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### PEACE 04/20/2011 10 43 AM

Form

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions. DAA

## **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)

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

OMB No 1545-0047 2010 Open to Public

Form **990** (2010

	For the 2010 cale	ndar year, or tax year beginning , and ending			
_	Check if applicable	C Name of organization		D Emplo	yer identification number
	Address change	Peace Nick Corporation		i	
	Name change	Doing Business As		36-	·4648850
$\overline{\Box}$	Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite		one number
퓜		F.O. Box 1882		313	3-215-5767
$\equiv$	Terminated	City or town, state or country, and ZIP + 4			206
$\square$	Amended return	Royal Oak MI 48068	<del></del>	<b>G</b> Gross rece	ipts \$ 296
	Application pending	F Name and address of principal officer  Gregory S. Panzica	H(a) Is this a g	roup return for a	offiliates? Yes X No
		325 Oakdale	H(b) Are all a	ffiliates includ	ded? Yes No
		Royal Oak MI 48067			st (see instructions)
$\overline{}$	Tax-exempt status		1		
j		ww.peacenick.org	H(c) Group e	xemption nui	mber >
	Form of organization		Year of formation 2		M State of legal domicile MI
******		mmary			
	1 Briefly de	scribe the organization's mission or most significant activities			
•	See	Schedule O			
anc					
Ë		alah.			
Activities & Governance	2 Check th	s box $ ightharpoonup$ ıf the organizatıon discontinued its operations or disposed of more than 25%	of its net asset	s. , ,	
85	3 Number	of voting members of the governing body (Part VI, line 1a)		3	
ies	1	if independent voting members of the governing body (Part VI, line 1b)		4	
Ę	1	ber of individuals employed in calendar year 2010 (Part V, line 2a)		5	
Ą	I .	iber of volunteers (estimate if necessary)		6	
	i i	elated business revenue from Part VIII, column (C), line 12		7a	0
	1	ated business taxable income from Form 990-T, line 34	Prior Ye	7b	Current Year
_	8 Contribut	ons and grants (Part VIII, line 4h)—CEIVED		370	296
=20	9 Program	service revenue (Part VIII, line 2g)			
3	_	nt income (Part VIII, column (A), lines 3, 4, and 7d)			
1 CUII		enue (Part VIII, column(A), lines 3\60 8c 9c 10c, and 11e)			
₹	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		370	296
JUL		nd similar amounts paid (Part IX, column (A), lines 1–3)			
		paid to or for members (Part IX, column (A), line 4).	_		
	15 Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5–10)			
	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)			<del></del>
ĒŘ	b Total fun	draising expenses (Part IX, column (D), line 25) > 245		4 210	2 264
SES OF SES	17 Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24f)		4,318	3,364 3,364
あ	18 Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		4,318 3,948	3,36 <u>4</u> -3,068
7.0	g Revenue	less expenses. Subtract line 18 from line 12	Beginning of Cu		End of Year
ets	20 Total ass	ets (Part X, line 16)		67	734
Z Ass	21 Total liab	ilities (Part X, line 26)		4,015	7,750
Net Assets or	22 Net asse	s or fund balances. Subtract line 21 from line 20	_	3,948	-7,016
F	Part II Si	gnature Block			
		елигу, I declare that I have examined this return, including accompanying schedules and statements, а		y knowledge	and belief, it is
tr	rue, correct, and co	mplete Declaration of prepare (other than officer) is based on all information of which preparer has an	y knowledge		-/-/
	,	V/14 DIT			<i>[                                    </i>
Sig		Signature of officer		Date	( /
He		Gregory \$. Panzica Presi	.aent		
_		Type or of first name and title	12.	15.	
Pai	أ دس:	pe preparer's name Preparer's nignature	Date	Check	
	narer 3. 180	Boloven, Tiano & Associates, P.C.			mployed P00178015
	e Only	44315 Plymouth Oaks Boulevard		Fırm's EİN ▶	
	- 1	ddress > Plymouth, MI 48170		Dhana	734-453-9985
Ma		s this return with the preparer shown above? (see instructions)		Phone no	734-433-9983 Vas No:

