

Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except private foundations)

- Do not enter social security numbers on this form as it may be made public.
- Go to www.irs.gov/Form990EZ for instructions and the latest information.

OMB No 1545 1150

2018

Open to Public
Inspection

A For the 2018 calendar year, or tax year beginning C , 2018, and ending		D Employer identification number 83-2906899 E Telephone number (352) 404-3169 F Group Exemption Number 01												
G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ► _____														
I Website: ► N/A														
J Tax-exempt status (check only one) – <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(7) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527														
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other														
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 10,750.														
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; vertical-align: top;">Revenue</td> <td style="width: 60%; vertical-align: top;"> 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 </td> <td style="width: 30%; vertical-align: top; text-align: right;"> 1 9,910. 2 840. 3 4 5c 6d 7c 8 9 10,750. 10 700. 11 12 13 14 15 16 3,542. 17 4,242. 18 6,508. 19 0. 20 21 6,508. </td> </tr> <tr> <td style="vertical-align: top;">Expenses</td> <td colspan="2" style="text-align: center;">SEE SCHEDULE O</td> <td style="vertical-align: top;">RECEIVED NOV 15 2019 0241 OGDEN, UT IRS-OSS</td> </tr> <tr> <td style="vertical-align: top;">Net Assets</td> <td colspan="3"></td> </tr> </table>				Revenue	1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	1 9,910. 2 840. 3 4 5c 6d 7c 8 9 10,750. 10 700. 11 12 13 14 15 16 3,542. 17 4,242. 18 6,508. 19 0. 20 21 6,508.	Expenses	SEE SCHEDULE O		RECEIVED NOV 15 2019 0241 OGDEN, UT IRS-OSS	Net Assets			
Revenue	1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) c Less direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	1 9,910. 2 840. 3 4 5c 6d 7c 8 9 10,750. 10 700. 11 12 13 14 15 16 3,542. 17 4,242. 18 6,508. 19 0. 20 21 6,508.												
Expenses	SEE SCHEDULE O		RECEIVED NOV 15 2019 0241 OGDEN, UT IRS-OSS											
Net Assets														

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

Form 990-EZ (2018)

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II.

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	22	6,508.
23	Land and buildings	23	
24	Other assets (describe in Schedule O)	24	
25	Total assets	0. 25	6,508.
26	Total liabilities (describe in Schedule O)	0. 26	0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	0. 27	6,508.

Part III · Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? SEE SCHEDULE O

What is the organization's primary exempt purpose SEE SCHEDULE O
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28	(Grants \$ <input type="text"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/>	28a
29	(Grants \$ <input type="text"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/>	29a
30	(Grants \$ <input type="text"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/>	30a
31	Other program services (describe in Schedule O)	
32	(Grants \$ <input type="text"/>) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a
	Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule Q to respond to any question in this Part IV

Part V. Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O 33 Yes No

34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions 34 Yes No

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 35a Yes No

b If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O 35b Yes No

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III 35c Yes No

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 36 Yes No

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0. 37a Yes No

b Did the organization file Form 1120-POL for this year? 37b Yes No

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 tax year covered by this return? 38a Yes No

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b Yes No N/A

39 Section 501(c)(7) organizations Enter 39a Yes No 0. 39b Yes No 0.

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: N/A
section 4911 ► N/A , section 4912 ► N/A , section 4955 ► N/A 40b Yes No

b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40c Yes No

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40d Yes No 0.

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization 40e Yes No 0.

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 40f Yes No X

41 List the states with which a copy of this return is filed ► NONE

42a The organization's books are in care of ► DONALD SPIVEY Telephone no ► (352) 404-3169
Located at ► 505 DREW AVE CLERMONT FL ZIP + 4 ► 34711 42b Yes No

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)? If 'Yes,' enter the name of the foreign country ► 42c Yes No X

See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)

c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country ►

43 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 43 Yes No N/A

44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44a Yes No X

b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44b Yes No X

c Did the organization receive any payments for indoor tanning services during the year? 44c Yes No X

d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 44d Yes No

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a Yes No X

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions 45b Yes No X

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018Open to Public
Inspection

Name of the organization

SALTY FEW INC

Employer identification number

83-2906899**FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES**

EVENT FEES	\$	661.
EVENT FEES FOOD/DRIN		881.
FUNDRAISING EXPENSES		737.
OFFICE EXPENSES		463.
TSHIRTS		800.
TOTAL	\$	3,542.

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE ORGANIZATION'S MISSION IS TO SHARE THE GOSPEL WITH MEN FROM ACROSS THE WORLD
AT A CHURCH DURING VARIOUS MOTORCYCLE EVENTS IN THE STATE OF FLORIDA. THE
ORGANIZATION FEEDS, HOUSES AND PROVIDES WORSHIP SERVICES AND LIVE MUSIC ON CHURCH
GROUNDS TO SHOW THE LOVE OF JESUS.