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SCHFDULE A (Form 990 or 990 EZ)

Public Charity Status and Public Support

Depute of the Total N ma of the g nization

Complete fithe organization in a cotion 501(c)(3) organization of 4947(a)(1) nonexempt charitable trust ► Attach to Form 990 or Form 990 EZ See separate instructions Employe ide tif I mb

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1	MADDOCK	OPERA	HOUSE AS	SOCI	ATIA	<i>\lambda</i>		_61-	16047	559	
Car			rity Status (All orga				thu pa	n) See	n truction	15	
Thetol	rganization is not	a private found.	ation because it i (Fi	วาปีกะร 1	through 1	1 check	only one	box)			
1	L Achurch con-	vention of churc	thes or association o	i churche	de cribe	ed in soc	tion 170	(b)(1)(A)()		
2	A chool described in section 170(b)(1)(A)(ii) (Attach Schedule E)										
3	. A no pital or a cooperative hespital service organization de-cribed in section 170(b)(1)(A)(i-)										
4	🔲 A mudical reso	e irch organizati	on operated in conjur	iction witl	h a hospit	ni descri	bed in se	ction 17	0(b)(1)(A)(ı	ii) Enter the	
	hospitil snim	ne city and thi	te								
5		on aparated for)(1)(A)(IV) (Com	the benefit of a colle	ege or un	IVLT ITY O	wnud ar	operated	l by a jo	overnmenta	i) unit descri	bud in
6	∐ A federal tat	e or localigovo	rnmont or governmen	tal unit de	acribed in	n section	170(b)(1)(A)(V)			
7 '	🔀 An organizatio	on thic normally	receive a sub tanti	al part of	its huppe	ort from	i go em	mental u	nit or from	the general	ם ומעם
	described in s	ect on 170(b)(1)(A)(vi) (Complete Pa	rt II)			J			·	
			in section 170(b)(1)(A		•						
9 (eceive (1) more th								
			ed to it exempt fund								
			ent income and unre after June 30-1975-S						on all cax) from busing	15 762
10									441		
			d operated exclu ively								
11)	☐ All Organizatio	ni organized a	nd operated excluing blicly supported orga	cly for fi	of penelli	(O) (O	penorm	the junc	tion of o	r to carry o	ut the
			describes the type of								ection
	_								_		
	a ∐ Type				oc III-Fun				d ∟	Type:III-C	
G	other than to	mis dox i certify	that the organization ors and other than or	I HOT CO	ntrollea a	rectly of	r indirect	ly by orr	or more a	i qualified p	erson
	or ection 509		irs the other than or	e or mon	е ривнеку	прром	ed organ	izations (uescrib-u	in section at	9(3)(1)
f			a written determinati	on fears	المالية	de de la company	a Eune	I. Tuno	II or Tura	. III	le a
•	organization of	check thi box								и пррот	" y 🗆
g	follow ng pers	ons?	the organization acce								
			indirectly control of			her with	per on	de cribe	d in (ii) and	Y	N
	(iii) below	the governing b	ody of the supported	organizat	tion?					119()	
	(II) A family m	iamber of a pers	on described in (i) ab	ove?						119()	T
			a per on described i							11g(រពិ)	1
_ h	Provide the fo	llowing informat	tion about the suppor	ed organ	ization()						
() N		LHIN	(d (t) 1 1 1 1		on zation	() Day		()		() Am	Q1
	ge lo		(drt) 119	go or u	td you d?	the o ga	of you	() o gan	to n col	upp rt	
			(s a nat cho))				1	_ u	, 		
			<u> </u>	Yes	No	Yes	No	Yes	No		
(A)											
		 		<u> </u>				ļ			
(B)					ì '	Ì	Ì	Ì	1		
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(C)											
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(D)				-	!						
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(E)		1					Į.				
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Tasal						1			1 1		