orm 990 (2010)	Peace Nick Corpor	ration 36-	4648850	Page 2
	Statement of Program Services			<b></b>
	when the organization's mission	is a response to any question in this F	'art III	X
	edule O			
		program services during the year which were not l	isted on the	
	990 or 990-EZ?			Yes X No
	scribe these new services on Sched anization cease conducting, or make	uie O e significant changes in how it conducts, any prog	ram	
services?	and a market of the second of	o organical to carrie of the contraction, any prog	, satti	Yes X No
	scribe these changes on Schedule (			
		each of the organization's three largest program		
	nd 501(c)(4) organizations and secti total expenses, and revenue, if any,	on 4947(a)(1) trusts are required to report the am for each program service reported	ount of grants and allocations to	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
4a (Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
		•		
			•	
4b (Code.	) (Expenses \$	including grants of \$	) (Revenue \$	<del></del>
•	,,,,		, (	,
			•	
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
		•	•	
			•	
			•	••
4d Other progr	ram services. (Describe in Schedule	0)		
(Expenses	\$inc		(Revenue \$	)
4e Total progr	ram service expenses >	<del></del>		

## Part IV Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	_2_		X
3	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	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III .	_5_		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-			
	endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			<b>.</b>
	complete Schedule D, Part VI	11a		X
b				₩.
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			x
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		^
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.4		x
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		x
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	<del>                                     </del>	
124		400		x
<b>.</b>	Schedule D, Parts XI, XII, and XIII  Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a	-	
U	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	425		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	144	$\vdash$	-
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140		-
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	"		1
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<del>     </del>		1
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<del>- ''-</del>	<del>                                     </del>	+**
.,	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	<del>  ''°</del>	<del>                                     </del>	<b>├</b> ^
	If "Yes," complete Schedule G, Part III	40		x
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19	-	X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some	20a		1
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)			1
	- Sim see mere that operate one of more nospitals must attach addition statements (see instructions)	20b		

Form	1990 (2010) Peace Nick Corporation 36-4648850				P	age 4
<u> P</u>	art IV Checklist of Required Schedules (continued)	-		<del>1</del> —	T	T
24	And the experience country were then \$5,000 of events and other assistance to governments and examinations				Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			<del></del>		
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the					
	organization's current and former officers, directors, trustees, key employees, and highest compensated					
	employees? If "Yes," complete Schedule J			23		X
24a						
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b					
	through 24d and complete Schedule K. If "No," go to line 25			24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year				}	
	to defease any tax-exempt bonds?			24c	ļ	ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction					
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a	1	X
b	Is the organization 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?				1	
	If "Yes," complete Schedule L, Part I			25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or					
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26	}	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,					
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?					x
00	If "Yes," complete Schedule L, Part III			27	+	1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					•
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			28a		x
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			204	1	1
b	Schedule L, Part IV			28b		x
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			200		
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					
	conservation contributions? If "Yes," complete Schedule M			30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					
	Part I			31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"				1	
	complete Schedule N, Part II			32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations					
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			33	4	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,					
	IV, and V, line 1			34	<u> </u>	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		X
а	Did the organization receive any payment from or engage in any transaction with a			1		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,					
	Part V, line 2	Yes	X N	□		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable					
	related organization? If "Yes," complete Schedule R, Part V, line 2			36	╁	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,					
20	Part VI			37	+	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			1	1	1

