Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990 or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

AN ARRAY OF CHARM CAMPS FOR YOUTH

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

Schedule B (Form 990) (2021)

Organization type (check one	HARM CAMPS FOR YOUTH	55-0856946							
Organization type (check one	a):								
Filers of: Section:									
Form 990 or 990-EZ									
4947(a)(1) nonexempt charitable trust not treated as a private foundation									
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
_									
Check if your organization is converse. Only a section 501(c)(7), instructions.	overed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Special Rule	. See							
General Rule X For an organization filir	CLIENT COPY								
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5, roperty) from any one contributor. Complete Parts I and II. See instructions for determinibutions.	000 ing a							
Special Rules									
regulations under section 16b, and that received	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, from any one contributor, during the year, total contributions of the greater of (1) \$5,000; in (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	16a, or							
contributor, during the y literary, or educational p	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientificurposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering and of the contributor name and address), II, and III.	C,							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year									
Caution: An organization that is must answer "No" on Part IV, lir	on't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-Fithe filing requirements of Schedule B (Form 990).	990), but it							

Name of organization

AN ARRAY OF CHARM CAMPS FOR YOUTH

Employer identification number 55-0856946

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 METRO DEVELOPMENT & HOUSING AGENCY Person 701 SOUTH SIXTH STREET Payroll 12,485 Noncash NASHVILLE TN 37206 (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution STATE OF TENNESSEE 2 DEPT OF FINANCE & ADMIN Person 21ST FLOOR-WILLIAM R. SNODGRASS Payroll TENNESSEE TOWER 130,928 Noncash NASHVILLE TN 37243 (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization

Employer identification number

A	N ARRAY OF CHARM CAMPS FOR YOUTH		55-0856946
SERVICE CO.	Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on	unds or Other Similar Funds or A	Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the	at the assets held in donor advised	
	funds are the organization's property, subject to the organization's exc		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used	Yes No
	only for charitable purposes and not for the benefit of the donor or dor		
	conferring impermissible private benefit?		□ vaa □ Na
Pa	urt II Conservation Easements.		Yes No
	Complete if the organization answered "Yes" on	Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the organization (check		
•	Preservation of land for public use (for example, recreation or edu		x
			#18.4 B. O. 1. B. C.
	Protection of natural habitat	Preservation of a certified his	storic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a conse	
	easement on the last day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements Total acreage restricted by conservation easements	arguer	2a
b	Total acreage restricted by conservation easements	.l//////	2b
С	Number of conservation easements on a certified historic structure inc		2c
d	Number of conservation easements included in (c) acquired after 7/25	/06, and not on a	
	historic structure listed in the National Register	21.222.22.23.23.23.23.23.23.23.23.23.23.23	2d
3	Number of conservation easements modified, transferred, released, ex	xtinguished, or terminated by the organizat	tion during the
	tax year ▶		
4	Number of states where property subject to conservation easement is	located >	
5	Does the organization have a written policy regarding the periodic mor	nitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	330	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	of violations, and enforcing conservation ea	asements during the year
	A management		
7	Amount of expenses incurred in monitoring, inspecting, handling of vio	lations, and enforcing conservation easem	nents during the year
	> \$		
8	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 No
9	In Part XIII, describe how the organization reports conservation easem	nents in its revenue and expense statemen	t and
	balance sheet, and include, if applicable, the text of the footnote to the		
	organization's accounting for conservation easements.		
Pa	rt III Organizations Maintaining Collections of Art,	Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on	Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to	report in its revenue statement and balanc	e sheet works
	of art, historical treasures, or other similar assets held for public exhibi		
	service, provide in Part XIII the text of the footnote to its financial state	ments that describes these items.	expensed to the second control of the second
b	If the organization elected, as permitted under FASB ASC 958, to repo		neet works of
	art, historical treasures, or other similar assets held for public exhibition		
	provide the following amounts relating to these items:	en en server de l'entre	Reconstructed (2000) (2001) (2001) (2001)
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990 Part X		S S
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or	other similar assets for financial cain, pro	vide the
•	following amounts required to be reported under FASB ASC 958 relating		nac me
2	그걸 못하다 나도 아이트리는 맛이다고 말한 이곳도 이렇게 하는 아이를 맛있다면 이렇게 되는 어떻게 된 것만에 될 것만에 걸어졌다고 있었다. 아이들 것을 나가 하다 아이에 하다 오랜드 아이트 아이트 모든 아이트 아이트 나를 다 되다.		> \$
	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		

