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## **Short Form 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)

▶ 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.

OMB No. 1545-1150

2009

Open to Public Inspection

		he Treasury		assets less that	n \$1,250,000 at the end of the eto use a copy of this return t	year may use the	nis form	irements			Inspect	ion	
_	or the		ar vear.	or tax year beginning	December 1		and endin		vembe	r 30	, 20	0 10	
_	heck of ap	1	Please C Name of organization					<u> </u>	D Employer identification number				
$\overline{}$	Address ch	-	use IRS	use IRS Mississiani Pagnut Growers Association					300381243				
□ '	Name cha	nge	label or print or		ox, if mail is not delivered to s	street address)	Room/suit	e E Tek	E Telephone number				
=	nıtıal retur Ferminater		type. See	Box 284			1		6	01-60	06-3547		
=	Amended		Specific Instruc-	City or town, state or country	, and ZIP + 4		l	F Gr	oup Exe	mot	ion		
=		n pending	tions.	Petal, MS 39465-0284					ımber	•			
	• Sect	ion 501(c)(3)	organiz	zations and 4947(a)(1) nor	exempt charitable trust:	s must attach	G A	counting	Method	<b>7</b>	Cash 🗌	Accrual	
		1717		npleted Schedule A (Forn			•	ther (speci			_		
										orqa	nızatıon ıs r	not	
ı V	Vebsite	e: ► http:/	//peanu	t.msstate.edu			1			•	dule B (Forn		
JΤ	ax-exe	mpt status (	check o	nly one) — 🔲 501(c) ( <b>5</b>	(insert no.)	a)(1) or 52	_ ı	90-EZ, or 9			•	•	
K	Check >	▶	e organı	zation is not a section 509(a	a)(3) supporting organization	n and its gros	s receipts	are normali	y <b>not</b> m	ore 1	than \$25,00	0. A	
F	orm 99	0-EZ or Fom	n 990 re	turn is not required, but if t	the organization chooses t	to file a retum,	be sure to	file a com	- plete re	turn	i.		
L A	dd lines	5b, 6b, and 7	b, to line	9 to determine gross receip	ts; if \$500,000 or more, file	Form 990 inste	ad of Form	990-EZ	<b>&gt;</b> 3	,		50,875	
Pa	art I	Revenu	e, Exp	enses, and Changes	in Net Assets or Fu	und Balanc	es (See	the instr	uction	s fo	or Part I.)		
	1	Contribution	ons, gif	ts, grants, and similar ar	nounts received				1	L.,		15,425	
	2	Program s	ervice i	revenue including goveri	nment fees and contract	ts			2			31,700	
	3	Membersh	ip dues	and assessments					3	L.,		3,750	
	4	Investmen	t incom	ne					4	L		0	
	5a	Gross amo	ount fro	m sale of assets other the	han inventory	<b>5</b> a							
	b	Less: cost	or othe	er basis and sales expen	ises	<u>5b</u>	<u> </u>						
•	С	•	•	n sale of assets other the	• •		•		5c			na	
Revenue	6	Special event	s and ac	tivities (complete applicable pa	rts of Schedule G). If any amo	ount is from gam	ing, check i	here 🕨 🔲					
Ş	a	Gross reve	enue (ne	ot including \$									
æ		reported o	n line 1	)		. <u>6a</u>							
	b	Less: direc	t expe	nses other than fundrais	ing expenses	. <u>6b</u>				Ì			
	С	Net incom	e or (lo	ss) from special events:	and activities (Subtract	line 6b from	line 6a) .		6c			na	
	7a			ventory, liess returns and	<u>/allowances</u>	<mark>7a</mark>							
	b	Less: cost	of gda	ds sold		<u>  7b</u>	<u> </u>		_	1			
	С	Gross prof	it or (lo	ss) from sales of invento	ory (Subtract line 7b from	m line 7a) .			7c	<u> </u>		na	
	8	Other reve	nue (p	scribe -	1821			)	8	ļ		0	
	9	Total reve	nue. A	dd-lines_1_2_3 <sub>1</sub> -4,-5c,-6c	- 7c; and 8	<u></u>	<u></u>	<u> ▶</u>	9	ļ		50,875	
	10			r and unis pand (attach s	chedule)				10	<u> </u>		0	
	11	•							11	├_		17,054	
nses	12	•		mpensation, and emplo	•				12	-		5,250	
ë	13			and other payments to	•				13	┢	<del> </del>	10,500	
Expe	14	-		utilities, and maintenan					14	<del>                                     </del>		6,235	
ш	15		g, publications, postage, and shipping						15	├—		1,959	
	16								16	├		12,111	
	17			Add lines 10 through 16					17	├		53,111	
əts	18 19			) for the year (Subtract II					18	╁		(2,236)	
SS	פו			und balances at beginning of year (from line 27, column (A)) (must agree wi ire reported on prior year's return)					1	·		20.740	
Net Assets		=	-		· · · · · · · · · · · · · · · · · · ·				19	╁		29,719	
ž	20		_	net assets or fund balar	•	•		_	20	-			
Ð	21 art II			d balances at end of yea			more file		21 Dunste	ad o	of Form 00	27,483 0-F7	
	er c III	L Dalaito	5 51166	(See the instructions		,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Beginning			(B) End of		
20	22 Cash, savings, and investments						29,719	22		27,483			
23									23		27,463		
24		her assets (	_	<b>L</b>			∵,			24			
25							-′ ├-		29,719			27,483	
26			. /				∵, ⊢			26	<del></del>	0	
27	, io	et assets o	fund i	cribe ► calances (line 27 of colu	mn (R) must agree with	h line 21)	<b>-</b> ′		29 719	-	<del></del>	27 483	