19? Note. All Form 990 filers are required to complete Schedule O

1.10	Check if Schedule O contains a response to any question in this Part V				$\Box$
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a		I	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			Ī	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			Ī	
	reportable gaming (gambling) winnings to prize winners?		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			I	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	1 1	ŧ	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>?</b>	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ŧ	77
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a_		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auti			i	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial	ا ۔ ا		X
	account)?		4a	-	
D	If "Yes," enter the name of the foreign country				:
F-	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Ac	counts.		ŧ	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	n2	5a 5b		$\frac{\mathbf{x}}{\mathbf{x}}$
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactio If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	1118	5c		
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		130		
oa.	organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or	Ju		
~	gifts were not tax deductible?	<b>.</b>	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ods			
	and services provided to the payor?		7a		ı
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit conf	ract?	7e		<u></u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	n file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				ĺ
	organization, have excess business holdings at any time during the year?		8	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.				Ė
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	ļ	
10	Section 501(c)(7) organizations. Enter	11			É
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter:	144			
a	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources	441			
40-	against amounts due or received from them )	11b	┨	1	ŀ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	1 1 .	12a		_
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	12b	-{		
a	Is the organization licensed to issue qualified health plans in more than one state?		425		
a			13a		-
b	Note. See the instructions for additional information the organization must report on Schedule O.				
U	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	425			İ
С	Enter the amount of reserves on hand	13b	-		l
14a	Did the organization receive any payments for indoor tanning services during the tax year?	13c	44.	-	v
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule C	•	14a	├	X
	100, modition at offit 120 to report these payments? It into, provide an explanation in Schedule C	<u> </u>	14b	l	<u></u>

Form 990 (2010) Peace Nick Corporation

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a

7 -	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in	Sche	edule	1
	O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1 1		
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		ı	:
	any other officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>
6	Does the organization have members or stockholders?	6_		_X_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			i
	of the governing body?	7a		X
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	X	L
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code.	)	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such			
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		ĺ
11a	· · · · · · · · · · · · · · · · · · ·			
	form?	11a		x
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		x
b				
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
b	The state of the s	15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	'	x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	100		<del></del>
-	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	1	İ
Sec	tion C. Disclosure	1 100	<u> </u>	
<u> </u>	List the states with which a copy of this Form 990 is required to be filed MI			
 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
- •	for public inspection. Indicate how you make these available. Check all that apply.			
	Own website			
19				
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
20	and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Gregory S. Panzica 325 Oakdale Street			

Royal Oak

MI 48067

DAA

Form 990 (2010)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

(A)	(B)	]		((				ensated any current officer, (D)	(E)	(F)
Name and Title	Average hours per			chec	k all t	hat ap	ply)	Reportable compensation	Reportable compensation from	(r) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Gregory S. Panzi										
Executive Director	10.00	X		┢	┡	$\vdash$		0	0	
(2) Xavier Moore	1 00					l i				
Director (3) Marty Hegheringt	1.00	X		_	<u> </u>	-		0	0	(
									م	
Director (4)	1.00	X	_					0	0	(
(5)					<u> </u>					
	·	<u> </u>	_	_						
(6)										
(7)										
(8)										
(9)										<u></u>
10)										
11)		ļ . <u>.</u>		-						
12)						ļ				
13)				-	_	-				
14)				_	$\vdash$					
15)		-		-	-					
16)	<del></del>		_	-	$\vdash$	_				

	Y Section A. Officers (A)			,			,		d Highest Compensated E				
	Name and Title	(B) Average hours per week	<del></del>	· · ·	checl Officer	k all t	hat ap	ply) Former	(D) Reportable compensation from	(E) Reportable compensation from related	Estu amo ot	F) nated unt of her	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	mer	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
17)												_	•
18)													
19)													
20)	<del></del> -												
21)													
22)													
23)					   								
24)		,											
25)						_	ļ						
26)													
27)				 									
28)													
1b	Sub-total	ote to Best VIII. Si			<u> </u>	<u> </u>	J	<b>•</b>					
c d	Total from continuation shee Total (add lines 1b and 1c)	els to Part VII, 3	BCLIO	11 A									
2	Total number of individuals (in reportable compensation from			to th	ose	liste	d abo	ve)	who received more than \$1	00,000 in			
3	Did the organization list any fo	-		or tru	stee	. kev	/ emi	olove	ee. or highest compensated			Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line organization and related organ	complete Schedue 1a, is the sum o	ule J f rep	for s ortab	uch i	indiv omp	ndual ensa	ion :	and other compensation fro	m the	3		X
5	individual Did any person listed on line 1									dıvıdual	4	+	X
Sec	for services rendered to the or ction B. Independent Contract		:S, C	omp	iele i	SCITE	aute	J 10	r such person	<del></del>	5		X
1	Complete this table for your five compensation from the organization	re highest compe zation	nsate	ed in	depe	nde	nt co	ntrad					
	Name and	(A) d business address							Descrip	(B) otion of services		(C) Compensa	ition
					_		_			<del></del>			
		<del></del>				<u></u>		L					
								_					
			_					_					
2	Total number of independent or received more than \$100,000								listed above) who	^			
AA	. 100,000 than \$100,000	compensation	5111	aic (	Ji yal	nz.al	1011			0	<u> </u>	m 990	) (201

