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JCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ.

4947(a)(1) nonexempt charitable trust. Open to Public ► See separate instructions. Employer identification number

		ASUS SOCIE									16419		
Pa				arity Status (All org						struction	is		
The	orgar			ation because it is: (Fo									
1	H	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	님	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
3	\vdash	•	•	•									
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, sta	ate, or local gov	ernment or governme	ntal unit d	escribed i	in sectio	n 170(b)(ʻ	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	l in section 170(b)(1)((A)(vi). (C	omplete f	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 organizat	ion organized a	nd operated exclusive	ly to test	for public	safety. S	ee sect io	n 509(a)(4) .			
11 e									•				
		-	section 509(a)(=			pube.y	опристои	, organiza		J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
f				a written determination	n from the	RS that	it is a Typ	e I, Type	li, or Typ	e III supp	orting		
		organization	, check this box										
9				the organization acce	pted any	gift or con	ا tribution آ	rom any.	of the —— CEIVE	D			
	following persons? (i) A person who directly or indirectly controls,									· .			
		• •	A person who directly or indirectly controls, either alone or together with persons of and (iii) below, the governing body of the supported organization?						O(11g(i) X				
		(ii) A family member of a person described in (i) above?							V 2 8 2011 (v. 11g(ii) X				
		(iii) A 35% controlled entity of a person described in (i) or (ii) above?								11g(iii)	X		
<u>h</u>				ation about the support		nization(s) organization		un vorità	DEN	ड कार्च	(vii) Amoun	t of	
(i) Name of supported organization			ed (ii) EIN (described on lines above or IRC sect (see Instruction)		()			nization in of your	organizat (i) organi		in col support		
					Yes	No	Yes	No	Yes	No			
							,,					20.024	
Caddo Middle Magnet		ddle Magnet	61-1416419	501C3	X	 	X	 	<u> </u>	 		30,801	
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<u>Tota</u>			CHIPPING & Hall	THE PERSON NAMED IN COLUMN TWO	THE MAN PARTY	ATT COURT	作用上述的	THE PROPERTY OF THE PARTY OF TH	MARIO AND MARKET	No. of the last	N 20 Cr 5/4	30,801	

	LILE A (Form 990 or 990-EZ) 2009, THE PEGASUS	SOCIETY				61-141641	9 Page 2
Par	 ··	zations Desc	ribed in Sec	tions 170(b)(1)(A)(iv) and	170(b)(1)(A)	(vi)
Sact	(Complete only if you checked to a checked t	the box on line	e 5, 7, or 8 or	Part I.)			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 200C	(=) 0007	(4) 0000	(1) 0000	(0. T-1-1
		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Giffs, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0				0
2	Tax revenues levied for the organization's						
_	benefit and either paid to or expended on its behalf.	0	0				0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0				0
4	Total. Add lines 1 through 3	0	0	o	0	o	0
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)						
6	Public support. Subtract line 5 from line 4.						0
	tion B. Total Support	Carried Section Section 14	Submit 35% Miller of control	ALEGIS AND APPROPRIATE DE LISTE		Sentent and Attended of	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	0	(2) 2000	0			
8	Gross income from interest, dividends,				U	U	0
	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	0	0				0
	regularly carried on						•
10	Other income. Do not include gain or loss from the sale of capital assets						0
11	(Explain in Part IV.)	U STRANGE STREET	nintra de la companya della companya della companya de la companya de la companya della companya		SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSO	Service Services	0
12	Gross receipts from related activities, etc. (s					12	0
13	First five years. If the Form 990 is for the o organization, check this box and stop here	rganization's fir	st, second, thi	rd, fourth, or fif		section 501 (c	
Cant					• • • •		
	ion C. Computation of Public Support Public support percentage for 2009 (line 6, o	rercentage	lad by less 14	column (6)		14	0.000/
14 15	Public support percentage for 2009 (line 6, V				i	15	0.00%
16a	33 1/3% support test-2009. If the organiza						
104	and stop here. The organization qualifies a						. D
b	33 1/3% support test-2008. If the organiza	tion did not che	eck a box on tir	ne 13 or 16a, a	nd line 15 is 33	3 1/3% or more	, check this
17a b	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.						
18	Private foundation. If the organization did not ch	eck a box on line	e 13, 16a, 16b, 1	7a ,or 17b, checi	k this box and se	e instructions	▶□

Par				ion 509(a)(2)	•		
Sec	(Complete only if you checked that ion A. Public Support	ne box on line	9 of Part I.)				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and		(3) 2000	(0) 200.	(5) 2000	(0) 2000	1.7 . 0.0.
'	membership fees received. (Do not				٠		
	include any "unusual grants.")	o	o				0
2	Gross receipts from admissions, merchandise						
-	sold or services performed, or facilities furnished					İ	
	in any activity that is related to the						
	organization's tax-exempt purpose	0	0				0
3	Gross receipts from activities that are not an						
4	unrelated trade or business under section 513 Tax revenues levied for the organization's						0
7	benefit and either paid to or expended on		}				
	its behalf	o	o				0
5	The value of services or facilities					_	
	furnished by a governmental unit to the	ا	ا		ļ		_
6	organization without charge	0	0		0	0	0
	Amounts included on lines 1, 2, and 3				Ų	- 0	
	received from disqualified persons						0
b	Amounts included on lines 2 and 3 received						
U	from other than disqualified persons that					İ	
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
C	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						_
Sec	tion B. Total Support	WAS PROPERTY.	公司中央公司的			小孩子的女孩子	0
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	·· - · · - · · · · · · · · · · ·				0		
	payments received on securities loans,						
	rents, royalties and income from similar						
b	Sources	-					0
b	section 511 taxes) from businesses				į		
	acquired after June 30, 1975						0
C	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly	1		İ			
	carned on	1					0
12	Other income. Do not include gain or		· · · · · ·	· ·			
	loss from the sale of capital assets						_
13	(Explain in Part IV.)	0	0				0
13	and 12.)	o	o	o	o	o	0
14	First five years. If the Form 990 is for the org	anization's first	, second, third	, fourth, or fifth		section 501(c)(
	organization, check this box and stop here .		· · · · · ·				▶ [
Sect	ion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, co			olumn (f)) . .		15	0.00%
16	Public support percentage from 2008 Schedu			· · · · · · · · · · · · · · · · · · · 		16	0.00%
17	tion D. Computation of Investment Inco			42 (, T	47	
18	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)						
19a	33 1/3% support tests-2009. If the organization						0.00% d line 17 is
	not more than 33 1/3%, check this box and st	op here. The o	rganization qu	alifies as a pu	blicly supported	dorganization	
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						പ അഭ
	line 18 is not more than 33 1/3%, check this box an	d stop here. The	organization qu	alifies as a publi	icly supported or	ganization	
20	Private foundation. If the organization did no	t check a box o	n line 14, 19a,	or 19b, check	this box and s	ee instructions	▶ 🔲

schedule A (Form 990 or 990-EZ) 2009	THE PEGASUS SOCIETY	61-1416419	Page 4
	nformation. Complete this part to provide the explanations required	by Part II, line 10	:
Part II, line 17a o	or 17b; and Part III, line 12. Provide any other additional information	See instructions.	•
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THE PEGASUS SOCIETY
7635 CORNELIOUS LANE
SHREVEPORT LA 71106



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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Bernaclette Bord

Signature of officer of trustee

Clauman

Title