D	art III Organizations Maintaini	OF CHARM	CAMPS FOR	COUTH	55-085694	6	Page
	3	ng Collections o	f Art, Historical 1	reasures, o	r Other Simila	r Assets	(continued)
3	Using the organization's acquisition, access collection items (check all that apply):	ssion, and other record	ds, check any of the fo	ollowing that ma	ke significant use o	of its	
	concentration (check all that apply):						
а	- Labile exhibition	d	Loan or exchange pr	ogram			
b		e	Other				
C	Preservation for future generations		************				
4		collections and explai	in how they further the	organization's	evemnt nurnese in	Port	
	XIII.	,	article and	organization s	exempt purpose in	rait	
5	During the year, did the organization solicit	or receive donations	of art historical trace	iros or other sir	na il a u		
	assets to be sold to raise funds rather than	to be maintained as	nort of the arganization	ares, or other sir	miar		
Pa	art IV Escrow and Custodial A	rrangamente	part of the organizatio	n's collection?			Yes No
PERSONAL PROPERTY.		on answered "Vec	" on Form 000 D	n=+ IV / 1: O			
	Complete if the organization 990, Part X, line 21.	on answered Tes	011 F01111 990, F	art IV, line 9,	or reported an	amount o	on Form
12		P 0 0					
Ia	Is the organization an agent, trustee, custo						
	included on Form 990, Part X?						Yes No
D	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing table:				
							Amount
	Beginning balance		***********			С	
d	Additions during the year				1	d	
е	Distributions during the year				1	e	
	Ending balance				1	f	
2a	Did the organization include an amount on	Form 990, Part X, line	21, for escrow or cus	stodial account li	iability?		Yes No
b	If "Yes," explain the arrangement in Part XI	II. Check here if the e	xplanation has been n	rovided on Part	XIII	********	L res H No
Pa	art V Endowment Funds.			ioriada eri i arc	7(III	*********	
	Complete if the organization	n answered "Yes	" on Form 990 Pa	art IV line 10			
		(a) Current year	(b) Prior year	(c) Two years t	0.00000	oore book	(a) Faura variant hands
1a	Beginning of year balance		(b) Hor year	(c) Two years t	d) Triee y	ears back	(e) Four years back
h	Contributions		TT /S	7 7 7 7 7	#		
	Net investment earnings, gains, and	A Henry			1		
•		test" Brown II Broom II	All B. Magail	State			
_	losses						
a	Grants or scholarships						
е	Other expenditures for facilities and						
2	programs						
f	Administrative expenses						
g	End of year balance						
	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column (a))	held as:			
	Board designated or quasi-endowment	%					
b	Permanent endowment ▶ %						
C	Term endowment ▶ %						
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.					
3a	Are there endowment funds not in the posse	ession of the organiza	tion that are held and	administered fo	r the		
	organization by:						Yes No
	(i) Unrelated organizations						3a(i)
	(ii) Related organizations						3a(ii)
b	If "Yes" on line 3a(ii), are the related organization	zatione lieted ae requir	red on Schedule P2				3b
4		o organization's and	was at funds				30
	rt VI Land, Buildings, and Equ		wment lunds.				
The Co			Com- 000 Da	mt IV / 15mm at at a	O F 00	0 0 1 1	1: 40
_	Complete if the organizatio		10/17/19/20			J, Part X	
	Description of property	(a) Cost or other b	2000		(c) Accumulated		(d) Book value
		(investment)	(othe		depreciation	SCHOOL STATE OF THE SCHOOL	
1a	Land		1	00,000		3	100,000
b	Buildings	y:					
C	Leasehold improvements						
d	Equipment			15,523	15,5		
е	Other			80,840	80,7	83	57
otal	. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part	X, column (B), line 10	lc.)		>	100,057

THE RESIDENCE OF THE PARTY OF T		
Part X	(MADAW I	Liabilities.
	Other	LIADIIII II ES.

1.	(a) Description of liability	(b) Book value
_(1)	Federal income taxes	
(2)	SE COMMUNITY_PATHWAY	25,000
(3)	LOAN FOR PROPERTY_G.W.DAVIS	10,600
(4)	PAYROLL LIABILITIES	4,788
(5)	DIRECT DEPOSIT LIABILITY	771
(6)	AMEX CREDIT CARD	482
(7)	EE_ACCIDENT INSURANCE	54
(8)	SHORT TERM LOAN	-1,044
(9)		
Tota	I. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	40,651

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

_	art XI Reconciliation of Revenue per Audited Financial St	OR YOUTH 55	-0856946	Page 4
	Reconciliation of Revenue per Audited Financial St. Complete if the organization answered "Yes" on Form 9	atements With Reve	nue per Return.	
1	Total revenue, gains, and other support per audited financial statements	190, Part IV, line 12a.		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Cubitact line 20 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		
D	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		4c	
De	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Fe	Reconciliation of Expenses per Audited Financial St	atements With Expe	enses per Return.	
1	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 12a.		
	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		1	
a	Donated services and use of facilities	L a f		
b	Donated services and use of facilities Prior year adjustments	2a		
c	Prior year adjustments Other losses	2b	W. C.	
	111111111111111111111111111111111111111	2c 2d		
е	Other (Describe in Part XIII.) Add lines 2a through 2d	<u>Zu</u>	20	
3	Subtract line 2e from line 1	*************	2e 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		3	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	Best Still	
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	
	rt XIII Supplemental Information.	30.00		
rovi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part IV, lines 1b and 2b; Pa	irt V, line 4; Part X, line	
Ра	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pre	ovide any additional inform	ation.	