Pa	rt VI	It Statement of It	Revenue						<del> </del>
	•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>(2)</b> (0)	4-	Foderated compositors	T 4-	T		· · · · · · · · · · · · · · · · · · ·	10401100		
		Federated campaigns	1a		40			#	
PS		Membership dues	1b		40				
S, E		Fundraising events	1c	ļ	256			I	
<u>g'a</u>	d	Related organizations	<u>1d</u>					1	
ä,ä,	0	Government grants (contributions)	_1e			1			
흕	f	All other contributions, gifts, grants	,						
혈		and similar amounts not included a	bove 1f						
를	g	Noncash contributions included in	lines 1a-1f	\$					
ŏ ≅	h	Total. Add lines 1a-1f			▶	296			
Program Service Revenue Contributions, gifts, grants					Busn. Code				
틸	2a					1			
١٤	b								
8	c				<del>  </del>				
اچ	d								
Š	_				<del></del>				
ᆵ	0	AU (1			<b>-</b>				
ξ̈́		All other program service	e revenue		<u> </u>				
-		Total. Add lines 2a-2f			•		<u> </u>		
	3	Investment income (inclu	_	ds, interes	<sup>t,</sup> [				
		and other similar amount			•				<del></del>
	4	Income from investment	of tax-exem	pt bond pro	ceeds 🕨				
	5	Royalties		1					
		(1)	Real	(II) F	Personal				
	6a	Gross Rents							
	þ	Less rental exps							
	С	Rental inc or (loss)							
	d	Net rental income or (los	ss)		<b>•</b>				
	7a	Gross amount from (i) So	ecunties	(11)	Other		,,		
		sales of assets other than inventory		1					
1	h	Less cost or other							
- 1	_	basis & sales exps							
	_	Gain or (loss)							
		Net gain or (loss)		.1		:			
						· · · · · · · · · · · · · · · · · · ·	4, 1, 1		
91	оa	Gross income from fundraisi	ing events						
		(not including \$							
ۿ		of contributions reported on	line 1c)						
Other Rever		See Part IV, line 18	a	· <b></b>					
된		Less: direct expenses	b						
٠		Net income or (loss) from	-	events	<u> </u>				
	9a	Gross income from gaming a	activities						
		See Part IV, line 19	a						
	b	Less direct expenses	t				,		
	С	Net income or (loss) from	n gaming ac	ti <u>vıtıes</u>					
	10a	Gross sales of inventory	, less				'	,	
		returns and allowances	a	ıL.					
	b	Less cost of goods sold	i t						
	С	Net income or (loss) from	n sales of in	ventory	<b>•</b>		Ī		
		Miscellaneous F			Busn. Code				
	11a							ĺ	
	b						-		
	C					·			
	d	All other revenue							<del> </del>
		Total. Add lines 11a-11	đ						
	12				•	296	0	0	0
_					<u>-</u> -			<u> </u>	<u> </u>