ronn s	390-EZ (2009)					Page ∠		
Par	Statement of Program Service Accom	plishments (See the instr	uctions for Part III	.)		Expenses		
What	is the organization's primary exempt purpose?	Enhancing production, promotion, & utilization of peanuts				(Required for section		
	ribe what was achieved in carrying out the org					501(c)(3) and 501(c)(4)		
	ner, describe the services provided, the number of				organizations and section			
	program title.	,			for ot	a)(1) trusts, optional hers )		
	State-wide production short-course involving 100 gr	owen to reache the letest re		na Infa				
28								
	from University and Industry peanut specialist acros		<del></del>	e National				
	Peanut Board(NPB) was presented showing utilization							
		includes foreign grants, che			28a			
29	Two Field Days: North and South In state with 85 gro							
	cultural practices and showed the side-by-side comp			ed the				
	value of the information gained at \$20/ acre for a esti	mate of \$200,000 on the acre	s of the attendees.					
	(Grants \$ ) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	29a			
30	Co-promotions with the NPB on the slogan: Peanuts	, energy for the good life, inv	olved 150-30 secon	d spots				
	on State Univ. Sports Network. Plus the beginning of	a continuing Walk for Diabe	tes annually reachi	ng about				
	4000 walkers and public on value of peanuts and pea							
		ıncludes foreign grants, chi			30a			
31	Other program services (attach schedule)		eck liele		Jour			
٠.	(Grants \$ ) If this amount				31a			
32	Total program service expenses (add lines 28a t							
Par					32 instance	tions for Dort IV		
гаг	List of Officers, Directors, Trustees, and Rey	(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense		
	(a) Name and address	hours per week	(If not paid,	employee benefit	plans &	account and		
		devoted to position	enter -0)	deferred comper	nsation	other allowances		
	H. Morgan	President						
	B. Horne Rd. Hattlesburg, MS 39401		0					
Van	Hensarling	Vice-President						
159 I	Prospect Rd. Richton, MS 39476		0					
Bria	n Atkins	Dimeter						
4004	5 New Prospect Rd. Hamilton, MS 39746	Director	0					
Stev	e Seward							
1133	1 Tanner Williams Rd. Lucedale,MS 39452	Director	o					
Don								
	5 Self Rd. Hamilton, MS 39746	Director	o					
	Miller							
	239 Anguilla, MS 38721	Director	0					
			•					
	nie Fortner	Director						
502	Drake Hill Drive Port Gibson, MS 39150		0					
		Ì						
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			<del> </del>	<u> </u>				
		l	l					

Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.  30	Form 99	0-EZ (2009)		F	age 3
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.  34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes  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.  36 Did the organization had income from business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?  35 If "Yes," this if filed a tax return on Form 990-T for this year?  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  37 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 137a no no 150 to the organization file Form 1120-POL for this year?  38 Did the organization file Form 1120-POL for this year?  39 Did the organization file Form 1120-POL for this year?  30 Did the organization file Form 1120-POL for this year?  31 Did the organization file Form 1120-POL for this year?  32 Did the organization file Form 1120-POL for this year?  33 Did the organization file Form 1120-POL for this year?  34 Did the organization file Form 1120-POL for this year?  35 Did the organization file Form 1120-POL for this year?  36 Did the organization file Form 1120-POL for this year?  37 Did the organization file Form 1120-POL for this year?  38 Did the organization file Form 1120-POL for this year?  39 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 501(c)(3) organizations. Enter amount of tax imposed on organization file form 1120-POL for this organization file organization file organization file form 1120-POL forms 990 or 990-E2? If	Part	Other Information (Note the statement requirements in the instructions for Part V.)			
description of each activity  Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes  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 to 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?  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?  By the organization file of the provided income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?  By the organization the form 1120-POLL for this year?  Chief are anount of political expenditures, direct or indirect, as described in the instructions. ■ 37a   37a   37a   37a   37a   37b   37a   37b   37a   37b   37a   37a   37b   37				Yes	No
Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on any officer, solid section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on any of the organization should organization should organization should organization should organization organizations. Enter amount of tax imposed on any of the organization officer. Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified person in a prior year, and that the transaction has not been reported on any of the organization in social L, Part I. List the states with which a copy of this return is filed. ▶  42 All organization brokes are disqualified persons during the year or is it awayer. At any time during the calendar year, did the organization in social account; > Located at > 24 thouse Check organizations. Port of the organization organizations. At any time during the calendar year, did the organization in a filing form 1041—Check here and enter the amount of tax expension manufaction manufaction manufaction manufaction organizations. Enter amount of tax imposed on organization should be organization. Social positions of the organization organization organizations. Enter amount of tax imposed on organization should be organization. Social positions organization organization organization organization. Social positions organization organization organization organization organization. Social positions organization organization organization organization organization organization organization. Social position organization	33		33		✓
not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.  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?  10 bid five organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," no fire applicable parts of Schedule N  17a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a    35b    36    37b    37a    37a    37a    37a    37a    37a    37a    37b    37a    37b    37a    37b    37b    37a    37b    37b    37a    37b    37b    37a    37b	34		34		1
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?  b If Yes," has it filed a tax return on Form 990-T for this year?  35b 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  37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a ne	35				
b If "Yes," has it filed a tax return on Form 990-T for this year?  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  37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ □ 7a □	а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section	35a		1
during the year? If "Yes," complete applicable parts of Schedule N  The amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a	b	If "Yes," has it filed a tax return on Form 990-T for this year?			
b Did the organization file Form 1120-PDL for this year?  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?  b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 39 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9 38a 39a 39a 39a 39a 39a 39a 39a 39a 39a 39	36		36		1
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?  Bif "Yes," complete Schedule L, Part II and enter the total amount involved	37a				
any such loans made in a prior year and still outstanding at the end of the period covered by this return? . 38b			37b		✓
a Intitation fees and capital contributions included on line 9		any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
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 ▶  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 1  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  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.  Located at ▶ 24 Thomas Creek Road. Petal, Mississippi  Did the organization's books are in care of ▶ Malcolm Broome Telephone no. ▶ 601-906-3547  Located at ▶ 24 Thomas Creek Road. Petal, Mississippi  ZIP + 4 ▶ 39465-0284  The "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.  At any time during the calendar year, did the organization maintain an office outside of the U.S.?			1		
Scrion 501(c)(3) organizations. Enter amount of fax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  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 8866-T.  List the states with which a copy of this return is filed. ▶  The organization's books are in care of ▶ Malcolm Broome Telephone no. ▶ 601-606-3547. Located at ▶ 24 Thomas Creek Road. Petal, Mississippi  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: ▶  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.?					[
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4915 ▶  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	_	·	}		
b Section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶  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 have an interest or a prohibited tax shelter transaction? If "Yes," complete Form 886-T.  List the states with which a copy of this return is filed. ▶  41a The organization's books are in care of ▶ Malcolm Broome		· · · · · · · · · · · · · · · · · · ·	1		
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-E27! if "Yes," complete Schedule L, Part I			ĺ		ļ
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organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	c	·	400		<u> </u>
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		organization managers or disqualified persons during the year under sections 4912,			;
transaction? If "Yes," complete Form 8886-T	d	titi till till till till till till till			
Telephone no. ► 601-606-3547  Located at ► 24 Thomas Creek Road. Petal, Mississippi  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)?  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: ►  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  Petal Mississippi  ZIP + 4 ► 39465-0284  Yes	е		40e		1
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)?	41				
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)?  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:  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	42a				
over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  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:  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			39465	-0284	
account)?	b			W	<b>.</b>
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.?			40h	Yes	NO ✓
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.?			420	<del>                                     </del>	<b>- v</b>
If "Yes," enter the name of the foreign country: ►  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 ►  43  Yes  Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
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	С		42c		<b>√</b>
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	43			. 1	▶ □
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		titi til til til til til til til til til		<u>.</u>	
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of				Yes	No
Form 990-EZ	44				
			44		✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	45			ļ	ļ.,
"Yes," Form 990 must be completed instead of Form 990-EZ				<u> </u>	<b>√</b>

	and complete the tables for lines 50 ar					
	Did the organization engage in direct or indirect candidates for public office? If "Yes," complete		ties on behalf of or		46 Ye	s No
	Did the organization engage in lobbying activities	•			47	<del></del>
	Is the organization a school as described in section			E	48	7
	Did the organization make any transfers to an ex				49a	
	If "Yes," was the related organization a section 5				49b	
	Complete this table for the organization's five hi					
	employees) who each received more than \$100,	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Ex	
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(o) componedion	employee benefit plans & deferred compensation		nt and
	11811 \$100,000	devoted to position	<u> </u>	deletted dompensation	Other and	Warices
				,		
						<del></del>
				[		
f	Total number of other employees paid over \$100	0,000 ▶				
	Complete this table for the organization's five \$100,000 of compensation from the organization			ors who each rec	eived mo	ore than
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) Typ	oe of service	(c) Compe	nsation
				i i		
						<del></del>
d	Total number of other independent contractors of		000 >			
d		each receiving over \$100,0	inying schedules and sta			
d	Total number of other independent contractors of Under penalties of perjury, I declare that I have examin	each receiving over \$100,0	inying schedules and sta based on all information			
Sign	Total number of other independent contractors of Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete Declaration and Declaration of the Indiana Brooms of the Indiana Broo	each receiving over \$100,0	inying schedules and sta based on all information	of which preparer has  4/1/2		
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Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section