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Schedule D (Form 990) 2021	AN ARRA	Y OF	CHARM	CAMPS	FOR	YOUTH	55-0856946	Page 5
Part XIII	Suppleme	ntal Informati	ion (cor	ntinued)					
									J
		* * * * * * * * * * * * * * * * * * * *					*************		
* *********								.,	

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SCHEDULE O (Form 990)

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 Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047 2021

Open to Public Inspection

AN ARRAY OF CHARM CAMPS FOR YOUTH

55-0856946

Employer identification number

Form 990 - Organization's Mission	erastostinininininininis	
An Array of Charm's mission is to empower disadvantag	ed youth by eq	quipping
them with the academic competencies, social skills, a	nd leadership	training
required to create permanent, positive change in their	r lives. We ac	complish
this through a foundation of training in etiquette, c	ivility, and p	rotocol-
the three core assets that transform societal and soc	ioeconomic dif	ferences
into the common language of success. Each summer, AAO	C provides aff	ordable,
accessible day camps for families of youth, ages 4-15	. AAOC camps a	re
gender-specific, culturally relevant and provide train	ning centered	on the
themes of social and business etiquette, civility, and receive academic enrichment, character education, and		
community services activities.		
Form 990, Part I, Line 6		***************
VOLUNTEERS ASSIST WHEN NEEDED WITH ACTIVITIES AND FIE	LD TRIPS.	*************
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 Disc	losure Explana	tion
No documents available to the public		
Form 990, Part XI, Line 9 - Other Changes in Net Asse	ts Explanation	********
CHANGE IN NET ASSETS	\$	0
CHANGE IN NET ASSETS		5,568

Schedule O (Form 990) 2021 Name of the organization	Page Employer identification number
AN ARRAY OF CHARM CAMPS FOR YOUTH	55-0856946
Total	\$ -5,568
• 60.000.000.000.000.000.000.000.000.000.	

CLIENT CO	24

+	

Page 1 of 1

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

Department of the Treasury

Internal Revenue Service Name(s) shown on return

(99) Identifying number

	AN AR	RAY OF CHARM	M CAMPS FOR	YOUTH		55-	-085	6946
	ness or activity to which this form rela							
	ndirect Deprecia							
P		ense Certain Prop						
_	Note: If you have	any listed property	y, complete Part V	pefore you c	omplete Part	<u>l</u>	1	
1	Maximum amount (see instructi		1	1,050,000				
2	Total cost of section 179 proper	ty placed in service (se	e instructions)				2	
4	Threshold cost of section 179 p	roperty before reduction	n in limitation (see instri	ictions)				2,620,000
5	Reduction in limitation. Subtraction Dollar limitation for tax year. Subtraction	t line 3 from line 2. If zero	ero or iess, enter -0-	iling popostalit a			4	
6		time 4 from file 1. If Zero c	The second secon	Cost (business use	C. (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Elected cost	5	MUNICIPAL ZERVICENT DE LA
_	(4, 2000)	tion of proporty	(6)	Cost (business use	Orliy) (C)	Elected cost	-	
					-	-		
7	Listed property. Enter the amou	int from line 29			7			
8	Total elected cost of section 17	9 property. Add amoun!	ts in column (c), lines 6	and 7			8	
9	Tentative deduction. Enter the s	maller of line 5 or line	0				9	
10	Carryover of disallowed deducti						10	
11	Business income limitation. Ent	er the smaller of busine	ess income (not less that	n zero) or line	5. See instructio	ns	11	
12	Section 179 expense deduction	. Add lines 9 and 10, bu	ut don't enter more than	line 11			12	
13	Carryover of disallowed deduction	on to 2022. Add lines 9	and 10, less line 12		13			
	: Don't use Part II or Part III belo	w for listed property. Ins	stead, use Part V.	average and a second se				
Pa	art II Special Deprecia	ation Allowance a	nd Other Deprecia	tion (Don't	include listed	proper	ty. Se	e instructions.)
14	Special depreciation allowance		ther than listed property) placed in ser	vice			
	during the tax year. See instruct		Jeen IX II		$\square N$		14	2,850
15	Property subject to section 168(f)(1) election		Avefulavefu.	II		15	
16	Other depreciation (including AC	CRS)					16	
Pe	irt III MACRS Deprecia	ation (Don't includ		ee instructio	ns.)			
47	MACDO dada di C		Section A				Form 1	C4
17	MACRS deductions for assets p						17	61
18	If you are electing to group any assets place	ed in service during the tax ye -Assets Placed in Ser				ciation S	vetem	
		(b) Month and year	(c) Basis for depreciation	(d) Recovery	ocheral Depre	Clation	ystem	
	(a) Classification of property	placed in service	(business/investment use only-see instructions)	period	(e) Convention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property		any are managed,	39-70-52				
b	5-year property							
С	7-year property							
d	10-year property							
е	15-year property							
f	20-year property						715	
g	25-year property			25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L	_	
i	Nonresidential real			39 yrs.	MM	S/L	_	
	property				MM	S/L		
00		Assets Placed in Servi	ce During 2021 Tax Ye	ear Using the	Alternative Dep	77,3277		n
	Class life			10		S/L	_	
_	12-year		10	12 yrs.	NANA	S/L		
	30-year	-		30 yrs.	MM	S/L		
STATE OF THE PARTY	40-year	otructions \		40 yrs.	MM	S/L		
	Int IV Summary (See in						24	432
21 22	Listed property. Enter amount from Total. Add amounts from line 12		ines 19 and 20 in colum	n (a) and line	21 Fnter		21	432
	here and on the appropriate line						22	3,343
23	For assets shown above and pla	aced in service during th		e				
	nortion of the basis attributable t	o coction 263A costs		23			Maria Carlo	THE RESERVE OF THE PERSON OF T

orm	4562	(2021)