#### Part IX \* **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>/D,</u> 1	8b, 9b, and 10b of Part VIII.	<del></del>	expenses	general expenses	expenses
٠	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
•	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				`
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	,			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				<del>-</del>
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	, ,				_
в	Professional fundraising services. See Part IV, line 17		### #=##====		
f	Investment management fees				
g		201		100	
12	Advertising and promotion	381		136	245
13	Office expenses	1,353 175		1,353 175	
14	Information technology	1/5		1/5	
15	Royalties				
16	Occupancy				
17 18	Travel Payments of travel or entertainment expenses	_			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<del></del>
20	Interest	1,455		1,455	
21	Payments to affiliates			1,400	
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered	, , , , , , , ,			101
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а					
b					
С					
d					
ө					
f	All other expenses				
25	Total functional expenses.Add lines 1 through 24f	3,364	0	3,119	245
26					
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column				
	(B) joint costs from a combined educational				
ΠΑΑ	campaign and fundraising solicitation	<u></u>			

			(A)		(B)
$\overline{}$			Beginning of year		End of year
1	Cash—non-interest bearing		67	1	734
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			_3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors	· •			
	employees, and highest compensated employees Co	mplete Part II of	<b>[</b>		
_	Schedule L			5	
6	Receivables from other disqualified persons (as define				
	4958(f)(1)), persons described in section 4958(c)(3)(B	·			
	employers and sponsoring organizations of section 50	* * * * *			
<u>o</u>	employees' beneficiary organizations (see instructions	)		6	<del></del>
Assets 8	Notes and loans receivable, net			7	
AS	Inventories for sale or use		8		
9	Prepaid expenses and deferred charges	r i		9	
10a	Land, buildings, and equipment cost or				
١.	other basis Complete Part VI of Schedule D	10a	<b></b>		
i	Less accumulated depreciation	_10b		10c	
11	Investments—publicly traded securities		11		
12	Investments—other securities See Part IV, line 11		12		
13	Investments—program-related See Part IV, line 11		13		
14	Intangible assets			14	
15	Other assets See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line	67	16	734	
17	Accounts payable and accrued expenses	3,205	17	5,765	
18	Grants payable			18	
19	Deferred revenue			19	·
20	Tax-exempt bond liabilities		)	20	<del></del>
Liabilities 21	Escrow or custodial account liability Complete Part IV	•		21	
≝   22	Payables to current and former officers, directors, trus	•			
ia	employees, highest compensated employees, and disc	qualified persons			
	Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated th	•		23	
24	Unsecured notes and loans payable to unrelated third	parties		_24	4 50=
25	Other liabilities Complete Part X of Schedule D		810	25	1,985
26	Total liabilities. Add lines 17 through 25	<b>v</b>	4,015	26	7,750
Net Assets or Fund Balances 25 25 30 32 33 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Organizations that follow SFAS 117, check here	X and complete			
ğ   37	lines 27 through 29, and lines 33 and 34.		2 040	Ī	<b>5</b> 04 6
<u>e</u> 27	Unrestricted net assets				-7,016
<u>m</u>   28	Temporanly restricted net assets		<del></del>	28	
5 2		here ▶ ☐ and		29	
E	Organizations that do not follow SFAS 117, check				
0 20	complete lines 30 through 34.				
S 30 31	Capital stock or trust principal, or current funds			30	
SS 32	Paid-in or capital surplus, or land, building, or equipme			31	
<b>∀</b> 32	Retained earnings, endowment, accumulated income,	or other tunds	2 040	32	
2 33 2 34	Total net assets or fund balances	•	-3,948		
	Total liabilities and net assets/fund balances		67	34	734

