Communications - Other	372 51
Total 7 f) Communications	1,342 53

2:13 PM
10/05/10
Accrual Basis

**TMY2010
Profit & Loss
January through June 2010**

	<u>Jan - Jun 10</u>
7 g) Financial Services Charges	
ATM Fees	18 94
Monthly Service Fee	7 50
7 g) Financial Services Charges - Other	<u>303 50</u>
Total 7 g) Financial Services Charges	329 94
7 i) Other Expenses	<u>932 38</u>
Total 7. Remaining Operating Expenses	<u>5,294 81</u>
Total Expense	<u>26,560 28</u>
Net Income	<u>372.39</u>