AN ARRAY OF CHARM CAMPS FOR YOUTH 55-0856946

P	art V	Note: For any v	erty (Include nt, recreation, vehicle for which	or amuse	ement.)	ındard	mileage	rate or d	educting	lease a		35 (8)	5			Page
_			a) through (c) of A—Depreciation								mito fo					- 100
24a	Do you hav	e evidence to support t					Yes	No	1000 Dec 200 al 10	Strongeredi	MAN COLD	evidence	22.5V1 0		X Yes	П.,
Туре	(a) e of property vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or ot)	Ва	(e) sis for depr usiness/inv use onl	reciation estment	(f) Recover	y	(g) Method/ onvention		(h) Depreciat	tion	Elected s	(i) section 179
25		depreciation allow			1,000,000		ervice di	uring					11.134			
		ear and used mo				se. See	instruct	tions			:	25				
26		used more than	50% in a qualifie	d business ι	use:								-			
	ee St	atement :	%	6	4,98	3	34	,591				+		432		
27	Property	used 50% or less	% in a qualified by	isiness use.												_
	,		The quantou of			1				T					5000	
			%							S/	L-					
											,		-	-		
			%							S/	L					
28	Add amo	ounts in column (h	n), lines 25 through	gh 27. Enter	here and	d on lin	e 21, pa	ge 1				28		432		
29	Add amo	ounts in column (i)), line 26. Enter h	nere and on	line 7, pa	ge 1								29		
_								Use of '								
		section for vehicle													es	
to yo	our employ	ees, first answer	the questions in	Section C to									T		Ι ,	(5)
30		siness/investment	and the same of th	ring	(a Vehic		100	ib) nicle 2	Vehi	·		(d) hicle 4		e) icle 5		f) icle 6
31		nmuting miles dri		ear#	L	W										
32		er personal (nonc	450	1111111	-				Consider the							
	miles dri		3,													
33	Total mil	es driven during t	he year. Add													
	lines 30	through 32	73													
34	Was the	vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		ng off-duty hours?														
35		vehicle used prim														
		owner or related	(((((((((((((((((((*****								1				
36	Is anothe	er vehicle availabl														
٥			Section C—Que		25					-		10.00				
		questions to deter		- All the second second	on to com	pleting	Section	B for ve	hicles us	sed by e	mploye	es who a	aren't			
		owners or related						bialas iu	م سالميام		tan bo				V	N-
37	your emp	naintain a written	policy statement	that pronibi	ts all per	sonai u	se or ve	nicies, in	cluaing c	ommut	ing, by				Yes	No
38		naintain a written	nolicy statement	that prohibit	e nereor	al use	of vehic	les evce	nt comm	uting h				1111111		
•		es? See the instru														
39		reat all use of veh					o, airoci	0.0, 0. 1	,0 OI 11101	0 011110						
40		rovide more than					mation f	from your	r employ	ees abo						
		e vehicles, and re														
41		neet the requirem				demon	stration	use? See	e instruc	tions		• • • • • • • • • • • • • • • • • • • •				
		our answer to 37														
Pa	art VI	Amortization	n													
		(a) Description of costs		(b) Date amor begi	rtization		Amortiz	(c) able amoun	t	(d Code s	30	(e) Amortiza period percent	or	Amortiza	(f) ation for thi	s year
42	Amortiza	tion of costs that	begins during yo	ur 2021 tax	year (see	instru	ctions):									
43		tion of costs that											43			
44	Total. Ad	ld amounts in col	umn (f). See the	instructions	for where	e to rep	ort						44	(Est		2 /0004

55-0856946

Federal Asset Report

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FYE: 12/31/2021

Form 990, Page 1

Asse	t Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
7-yea 44 45		12/22/21 12/22/21	1,600 1,250 2,850	X X	0 0	7 MQ200DB 7 MQ200DB	0 0	1,600 1,250 2,850
Prior 2 2 3 4 5 5 6 6 7 7 8 9 9 10 11 13 144 15 166 17 7 18 20 22 23 25 27 28 29 30 31 32 33 35 36 37 38 39 40 41 42 43	OFFICE FURNITURE & EQUIPME COMPUTERS VENDING MACHINES CEILING FANS OFFICE ELECTRONICS OFFICE ELECTRONICS OFFICE ELECTRONICS OFFICE FURNITURE FLAT SCREEN TV 22" LCD TV CHEST FREEZER EMACHINE COMPUTER & PRINT FILE CABINETS USED COMPUTER MONITORS DESK TOP COMPUTER LAPTOP CPMPUTER DESK TOP COMPUTER OFFICE FURNITURE LAPTOP COMPUTER DESKTOP COMPUTER OFFICE FURNITURE LAPTOP COMPUTER IPAD PRO OFFICE TV OFFICE TV OFFICE PC REFRIGERATOR LAPTOP PRINTER MINI FRIDGE BUS SPEAKER LAPTOP CABINETS FREEZER LAPTOP CABINETS FREEZER FURNITURE	6/04/08 7/17/08 8/07/08 8/17/08 12/01/08 6/04/09 12/22/09 6/10/10	993 1,100 400 260 300 180 503 1,040 230 180 542 220 700 590 1,650 1,040 972 630 483 730 412 380 120 160 10,000 217 1,000 400 556 250 510 273 374 28,530	X X X X X X X X X X X X X X X X X X X	993 550 200 130 150 90 252 520 115 90 271 110 350 295 825 520 486 315 242 365 206 190 0 0 0 0 0 0 0 7,265	7 HY 200DB 5 HY 200DB 7 HY 200DB 5 HY 200DB 6 HY 200DB 7 HY 200DB	993 1,100 400 260 300 180 503 1,040 230 180 542 220 700 590 1,650 1,040 972 630 483 709 348 347 235 800 120 160 100 10,000 217 1,000 400 556 250 510 273 374 28,412	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Other 26	Depreciation: WEST HAMILTON PROPERTY Total Other Depreciation Total ACRS and Other D	8/06/15 _ - epreciation _	100,000 100,000 100,000	-	100,000 100,000	0 Land	0 0	<u>0</u> 0
12 19 21 34 1	1 Property: 2006 FORD VAN 2007 WHITE VAN/BUS 2006 VAN FROM MCKEOWN 2013 FORD VAN BUS BUS - ANTHONY CROSS	8/26/10 1/07/13 10/25/14 6/07/18 5/19/05 5/31/16	12,479 10,202 2,500 10,302 14,500 15,000 64,983	X X X X	6,240 5,101 1,250 0 14,500 7,500 34,591	5 HY 200DB 5 HY 200DB 5 MQ200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB	12,479 10,202 2,500 10,302 14,500 14,568 64,551	0 0 0 0 0 432 432