Form **990** (2010)

om	990 (2010) Peace Nick Corporation	36-4648850			Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any	question in this Part XI		_		
	•					
1	Total revenue (must equal Part VIII, column (A), line 12)		1			<u> 296</u>
2	Total expenses (must equal Part IX, column (A), line 25)		2		3,	364
3	Revenue less expenses. Subtract line 2 from line 1		3		-3,	068
4	Net assets or fund balances at beginning of year (must equal Part X, line 3	3, column (A))	4		-3,	948
5	Other changes in net assets or fund balances (explain in Schedule O)		5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must	st equal Part X, line 33,				
,	column (B))		6		<del>-7,</del>	016
Pa	rt XII Financial Statements and Reporting		·			
	Check if Schedule O contains a response to any	question in this Part XII				
	_	-			Yes	No
1	Accounting method used to prepare the Form 990. Cash	Accrual Other				
	If the organization changed its method of accounting from a prior year or c	hecked "Other," explain in				
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an ir	dependent accountant?		2a		X
b	Were the organization's financial statements audited by an independent ac	countant?		2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assu	mes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection	of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process	s during the tax year, explain in		[	7 1	· · · · ·
	Schedule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financia	l statements for the year were				
	issued on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated a	nd separate basis		1		
3a	As a result of a federal award, was the organization required to undergo ar	n audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?			3a		
b	If "Yes," did the organization undergo the required audit or audits? If the or	ganization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps	s taken to undergo such audits		3ь	1	1

Form **990** (2010)

SCHEDULE 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 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Peace Nick Corporation

Employer identification number 36-4648850

P	rt i	Reaso	on for Public Charity S	Status (All organizations	must co	mplete	this pa	art.) S	ee ins	tructio	ns.		
he (	orgar	nization is not a	a private foundation because	it is. (For lines 1 through 11, che	ck only or	ne box.)							
1		A church, con	vention of churches, or associ	ciation of churches described in s	section 1	70(b)(1)(A	\)(i).						
2	$\prod$	A school desc	escribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3	П			organization described in section	on 170(b)	(1)(A)(iii).							
4	П	-		in conjunction with a hospital des				(A)(iii).	Enter th	e hospit	al's name.		
	ш	city, and state					- ( /( - /	,,.			•		
5				a college or university owned or	operated	by a gove	mmenta	l unit de	scabed	ın			
•	لـــا		b)(1)(A)(iv). (Complete Part II		operator	J, 4 3010			001.000	•••			
6				, remmental unit described in <b>sec</b>	tion 170/	5)/4\/ <b>6</b> \/ <sub>3</sub> /	,						
7	X		-	ubstantial part of its support from	•		•	the go	noral pu	blio			
•		=	section 170(b)(1)(A)(vi). (Co		a govern	incinai un	11 01 11011	i uie gei	ierai pu	DIIC			
8				0(b)(1)(A)(vi). (Complete Part II	`								
9	H	·-		more than 33 1/3% of its suppor	-	stabutions	mombo	mbin fa	oo ond	<b>a</b> rooo			
9	L									_			
				t functions—subject to certain ex						แร			
			•	unrelated business taxable inco	•		i tax) iri	om busii	lesses				
40			•	1975 See section 509(a)(2). (0	•	•							
10	Н	•	•	clusively to test for public safety		•	., ,		.4.41				
11		_		clusively for the benefit of, to pe				•		••			
				d organizations described in sect						uon			
				e type of supporting organization			г	ī					
_	$\Box$	a Type		c Type III–Functiona			d [		e III-Oti				
8		-	· · · · · · · · · · · · · · · · · · ·	nization is not controlled directly				•	•				
			<del>-</del>	than one or more publicly suppo	rtea organ	nizations d	escribe	ın sect	ion 509	(a)(1)			
		or section 509	. , , ,										
f				mination from the IRS that it is a	Type I, Ty	pe II, or I	ype III s	upportin	g				
			check this box			• • •							
g		_	•	on accepted any gift or contributi	on from a	ny of the							
		following per											
			-	itrols, either alone or together wi	th persons	s describe	d in (II) a	and				Yes	No
			v, the governing body of the s	••							11g(i)		ļ
			member of a person describe								11g(ii)	<u> </u>	
			ontrolled entity of a person de	***							11g(iii)	1	L
h			ollowing information about the	supported organization(s)	1				<del>,</del>	<del></del>			
(i)		e of supported	(ii) EIN	(iii) Type of organization	1	organization		ou notify		s the	(vii) Am		
	Oig	janization		(described on lines 1-9 above or IRC section		sted in your document?	col (i)	nzation in of your	organızat (I) organı	zed in the	sup	οοπ	
				(see instructions))				oort?	+	S ?			
					Yes	No	Yes	No	Yes	No			
A)						1							
					<u> </u>			<u> </u>	ļ <u>-</u> -	ļ			
B)						]							
					<u> </u>	ļ				ļl			
(C)													
D'					<del> </del>			ļ	<del> </del>				
D)					1			1					
(E)			<del></del>		<del> </del>			<u> </u>	<del> </del>	<del>                                     </del>			
-/													
					1								
Tota	ı				<u> </u>	<u> </u>							

