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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

Open to Public Inspection

Under 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 Department of the Treasury Internal Revenue Service

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. AUG 31, 2010 For the 2009 calendar year, or tax year beginning SEP 1, 2009 and ending Check if applicable D Employer identification number C Name of organization Please Address use IRS ND ASSOCIATION OF FAMILY, CAREER AND label or Name change 23-7571723 COMMUNITY LEADERS OF AMERICA orint or type]initial retum Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-PO BOX 6022 (701)328 - 3186Instruc-City or town, state or country, and ZIP + 4 Amended F Group Exemption BISMARCK, ND Application pending 58506 Number > G Accounting method X Cash Accrual • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) Website: ► N/A H Check > X if the organization is not Tax-exempt status (check only one) - X 501(c) (3) \blacktriangleleft (insert no) \square 4947(a)(1) or 527 required to attach Schedule B (Form 990, 990-EZ, or 990-PF) Check Light 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 50,059. 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 | Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Contributions, gifts, grants, and similar amounts received 46,392. 2 2 Program service revenue including government fees and contracts 3,543. 3 3 Membership dues and assessments $\overline{119}$. 4 4 Investment income 5a Gross amount from sale of assets other than inventory 5a b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here of contributions a Gross revenue (not including \$ reported on line 1) 6a 6b b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 60 7a Gross sales of inventory, less returns and allowances 7a b Less cost of goods sold 7b 7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) Other revenue (describe 8 50,059 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 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 Expenses 13 13 Professional fees and other payments to independent contractors 14 14 Occupancy, rent, utilities, and maintenance 15 15 Printing, publications, postage, and shipping SEE STATEMENT 1 55,433. 16 Other expenses (describe 16 55,433. 17 Total expenses. Add lines 10 through 16 17 < 5, 374. >Excess or (deficit) for the year Subtract line 17 from line 9) 18 18 Net Assets Net assets or fund balances at peginhling of Babitrah line 27 19 (A)) muujigg 56,874. (must agree with end-of-yeartigure reported on prior year's return) 19 3,630.SEE STATEMENT 2 Other changes in net assets or fund balances (attach explanation) 20 Net assets or fund balances at end of year Company lines 18 through 20 55,130. 21 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) (B) End of year (A) Beginning of year 56,874. 55,130. Cash, savings, and investments 23 23 Land and buildings 24 Other assets (describe 24 56,874. 25 25 55,130. Total assets О. 0. 26 Total liabilities (describe 26 56,874. 27 55,130. 27 Net assets or fund balances (line 27 of column (B) must agree with line 21)

Form **990-EZ** (2009)