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Federal Asset Report

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Form 990, Page 1

FYE: 12/31/2021

Bus Sec Basis
% 179Bonus for Depr PerConv Meth Date Asset Description In Service Cost Prior **Grand Totals** 196,363 141,856 92,963 3,343 Less: Dispositions and Transfers Less: Start-up/Org Expense 0 0 0 0 **Net Grand Totals** 196,363 141,856 92,963 3,343

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AMT Asset Report

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Form 990, Page 1

FYE: 12/31/2021

Asset _	Description	Date In Service	Cost	Bus S		Basis for Depr	PerConv Meth	Prior	Current
44 FF	DS Property: REEZER EFRIGERATOR	12/22/21 12/22/21	1,600 1,250 2,850		X X	0 0	7 MQ200DB 7 MQ200DB	000000000000000000000000000000000000000	1,600 1,250 2,850
3 CC 4 VI 5 CE 6 OF 7 OF 8 OF 9 FL 10 22 11 CF 13 EM 14 FII 15 US 16 DE 17 LA 23 DE 20 OF 22 LA 23 DE 25 IP 27 OF 28 OF 29 RE 30 LA 31 PR 32 MI 33 MI 35 BU 36 SP 37 LA 38 RE 39 FR 40 LA 41 CA 42 FR	FICE FURNITURE & EQUIPMENT DMPUTERS ENDING MACHINES EILING FANS FFICE ELECTRONICS FFICE ELECTRONICS FFICE FURNITURE AT SCREEN TV "LCD TV HEST FREEZER MACHINE COMPUTER & PRINTICE CABINETS EED COMPUTER MONITORS ESK TOP COMPUTER PTOP CPMPUTER ESK TOP COMPUTER FICE FURNITURE AD PRO FICE TV FFICE PC FRIGERATOR EFRIGERATOR PTOP INTER NI FRIDGE NI FRIDGE	6/04/08 7/17/08 8/07/08 8/17/08 12/01/08 6/04/09 12/22/09 6/10/10	993 1,100 400 260 300 180 503 1,040 230 180 542 220 700 590 1,650 1,040 972 630 483 730 412 380 235 800 120 160 10,000 217 1,000 400 556 250 510 273 374 28,530		X X X X X X X X X X X X X X X X X X X	993 550 200 130 150 90 252 520 115 90 271 110 350 295 825 520 486 315 242 365 206 190 0 0 0 0 0 0 0 7,265	7 HY 200DB 5 HY 200DB 7 HY 200DB 5 HY 200DB 6 HY 200DB 7 HY 200DB	993 1,100 400 260 300 180 503 1,040 230 180 542 220 700 590 1,650 1,040 972 630 483 709 348 347 235 800 120 160 100 10,000 217 1,000 400 556 250 510 273 374 28,412	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Other Dep 26 WE	oreciation: EST HAMILTON PROPERTY Total Other Depreciation	8/06/15	0		ar-	0	0 HY	0 -	0
	Total ACRS and Other Do	epreciation =	0		=	0		0	0
19 200 21 200 34 201 1 BU	16 FORD VAN 17 WHITE VAN/BUS 16 VAN FROM MCKEOWN 13 FORD VAN	8/26/10 1/07/13 10/25/14 6/07/18 5/19/05 5/31/16	12,479 10,202 2,500 10,302 14,500 15,000		x x x x	6,240 5,101 1,250 0 14,500 7,500	5 HY 200DB 5 HY 200DB 5 MQ200DB 5 HY 200DB 5 HY 200DB 5 HY 200DB	12,479 10,202 2,500 10,302 14,500 14,568	0 0 0 0 0 432 432

64,983

34,591

64,551

432

55-0856946

AMT Asset Report

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FYE: 12/31/2021

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
	Grand Totals Less: Dispositions and Transfer	rs _	96,363 0		41,856 0		92,963 0	3,343
	Net Grand Totals	_	96,363	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	41,856		92,963	3,343