Page 2

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support									
Caler	dar year (or fiscal year beginning in)▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				370	296	666			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
<b>4 5</b>	Total. Add lines 1 through 3  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)				370	296	666			
6	Public support. Subtract line 5 from line 4						666			
	tion B. Total Support	I	<u> </u>	<u></u>	1					
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
7	Amounts from line 4	, ,		1	370	296	666			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
9	Net income from unrelated business activities, whether or not the business is regularly carned on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10		<u> </u>	<u> </u>			666			
12	Gross receipts from related activities, etc. (	•				12				
13	First five years. If the Form 990 is for the o	_	second, third, four	th, or fifth tax year	as a section 501(c)(3	3)	. —			
	organization, check this box and stop here						<b>D</b>			
	tion C. Computation of Public Su		*							
14	Public support percentage for 2010 (line 6,	• • •	•	(t))		14	100.00%			
15	Public support percentage from 2009 Sche		•		4/00/	15	100.00%			
тьа	33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this									
ь	box and stop here. The organization qualifies as a publicly supported organization  23.4(3%) support test. 2009. If the agreement and not should be to be used to a 15 and the 15 in 23.4(20%) as made									
U	_	33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,								
17a	check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization  10%-facts-and-circumstances test—2010. 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported									
	organization									
b										
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b>									
	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 check a box o	n line 13, 16a, 16b	, 17a, or 17b, chec	k this box and see					
	ınstructions						▶ □			

Schedule A (Form 990 or 990-EZ) 2010 Peace Nick Corporation

Part III Support Schedule for Organizations Described in Section 509(a)(2)

oupport octionate for organizations bescribed in occiton ous(a)(1)							
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.							
If the organization fails to qualify under the tests listed below please complete Part II.)							

500	tion A. Public Support	quality under	the tests hated	below, picase	complete i ai		
	dar year (or fiscal year beginning in)▶	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(a) 2000	(0) 2001	(0) 2000	(u) 2003	(0) 2010	(i) rotal
2	grants *)  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
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						
С	Add lines 7a and 7b		<u> </u>				
8	Public support (Subtract line 7c from						
Sac	line 6 ) tion B. Total Support	<u> </u>	<u> </u>	I	<u> </u>	<u> </u>	<u> </u>
	ndar year (or fiscal year beginning in)▶	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	(4) 2000	(2) 200.	(0, 2000	(4) 2000	(0, 20.0	(1) 1 5 tu
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						
С	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.)		and the desired			<u> </u>	
14	First five years. If the Form 990 is for the organization, check this box and stop here	_	second, third, tour	th, or fifth tax year a	as a section 501(c)	(3)	. ┌
Sec	tion C. Computation of Public Su				<del></del>		
15	Public support percentage for 2010 (line 8,			(f))		15	%
16	Public support percentage from 2009 Sche		•			16	%
	tion D. Computation of Investmen						<del></del>
17	Investment income percentage for 2010 (lir			column (f))		17	<b>%</b>
18	Investment income percentage from 2009		<del>-</del>	(///		18	%
19a	-	33 1/3% support tests—2010. 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					▶ [	
b	33 1/3% support tests—2009. If the organ						_
	line 18 is not more than 33 1/3%, check this						▶ [
20	Private foundation. If the organization did	not check a box of	n line 14, 19a, or 1	9b, check this box	and see instruction	s	<u> </u>

Schedule A (Form 990 or 990-EZ) 2010 Peace Nick Corporation

36-4648850

Page 4

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. Also complete this part for any additional information. (See instructions).