ND ASSOCIATION OF FAMILY, CAREER AND

Forr	m 990-EZ (2009) COMMUNITY LEADERS OF AMER	ICA		23-	75/1/	23 Page 2
	art 期 Statement of Program Service Accomplishmen		Part III)		Fx	penses
	at is the organization's primary exempt purpose? SEE STATEMENT				•	section 501(c)(3)
						organizations and
	scribe what was achieved in carrying out the organization's exempt purp			be	i .	(a)(1) trusts, optional
	services provided, the number of persons benefited, and other relevant				for others)	
28	STATEWIDE STUDENT ORGANIZATION IN N	ORTH DAKOTA H	IGH SCHOO	LS	1 1	
	PROMOTING FAMILY CONSUMER SCIENCES	EDUCATION THRO	DUGH]]	
	NATIONAL, REGIONAL AND STATEWIDE CO	NVENTIONS AND	MEETINGS	•		
	(Grants \$) If this amount includes foreign g		•		28a	55,368.
20	Grants 5 / It this amount includes foreign g	iants, check here			-	
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	(Grants \$) If this amount includes foreign g	rants, check here	<u> </u>	<u>لـــا</u>	29a	
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31	Other program services (attach schedule)			_	1 1	
	(Grants \$) If this amount includes foreign g	rants, check here			31a	
32	Total program service expenses (add lines 28a through 31a)			>	32	55,368.
	art IV List of Officers, Directors, Trustees, and Key E	mployees. List each one ev	en if not compensated	(See the	instructions f	or Part IV)
	THIS THE STATE OF				ontributions	
		(b) Title and average hours	(c) Compensation	, ,	employee	(e) Expense
	(a) Name and address	per week devoted to	(If not paid, enter	bene	fit plans &	account and
		position	-0)		eferred	other allowances
				com	pensation	
		DIRECTOR				
W]	ILLISTON, ND 58801	2.00	0.		0.	0.
R.A	ACHEL NYHUS	DIRECTOR				
	353 ELM AVENUE, HARVEY, ND 58341	2.00	0.		0.	0.
		DIRECTOR				
		-	0.	ł	0.	1
	OUTH, NEW ROCKFORD, ND 58356	2.00	0.	<u> </u>	<u> </u>	0.
	ELSEY HOGE	DIRECTOR	_	ł	_	_
	105 HWY 32, ANETA, ND 58212	2.00	0.		0.	0.
H	ANNAH RODNE	DIRECTOR		l		<u>.</u>
P	D BOX 438, MEDORA, ND 58645	2.00	0.	1	0.	0.
		DIRECTOR				
_	NTHONY, ND 58566	2.00	0.	1	0.	0.
		PRESIDENT		-		ļ
	ONNI LAGODINSKI, 508 2ND AVENUE				•	1
	EST, EDGELEY, ND 58433	2.00	0.	ļ	0.	0.
_	RANT GULLICKS	VICE PRESIDEN	\mathbf{r}			
P	O BOX 97, FINLEY, ND 58230	2.00	0.		0.	0.
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Form **990-EZ** (2009)

Form 990-EZ (2009)

Part V. Other

ND ASSOCIATION			-		AND
COMMUNITY LEADE	RS	OF	AMER]	<u>CA</u>	
Information (Note the stater	ment	require	ments in t	he instruction	s for Part V.)