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Bonus Depreciation Report

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Form 990, Page 1

FYE: 12/31/2021

Asset		Date In Service	Tax Cost	Bus Pct		Current Bonus	Prior Bonus	Tax - Basis for Depr
3	COMPUTERS	6/04/08	1,100		0	0	550	-
4	VENDING MACHINES	7/17/08	400		ő	0	200	550 200
5	CEILING FANS	8/07/08	260		ő	0	130	
6	OFFICE ELECTRONICS	8/17/08	300		0	0	150	130
7	OFFICE ELECTRONICS	12/01/08	180		0	0	90	150
8	OFFICE FURNITURE	6/04/09	503		0	0	251	90
9	FLAT SCREEN TV	12/22/09	1,040		0	0	520	252
10	22" LCD TV	6/10/10	230		0	0	520 115	520
11	CHEST FREEZER	6/10/10	180		0	0	90	115
12	2006 FORD VAN	8/26/10	12,479	100	0	0		90
13	EMACHINE COMPUTER & PRINTER	R 8/29/10	542	100	0	0	6,239	6,240
14	FILE CABINETS	4/06/12	220		0	0	271	271
15	USED COMPUTER MONITORS	10/19/12	700		0		110	110
16	DESK TOP COMPUTER	3/24/13	590		0	0	350	350
17	LAPTOP CPMPUTER	3/31/13	1,650		0	0	295	295
18	DESK TOP COMPUTER	9/06/13	1,040		0	0	825	825
19	2007 WHITE VAN/BUS	1/07/13	10,202	100		0	520	520
20	OFFICE FURNITURE	3/19/13	972	100	0	0	5,101	5,101
	2006 VAN FROM MCKEOWN	10/25/14	2,500	100	0	0	486	486
22	LAPTOP COMPUTER	9/15/14		100	0	0	1,250	1,250
23	DESKTOP COMPUTER	10/06/14	630 483		0	0	315	315
24	BUS - ANTHONY CROSS	5/31/16	15,000	100	0	0	241	242
25	IPAD PRO	11/13/16	730	100	0	0	7,500	7,500
	OFFICE TV	6/05/17			0	0	365	365
	OFFICE PC	9/27/17	412 380		0	0	206	206
	REFRIGERATOR	11/28/17			0	0	190	190
	LAPTOP		235		0	0	235	0
	PRINTER	2/18/18	800		0	0	800	0
	MINI FRIDGE	8/13/18	120		0	0	120	0
	MINI FRIDGE	12/17/18	160	4000	0	0	160	0
	2013 FORD VAN	12/17/18	100		0	0	100	0
35	BUS FORD VAN	6/07/18	10,302	100	0	0	10,302	0
	SPEAKER	4/09/19	10,000	STATE OF THE PARTY.	0	0	10,000	0
	LAPTOP	5/20/19	217		0	0	217	0
	REFRIGERATOR	8/21/19	1,000		0	0	1,000	0
30	FREEZER	3/12/20	400		0	0	400	0
	LAPTOP	3/12/20	556		0	0	556	0
	CABINETS	3/16/20	250		0	0	250	0
		3/16/20	510		0	0	510	0
42	FREEZER FURNITURE	8/18/20	273		0	0	273	0
		8/31/20	374		0	0	374	0
44	FREEZER	12/22/21	1,600		0	1,600	0	0
45	REFRIGERATOR	12/22/21	1,250		0	1,250	0	0
		8						
		Grand Total	80,870		0	2,850	51,657	26,363
			Consultation of the last of th	-			31,037	20,303

55-0856946

Depreciation Adjustment Report

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All Business Activities

FYE: 12/31/2021

AMT Adjustments/ Form Unit Asset Description Tax AMT Preferences MACRS Adjustments: Page 1 OFFICE FURNITURE & EQUIPMENT 3 4 0 0 0 Page 1 COMPUTERS 0 0 0 Page 1 VENDING MACHINES 0 **CEILING FANS** Page 1 0 0 0 Page 1 OFFICE ELECTRONICS 0 0 0 Page 1 OFFICE ELECTRONICS 0 OFFICE FURNITURE Page 1 0 0 0 Page 1 FLAT SCREEN TV 0 0 0 Page 1 10 22" LCD TV 0 0 0 Page 1 11 CHEST FREEZER 0 0 0 Page 1 12 2006 FORD VAN 0 0 Page 1 13 EMACHINE COMPUTER & PRINTER 0 0 0 Page 1 14 FILE CABINETS 0 0 Page 1 15 USED COMPUTER MONITORS 0 0 0 Page 1 16 DESK TOP COMPUTER 0 0 0 Page 1 17 LAPTOP CPMPUTER 0 0 Page 1 18 DESK TOP COMPUTER 0 0 0 Page 1 19 2007 WHITE VAN/BUS 0 Page 1 20 OFFICE FURNITURE 0 0 21 22 Page 1 2006 VAN FROM MCKEOWN 0 0 LAPTOP COMPUTER Page 1 0 0 23 24 Page 1 DESKTOP COMPUTER 0 0 Page 1 **BUS - ANTHONY CROSS** 432 432 0 25 27 IPAD PRO Page 1 21 18 21 0 Page 1 OFFICE TV 18 0 28 29 Page 1 OFFICE PC 22 0 Page 1 REFRIGERATOR 0 0 0 30 Page 1 LAPTOP 0 0 Page 1 31 PRINTER 0 0 0 Page 1 32 MINI FRIDGE 0 Page 1 33 MINI FRIDGE 0 0 Page 1 34 2013 FORD VAN 0 Page 1 35 BUS 0 Page 1 36 **SPEAKER** 0 0 Page 1 37 LAPTOP 0 Page 1 38 REFRIGERATOR 0 Page 1 39 **FREEZER** 0 0 Page 1 40 LAPTOP Page 1 41 CABINETS 0 Page 1 42 **FREEZER** 0 Ö Page 1 43 **FURNITURE** 0 0 Page 1 44 **FREEZER** 1,600 1,600 0 Page 1 45 REFRIGERATOR 1,250 1,250 0 3,343 3,343 0