Part II, Line 10 - Other Income Detail

Other income

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0

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2010

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**Employer identification number** Name of the organization Peace Nick Corporation 36-4648850 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (duning year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes In Part XIV. describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Describe in Part XIV the intended uses of the organization's endowment funds.

Description of investment

(d) Book value
(,

e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Land, Buildings, and Equipment. See Form 990, Part X, line 10

(a) Cost or other basis

(investment)

(b) Cost or other basis

(other)

(c) Accum

deprecia

Schedule D (Form 990) 2010

Part VI

1a Land **b** Buildings

**d** Equipment

c Leasehold improvements

Schedule D (Fo	orm 990) 2010 Peace Nick Corporation	<u> </u>	36-4648850	Page 3
Part VII	Investments—Other Securities. See Form 990	), Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of valuat	uon
•	(including name of security)		Cost or end-of-year mark	ket value
(1) Financial d	derivatives		·	
(2) Closely-he	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)			_	
(F)		-		
			<del> </del>	
(G)				
(H)				<del></del>
(I)	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Related. See Form 99	Dart X line 13		
1-SIT AIR	(a) Description of investment type	(b) Book value	(c) Method of valua	tron
	(a) Description of investment type	(D) Book value	Cost or end-of-year mark	
(4)			Cost of Cha-or-your man	tot valuo
(1)				<del></del>
(2)				
(3)				
(4)				
(5)				
(6)				<del></del>
_(7)				
(8)				
_(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line 15.	<u>-</u> .		
	(a) Description			(b) Book value
(1)				- · · ·
_(2)				
(3)				
(4)				
_(5)				
(6)_				
(7)				
(8)				
(9)	· · · · · · · · · · · · · · · · · · ·			
(10)		· - · · · ·		
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>	
Part X	Other Liabilities. See Form 990, Part X, line 2	5.		
1.	(a) Description of liability	(b) Amount		
(1) Federal	income taxes			
(2) Note	Payable - Gregory Panzica	1,985		
(3)				
(4)				
(5)				
(6)		<u> </u>		
(7)				
(8)	···			
(9)		<del> </del>		
(10)		<del> </del>		
(11)		+		
	n (h) must oqual Form 000 Pert V and (D) the 05	1 005		
	n (b) must equal Form 990, Part X, col (B) line 25)	1,985	<u> </u>	

ched	ule D (Form 990) 2010 Peace Nick Corporation		36-4648850	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Fina	ncial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	•	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Pnor penod adjustments		7	
8	Other (Describe in Part XIV )		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Staten	nents With Rev	enue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
θ	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Pa	rt XIII Reconciliation of Expenses per Audited Financial State	ments With Ex	penses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2е	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV )	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Pa	rt XIV Supplemental Information			

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide

any additional information

Schedule D (Form 990) 2010 Peace Nick Corporation
Part XIV Supplemental Information (continued)

36-4648850

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

Peace Nick Corporation

Employer Identification number 36-4648850

Form 990 - Organization's Mission or Most Significant Activities

Peace Nick is a nonprofit organization promoting world peace through

education, poverty reduction, environmental protections and social justice.

Our goal is to slow down and reverse the damaging effects of the previous

decade of flawed and outdated domestic and foreign policies that the United

States has employed. "Staying the course" is no longer an option as war

and violence persist, the world economy crumbles, poverty increases, global

warming and environmental degradation continues and social injustices rise.

Peace Nick will focus on local, regional and worldwide issues that demand

urgent action, solutions, and measurable results.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public