13 Did the organization sengage in any activity not previously reported to the IRS? If Yes," attach a detailed description of each activity 44 Were any changes made to the organizing or governing documents? If Yes," attach a detailed description of each activity 45 If the organization had income from busness activities, such as those reported on lines 2, 6a, and 7a (among others), but not 18 reported on Form 990-1, attach a statement explaining why the organization did not report the income on Form 990-1 28 Did the organization have unrelated business gross income of \$1,000 or more or was if subject to section 6033(a) notices, reporting, and proxy tax requirements? 29 If Yes,* has if filled a tax return on Form 990-1 for this year? 29 If Yes,* has a filled a tax return on Form 990-1 for this year? 20 If Yes,* has a filled a tax return on Form 990-1 for this year? 20 If the organization undergo a bugutation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* 20 If Yes,* has if filled a tax return on Form 990-1 for this year? 21 Did the organization of properties of the second of \$1,000 or more or was if subject to section 6033(a) notices, reporting, and proxy tax requirements? 22 Did the organization of the organization of the organization of return of the second of \$1,000 or more or was if subject to section 6033(a) notices, reporting, and proxy tax requirements? 23 If Yes,* has if filed a tax return of Form 990-1 for this year? 24 If Yes,* complete application of notices, and subject to section 6033(a) notices, reporting, and proxy tax requirements. 25 If Yes,* complete schedule L. Part II and enter the total amount involved 26 Section 501(c)(3) granatizations Enter amount of tax improad on organizations and this activation of the organization of the organization with a disqualified person in a prior year and that the transaction has not been reported on any of the organization schedul through the organization with a disqualified person in a prior year.				Yes	No
44 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes 15 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 990-7, attach a statement explaining why the organization of not report the income on Form 990-7 10 bit the organization had income from 990-7 attach a statement explaining why the organization of not report the income on Form 990-7 10 bit the organization on Form 990-7 for the year? 15 bit Yes, Thas it filled a tax return on Form 990-7 for the year? 16 bit organization undergo a lequidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch N 17 Enter amount of political expenditures, direct or indirect, as described in the instructions 18 bit was a many learn and still outstanding at the end of the period covered by this return? 18 bit "Yes," complete Schedule L. Part II and enter the total amount involved 18 Section 501(c)(7) organizations Enter all individual on the standard on line 9, for public use of cliub facilities 18 Section 501(c)(8) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year under sections 4912. Section 501(c)(8) and 501(c)(4) organizations. Enter amount of tax miposed on the organization managers or disqualished persons during the year under sections 4912. All standards are prepared on any or the organization in a prove year, and that the transaction has not been reported on any or the organizations and provided on the proper sections 4912. All standards are provided and the proper sections 4912. All standards are provided and that the transaction has not been reported on any or the organization in a provided organization. All that the transaction has not been reported on any or the organization in the 40p creating the provided organization. All the proper sections 4912 is a sec	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes." attach a detailed description of each activity			X
15 If the organization had morme from business soldwiss, such as those reported on lines 2, 63, and 72 (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the moreme on Form 990-T and Droxy tix requirements? 18 Old the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tix requirements? 18 Old the organization unrelated business gross income of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tix requirements? 19 Old the organization or fide of the system of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tix requirements? 19 Old the organization or fide of the proximation of the fide at the viction of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tix requirements? 19 Old the organization or fide of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tix requirements? 19 Old the organization or fide organization, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a proxy year and still outstanding at the end of the period covered by this return? 10 Old the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a proxy year and still outstanding at the end of the period covered by this return? 10 Old the organization stop to the still and enter the total amount involved a line of the still and the trust of the still and the still and the trust of the still and the trust of the still and the trust of the still and the still and the still and the still			34		X
reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T 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 fax requirements? b If "Yes," has if flied a fax return on Form 990-T for this year? b If the second proxy as the second of the proxy of the second proxy of the sec					
and proxy tax requirements? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T for this year? bit fYes, This stifled a tax return on Form 990-T form 990-EZ in leve of feet the total amount meaning in a prior year and stifl outstanding at the end of the period covered by this return? bit fYes, Complete Schedule L, Part II and enter the total amount meaning the year under section 501(c)(3) organizations. Enter amount of tax imposed on the organization 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 organizations benefit amount of tax imposed on organization managers or disqualified persons during the year under sections, 4912, 4955, and 4958 celton 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 celton 501(c)(3) and 501(c)(4) organizations selfer amount of tax imposed on organization managers or disqualified persons during the year under sections, 4912, 4955, and 4958 celton 501(c)(3) and 501(c)(4) organizations in filed leads to the organization managers or disqualified persons during the year under sections, 4912, 4955, and 4958 celton 501(c)(3) and 501(c)(4) organizations filed person to the advanced by					l
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complete applicable parts of Sch N 773 Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a					
The amount of political expenditures, direct or indirect, as described in the instructions Did the organization life Form 1120-PCL for this year?	30		36		Х
b) Did the organization file Form 1120-POL for this year? 37b) Did the organization of the Form 1120-POL for this year? 38a) Did the organization between form, 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? b) H 1*Yes, complete Schedule L, Part II and enter the total amount involved 38b N/A 39c Section 501(c)(7) organizations. Enter 38c Initiation fees and capital contributions included on line 9 39a N/A 39b N/A 39b N/A 39c Section 501(c)(3) and 501(c)(4) organizations. Did the organization 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 organizations plor of year. 3nd 49s 8	A = -	· · · · · · · · · · · · · · · · · · ·			
38a bid 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? b if Yes, complete Schedule L, Part II and enter the total amount involved 38b Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club toxities 39a N/A 39b N/A 39a N/A 39b N/A 39b N/A 39a N/A 39b N/A 39b Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year or is it aware that it engaged in an excess benefit transaction within 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 40b 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 495, and 4958 40c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year or its escetions 4912 495, and 4958 40 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 495, and 4958 40 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 495, and 4958 40 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 495, and 4958 41 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization appears to a particular transaction which are organization appears to a particular transaction which are organization appears to a particular transaction which are or		Effet amount of political expenditures, direct of indirect, as described in the methodisciple	37b	į .	Х
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Section 501(c)(?) organizations Enter initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 399 N/A 390 N/A 400 Located at the transaction with a disqualified person in a prior year, and that the transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person and that the transaction during the year or is the aware that it engaged in an excess benefit transaction with a disqualified person and that the transaction during the year or is it aware that it engaged in an excess benefit transaction and that the transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person and that the transaction during the exception of forms 886-T 400 Located at both and the district of the organization apportant of tax in the disqualified person during the exception and filter transaction with a foreign country bover a financial account in a foreign country (such as a bank account, securities account, or other financial accounts. 420 Located at both 30 9 MANDAN STREET, BISMARCK, ND 580 Located at both 30 MANDAN STREET, BISMARCK, ND 580 Located at both 30 MANDAN STREET, BISMARCK, RD 580 Located at both 30 MANDAN STREET, BISMARCK, RD 580 Located at a support of the district of the district of the district of		1 1 37/3	300		
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ND ASSOCIATION OF FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA

Form 990-EZ (2009)

23-7571723

Part VI	Section 501(c)(3) organizations and section organizations and section 4947(a)(1) nonexempt charitate and 51.					
46 Did the	e organization engage in direct or indirect political campaign activiti	es on behalf of or in opposition to c	candidates for pub	lic	Ye	s No
office?	If "Yes," complete Schedule C, Part I					
47 Did the	7 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II					
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E						
	e organization make any transfers to an exempt non-charitable relat			ĺ	49a	X
b If "Yes	, was the related organization a section 527 organization?	-			49b	
	lete this table for the organization's five highest compensated empli 3100,000 of compensation from the organization. If there is none, ei		s, trustees and key	employees) who e	ach receive	d more
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hours per week devoted to position	(c) Compensatio	(d) Contribution to employee benefit plans & deferred compensation	(e) Ex accou other all	pense nt and owances
51 Comp	number of other employees paid over \$100,000 blete this table for the organization's five highest compensated indefization. If there is none, enter "None" NONE (a) Name and address of each independent contractor paid m		(b) Type of		ation from	
						
d Total	number of other independent contractors each receiving over \$100	0,000	<u> </u>			
Sign Here	Under penalties of perjury, I declare that I have examined this return, includic correct, and complete Declaration of preparer (other than officer) is based of Signature of officer	ing accompanying schedules and statemen all information of which preparer has an	ents, and to the best o y knowledge	f my knowledge and b	i	
	STATE ADVISOR Type or print name and title					
Paid Preparer's Use Only	parer's Patrick Marin 11/16/10 employed >					ınstr)
555 Gilly	Rimi's name (or yours If sulf-employed). ■ PO BOX 1297 BRADY, MARAZZ & ASSOCIATES, P.C. Phone ►			22.15		
		2-1297		701-2	77.1	
May the IR	S discuss this return with the preparer shown above? See instructi	ons			X Yes Form 990-	FZ (2009

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.

2009

Open to Public Inspection

Employer identification number ND ASSOCIATION OF FAMILY, CAREER AND Name of the organization 23-7571723 COMMUNITY LEADERS OF AMERICA 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.) 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 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 Type III - Other c Type III - Functionally integrated **b** Type II 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). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No 11g(i) the governing body of the supported organization? 11g(ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (iii) Type of (vi) Is the (v) Did you notify the (iv) is the organization (vii) Amount of (i) Name of supported (ii) EIN organization in col organization organization in col in col (ı) lısted ın your support (i) organized in the US? organization (described on lines 1-9 (i) of your support? governing document? above or IRC section (see instructions)) No Yes Yes Yes Nο