55-0856946

Future Depreciation Report

FYE: 12/31/2021

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FYE: 12/31/22

Date In Asset Description Service Cost Tax AMT Prior MACRS: OFFICE FURNITURE & EQUIPMENT 1/01/07 993 3 COMPUTERS 6/04/08 1,100 0 0 4 VENDING MACHINES 7/17/08 400 0 567 CEILING FANS 8/07/08 260 0 0 OFFICE ELECTRONICS 8/17/08 300 OFFICE ELECTRONICS 12/01/08 180 0 OFFICE FURNITURE 6/04/09 503 FLAT SCREEN TV 12/22/09 1,040 10 22" LCD TV 6/10/10 230 CHEST FREEZER 6/10/10 180 13 EMACHINE COMPUTER & PRINTER 8/29/10 542 0 14 FILE CABINETS 4/06/12 220 15 USED COMPUTER MONITORS 10/19/12 700 0 16 DESK TOP COMPUTER 3/24/13 0 590 0 17 LAPTOP CPMPUTER 3/31/13 1,650 DESK TOP COMPUTER 18 0 9/06/13 1,040 0 20 OFFICE FURNITURE 3/19/13 0 972 0 22 23 25 LAPTOP COMPUTER 9/15/14 630 0 DESKTOP COMPUTER 10/06/14 483 0 0 IPAD PRO 11/13/16 730 0 0 27 28 OFFICE TV 6/05/17 19 412 19 OFFICE PC 9/27/17 380 11 11 29 REFRIGERATOR 11/28/17 235 0 0 30 LAPTOP 2/18/18 800 0 0 31 PRINTER 8/13/18 120 0 32 MINI FRIDGE 12/17/18 160 0 0 33 MINI FRIDGE 12/17/18 100 0 0 35 36 BUS 4/09/19 10,000 0 0 **SPEAKER** 5/20/19 0 0 217 37 LAPTOP 8/21/19 1,000 0 0 38 REFRIGERATOR 3/12/20 400 0 0 39 **FREEZER** 3/12/20 556 0 0 40 LAPTOP 3/16/20 250 0 0 41 **CABINETS** 3/16/20 510 0 0 42 FREEZER 8/18/20 273 0 43 FURNITURE 8/31/20 374 0 0 44 FREEZER 12/22/21 1,600 0 0 REFRIGERATOR 12/22/21 1,250 0 0 30 31,380 30 Other Depreciation: 26 WEST HAMILTON PROPERTY 8/06/15 100,000 0 **Total Other Depreciation** 100,000 0 Total ACRS and Other Depreciation 100,000 Listed Property: 2006 FORD VAN 12 8/26/10 12,479 19 2007 WHITE VAN/BUS 1/07/13 10,202 0 0 21 2006 VAN FROM MCKEOWN 10/25/14 2,500 0 0 10,302 34 2013 FORD VAN 6/07/18 0 0 5/19/05 0 BUS 14,500 0 24 **BUS - ANTHONY CROSS** 5/31/16 15,000 0 0 0 0 64,983 196,363 **Grand Totals** 30 30

Form 990

Two Year Comparison Report

For calendar year 2021, or tax year beginning

ending

2020 & 2021

Name

Taxpayer Identification Number

_ 7	/N	ARRAY OF CHARM CAMPS FOR YOUTH				55-08	56946
				2020	2021		Differences
	1.	Contributions, gifts, grants	1.	20,431	51	,265	30,834
	2.	Membership dues and assessments	2.				
-	3.	Government contributions and grants	3.	70,012	150	,707	80,695
n	4.	Program service revenue	4.	86,152	138	,891	52,739
e n	5.	Investment income	5.	lt.			
>		Proceeds from tax exempt bonds	6.				
œ		Net gain or (loss) from sale of assets other than inventory	7.				
	8.	Net income or (loss) from fundraising events	8.				
	9.	Net income or (loss) from gaming	9.				Anni Carlos and Anni Carlos an
	10.	Net gain or (loss) on sales of inventory	10.				
	11.	Other revenue	11.				
		Total revenue. Add lines 1 through 11	12.	176,595	340	,863	164,268
	13.	Grants and similar amounts paid	13.				
		Benefits paid to or for members	14.				
es	15.	Compensation of officers, directors, trustees, etc.	15.	22,200	25	,250	3,050
S	16.	Salaries, other compensation, and employee benefits	16.	44,909	60	,106	15,197
e	17.	Professional fundraising fees	17.				
X	18.	Other professional fees	18.	31,314	50	,351	19,037
ш	19.	Occupancy, rent, utilities, and maintenance	19.	47,822	64	,798	16,976
	20.	Depreciation and Depletion	20.	3,338	3	,343	5
		Other expenses	21.	47,890	114	,562	66,672
	22.	Total expenses. Add lines 13 through 21	22.	197,473		,410	120,937
. 1	23.	Excess or (Deficit). Subtract line 22 from line 12	23.	-20,878	22	,453	43,331
	24.	Total exempt revenue	24.	176,595	340	,863	164,268
	25.	Total unrelated revenue	25.				
ion	26.	Total excludable revenue	26.	86,152	138	,891	52,739
nat	27.	Total assets	27.	106,089	127	,960	21,871
forr	28.	Total liabilities	28.	35,665	40	,651	4,986
Ē	29.	Retained earnings	29.	70,424	87	,309	16,885
he	30.	Number of voting members of governing body	30.	9	9	1	
		Number of independent voting members of governing body	31.	0	0		
		Number of employees	32.	16	14		A CONTRACTOR OF THE PARTY OF TH
	33.	Number of volunteers	33.	3	4		