Schrau	A (Form 990 or 990 E7) 2016 60 60 1				· · · · · · · · · · · · · · · · · · ·	04/59	
Real	Support Schedule for Organization	ations Descr	ıbed in Secti	ons 170(b)(1	1)(A)(iv) and	170(b)(1)(A)(ı	/I)
	(Complete only if you checked to						ualify under
	Part III If the organization fails to	o qualify unde	er the tests lis	ted below p	lease comple	ete Part III)	
	on A Public Support	(a) 200c	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Calon	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(6) 2008			
1	Gifts grants contributions and	1		ļ	سسيون ا	0 00	
	membership fees recoived (Do not				1,113	268,298	137 S
_	include any unusual grants).	ļ		 	·	 	87 15 8
2	Tax revenues levied for the						
	organization's benefit and oither paid to or expended on its behalf	1)	0	0	•
_	The value of services or facilities		 		- 	 	
3	furnished by a governmental unit to the						
	organization without charge				O	0	e e
4	Total Add lines 1 through 3				1,115	268,298	269,91373
-	-	[]], [5] [5][[4], [1]	387. (4. 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	16.5 Englett 155, (6.5)		(31 8 .) (31 8 .) (32 8 .) (39)	16
5	The portion of total contributions by each person (other than a						PERION
	each person (other than a governmental unit or publicly						I ON ECR E
	supported organization) included on						7 487-
	line 1 that exceeds 2% of the amount					45 000)	FERSON 3 6
	shown on line 11 column (f)						35%
6	Public support Subtract line 5 from line 4		班底是"高级"	5645660			34, 4152
Sect	ion B Total Support	101.1 12.1 11.1 11.1 11.1 11.1 11.1 11.1					
Cale	ndar year (or fiscal year boginning In)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4				7,115	248 290	269,413
8	Gross income from interest dividends						
	payments received on securities leans			}			
	rents royalties and Incomo from similar				0	25 13	25 2
	sources				·	+	
9	Net income from unrelated business						
	activities whether or not the business				6	0	O
4.0	Is regularly carried on	<u> </u>	- 	 	 	 -	
10	Other income Do not include gain or loss from the sale of capital assets					159	15-9
	(Explain in Part IV)					'	}
11	Total support Add lines 7 through 10	3 38216 666 61		1656 13 136 5 336 1	16 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13.18.13.19.19.19.13	269 59805
12	Gross receipts from related activities of			T-1707; 1777 20004 1	CHAGGANGALLALA MA KACE	12	- 0
13	First five years If the Form 990 is for			nd third fourt	n or fifth tax y	ear as a sect	lon 501(c)(3)
	organization check this box and stop hi						<u> </u>
Sect	ion C Computation of Public Suppo	rt Percenta	<u>je</u>			 ,	
14	Public support porcentage for 2010 (line			11 column (f))		14	<u> </u>
15	Public support percentage from 2009 Se	chedule A Par	t II line 14			15	/
16a						1/3% or more	
	box and stop here The organization qu						. ▶ □
b						e 15 is 331/39	
	check this box and stop here. The orga						
17a							
	10% or more and if the organization m	eots the facts	and circumsta	ancos test ch	neck this box 8	ind stop here	Explain in
	Part IV how the organization meets the	racis and circ	es esonaramie, ie	s me organi	varion drainles	as a hannery	supported > r
	organization						-

b 10% facts and circumstances test-2009 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

Private foundation If the organization dld not check a box on line 13, 16%, 16%, 17% or 17% check this box and see

supported organization

instructions

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4- 0	•	,	
(Complete only if	you checked the box	on line 9 of Part I or if the organization failed to qualify under Pa	art i
If the organization	n fails to qualify under	the tests listed below please complete Part II)	

Section	on A Public Support						
Calen	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.)						
2	Gross receipts from admissions merchandiso 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 313			i			
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	1				ı	<u></u>
6	Total Add lines 1 through 5			ı			
7a	Amounts included on lines 1 2 and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified			}			
	persons that exceed the greater of \$5 000						
	or 1% of the amount on line 13 for the year		}				
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from			be careas	hwk.lb		
	line 6)						
	on B Total Support	· · · · · · · · · · · · · · · · · · ·	4	1 1 1 0000	(-II) D000	(-) 0040	(f) Total
	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) lotal
9	Amounts from line 6	ļ			-	\ 	
10a	Gross income from interest dividende payments received on securifies loans rents royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b whether		1	}			
	or not the business is regularly carried on			1			
12	Other Income Do not Include gain or					Ţ —	
	loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9 10c 11 and 12)						
14	First five years if the Form 990 is for the organization check this box and stop he		n s first secon	nd third fourth	or fifth tax y	ear as a section	n 501(c)(3) ▶ :□
Sect	on C Computation of Public Suppo		je				
15	Public support percentago for 2010 (line			13 column (f))		15	%
16	Public support percentage from 2009 Sc					16	%
	ion:D Computation of Investment In						
17	Investment income percentage for 2010			y line 13 colu	mn (f))	17	%
18	Investment income percentage from 2009 Schedule A Part III line 17						
19a	33 no support tests-2010 If the organ	nization did no	it check the bo	x on line 14 a	nd lino 15 is i	nore than 331/3"	% and line
	17 is not more than 331/x% check this box and stop here. The organization qualifies as a publicly supported organization.						on 🕨 🔲
b	33 /3 / support tests-2009 If the organization did not check a box on line 14 or line 19a and line 16 is more than 33 1/3 /a and						
	line 18 is not more than 331/3% check this box and stop here. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 14, 190, or 190, check this box and see instructions.						

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 (Sec instructions)

PART II., LING 10 \$159 - RECEIVED FOR SALE OF
SCRAP METAL FROM BUILDING TU AMERISTOEL

MADDOCK OPERA HOUSE ASSOCIATION PO BOX 129 MADDOCK ND 58348



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DECLARATION

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

Signature of officer or t

10-31-11

Title

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