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Support Schedule for (Complete only if you checked ion A. Public Support adar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to				b)(1)(A)(iv) and	3 170(b)(1)(A)(v 	1)
ion A. Public Support Idar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organ-			(1) 2007			
idar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not not not de any "unusual grants.") Fax revenues levied for the organ-	(a) 2005	(b) 2006	(-) 0007			
Gifts, grants, contributions, and membership fees received. (Do not nolude any "unusual grants.") Fax revenues levied for the organ-	(a) 2005	(b) 2006			4 3 0000	(0 T. 1 - 1
membership fees received. (Do not nclude any "unusual grants.") Fax revenues levied for the organ-	:		(c) 2007	(d) 2008	(e) 2009	(f) Total
nclude any "unusual grants.") Fax revenues levied for the organ						
Tax revenues levied for the organ-						
-				-		
zation's benefit and either paid to						
an ann an daoil an da babalf	:					
or expended on its behalf						
The value of services or facilities		•				
rurnished by a governmental unit to		ļ				
the organization without charge						
Total. Add lines 1 through 3			~177A1			
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)						
Public support. Subtract line 5 from line 4				1	<u> </u>	<u> </u>
tion B. Total Support	(a) 2005	(h) 2006	(a) 2007	(d) 2008	(e) 2009	(f) Total
ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(u) 2008	(e) 2009	(i) rotal
Amounts from line 4				-		
Gross Income from Interest,						ļ
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
and income from similar sources Net income from unrelated business		<u></u>				
activities, 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.)						Į
Total support. Add lines 7 through 10					<u> </u>	
Gross receipts from related activities	etc. /see instruct	ione)	F	<u>.1</u>	12	1
First five years. If the Form 990 is for	•		rd fourth or fifth t	ay year as a secti	L	
organization, check this box and sto		3 11131, 3000110, 1111	a, lourth, or man	ax year as a seem	Sit 00 1(0)(0)	▶ □
tion C. Computation of Pub		ercentage				
Public support percentage for 2009	···		column (f))	****	14	
Public support percentage for 2009 Public support percentage from 200		-	00.0 (///		15	
33 1/3% support test - 2009. If the			n line 13, and line	14 is 33 1/3% or r	· · · · · · · · · · · · · · · · · · ·	ox and
stop here. The organization qualifies					,	▶ [

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

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

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

23-7571723 Page 3

Section A. Public Support (a) 2005 (c) 2007 (d) 2008(e) 2009 (f) Total Calendar year (or fiscal year beginning in) (b) 2006 1 Gifts, grants, contributions, and membership fees received. (Do not 3,728. 4.001. 3,808. 3,942. 3,543. 19,022. 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 274,302. 55,345 65,623 55,256. 51,681. 46,397. 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 49,940. 293,324. 59,064. 55,623. 59,073. 69,624. 6 Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 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 0. amount on line 13 for the year 0. c Add lines 7a and 7b 293,324. 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2008 (e) 2009 (f) Total (a) 2005 **(b)** 2006 (c) 2007 293,324. 69,624. 59,064 55,623. 49,940. 59,073. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 301 120 1,579 1,993 1,378. 5,371. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 1,378. 301. 120 5,371. 1,579. 1,993. 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 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 71,617. 60,442. 55,924. 50,060. 298,695. 60,652. 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 Section C. Computation of Public Support Percentage 98.20 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f) 15 % 98.10 16 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 1.8017 % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 1.90 18 18 Investment income percentage from 2008 Schedule A, Part III, line 17 % 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 $\triangleright X$ more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 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 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2009

FORM 990-ÈZ OTHER EXPENSES		STATEMENT 1
DESCRIPTION		AMOUNT
MEETINGS SUPPLIES & MATERIALS MISCELLANEOUS CONVENTIONS PEER LEADERS TRAVEL SUMMER LEADERSHIP UNIFORMS		3,517. 299. 65. 43,673. 1,337. 216. 5,418. 908.
TOTAL TO FORM 990-EZ, L	INE 16	55,433.
FORM 990-EZ OTHER CHA	ANGES IN NET ASSETS OR FUND BALANCES	STATEMENT 2
DESCRIPTION		AMOUNT
CORRECTION TO BEGINNING	CASH BALANCE	3,630.
TOTAL TO FORM 990-EZ, L	INE 20	3,630.

FO	FORM 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		STATEMENT				
A)	DIRECTLY OF	GANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, RESEARCH INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL NTRACT?	[]	YES	[X]	NO
В)		GANIZATION, DURING THE YEAR, PAY PREMIUMS, R INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	[]	YES	[X]	NO

990-EZ PG 2

STATEMENT

4

ORGANIZATION ASSISTS HIGH SCHOOLS IN THE STATE OF NORTH DAKOTA IN EDUCATION OF STUDENTS IN FAMILY & CONSUMER SCIENCES.