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		ומא אפּו	ı ax keturn History			2021
Name AN ARRAY O	OF CHARM CAMPS	S FOR YOUTH			Employer Identification 55-0856946	Employer Identification Number 55-0856946
	2017	2018	2019	2020	2021	2022
Contributions, gifts, grants	85,554	140,168	103,911	90,443	201,972	
Membership dues	- 1	- 1				
Program service revenue	100,614	147,029	189,709	86,152	138,891	
Capital gain or loss						
Investment income						
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue						
Total revenue	186,168	287,197	293,620	176,595	340,863	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.		19,375	44,200	22,200	25,250	
Other compensation	29,201	•	40,780	44,909	60,106	
Professional fees	56,499	55,398	84,475	31,314	50,351	
Occupancy costs	34,560	-	59,013	47,822	64,798	
Depreciation and depletion	4,331	13,743	-	3,338	3,343	
Other expenses	48,297	-	75,828	47,890	-	
Total expenses	172,888	236,402	316,704	197,473	318,410	
Excess or (Deficit)	13,280	50,795	-23,084	-20,878	22,453	
Total exempt revenue	186,168	287,197	293,620	176,595	340,863	
Total explinable revenue	100 614	147 029	180 700	96 150	120 001	
oral excitodable leveline	2000	4	TOO' 100	2CT '00	-	
Total Assets	108,343	-	-	•	127,960	
Total Liabilities	45,840	-	-	35,665	40,651	
Net Fund Balances	62.503	114.761	91 302	70 424	87 309	

AAOC AN ARRAY OF CHARM CAMPS FOR YOUTH 55-0856946 FYE: 12/31/2021

Expenses
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Other
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Form

Fund Raising	v ₂	w
Management & General	as a	0
_	·γ.	ω"
Program Service	563 450 303 303 278 261 261	2,284
<u> </u>	.«V-	so.
Total penses	563 450 365 303 278 261 261	2,284
. Ex	v-	V)-
Description	MEMBERSHIPS/DUES/SUBSCRIP EVENT EXPENSES DONATIONS TO OTHERS INTEREST EXPENSE LICENSES & PERMITS TBI BACKGROUND CHECK EXP BIZ REGISTRATION FEES PARKING EXPENSE	Total

_
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FYE: 12/31/2021

Schedule A, Part III, Line 1(e)

BOARD CONTRIBUTIONS GENERAL PUBLIC DONATIONS PPP LOAN FORGIVENESS	ሱ	7,294
Cash Contribution STATE OF TENNESSEE		12,485
ď.	ω,	130,928

Schedule A, Part III, Line 2(e)

Description

138,891 138,891 Amount

> PROGRAM SERVICE REV_All Sourc Total

Forms 990 / 990-EZ Return Summary

For calendar year 2021, or tax year beginning

, and ending

55-0856946

AN ARRAY OF CHARM CAMPS FOR YOUTH

Net Asset / Fund Balance at Beginn	ing of Year		;	70,424
Revenue				
Contributions	2	01,972		
Program service revenue	1	38,891		
Investment income	-			
Capital gain / loss	-			
Fundraising / Gaming:	(-			
Gross revenue				
Direct expenses				
Net income				
Other income		0		
Total revenue			340,863	
Expenses				
Program services	3:	18,410		
Management and general				
Fundraising				
Total expenses			318,410	
Excess / (deficit)			y-	22,453
Changes	ALIENI"	TOO	DV	-5,568
	JLILIN			
Net Asset / Fund Bal	ance at End of Year		- 1997 - 1988 - 1997 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 1998 - 199	87,309
Reconciliation of Re	venue		Reconciliation of	Expenses
otal revenue per financial statements_		Total expens	ses per financial stateme	
.ess:		Less:		
Unrealized gains		Donated	services	
Donated services	50	Prior yea	ar adjustments	
Recoveries		Losses		
Other		Other		
Plus:		Plus:		
Investment expenses		Investme	ent expenses	
Other _		Other		
Total revenue per return	340,863	Tota	al expenses per return	318,410
		Balance Sheet		
	Beginning	Ending	Differences	
Assets	106,089	127,960	0	
Liabilities	35,665	40,65	1	
Net assets	70,424	87,309	916,8	885
_				
	Miscellaneous In	ormation		
	Amended return		_	
	Return / extended due date	11/15/2	2	

Failure to file penalty