# Form 990-EZ

26

Total liabilities (describe ▶

Net assets or fund balances (line 27 of colu-

#### **Short Form**

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

OMB No. 1545-1150

26

2005

Open to Public Department of the Treasury Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2005 calendar year, or tax year beginning 2005, and ending 31,2005 bialary December C Name of organization Check if applicable: D Employer identification number Please use IRS 62: 1791396 Address change label or Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number print or Initial return type. (615) 210-114 Russell St See Final return Specific City or town, state or country, and ZIP + 4 Amended return F Group Exemption Instruc-Nashville TN 37206-3711 Application pending Number . Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method: X Cash Accrus a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶ H Check ► X if the organization Website: ▶ is not required to attach J Organization type (check only one)— \$\overline{\mathcal{I}}\$ 501(c) ( 3 ) ◀ (insert no.) \$\overline{\mathcal{I}}\$ 4947(a)(1) or \$\overline{\mathcal{I}}\$ 527 Schedule B (Form 990, 990-EZ, or 990-PF) K Check ► if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return. Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 38 of the instructions.) Part I 1 Contributions, gifts, grants, and similar amounts received. . 1 2 2 Program service revenue including government fees and contracts 3 Membership dues and assessments . . 3 4 4 Investment income . . . . . . 5a Gross amount from sale of assets other than inventory . . . . **b** Less: cost or other basis and sales expenses . . . . . . . . . . 5c c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule). Revenue Special events and activities (attach schedule). If any amount is from gaming, check here a Gross revenue (not including \$ \_\_\_\_\_ of contributions **b** Less; direct expenses other than fundraising expenses . . . . . c Net income or (loss) from special events and activities (line 6a less line 6b) 6c 5 7a Gross sales of inventory, less returns and allowances . . . **b** Less: cost of goods sold . . . . . . . . . . . . . . . . c Gross profit or (loss) from sales of inventor, (line 7a less line 7b). 7c N/A 8 Other revenue (describe ▶ Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8). 9 10 Grants and similar amounts paid (attach schadule) . 10 11 Benefits paid to or for members . . . . . . . . . 11 580 12 Salaries, other compensation, and employee benefits 1.21, 12 4, 10%, 12 294 13 Professional fees and other payments to independent contractors 10% 13 130 Occupancy, rent, utilities, and maintenance . . . 40%, . 40% 14 14 15 15 16 16 Total expenses (add lines 10 through 16) 17 17 18 Excess or (deficit) for the year (line 9 less line 17) . . . . . . . 18 Assets ..... 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 Net 20 Other changes in net assets or fund balances (attach explanation) 20 Net assets or fund balances at end of year atmbine lines 18 through 20) . 21 Balance Sheets-If Total assets on line 15, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ. Part II (A) Beginning of year (B) End of year (See page 41 of the instructions.) 22 Cash, savings, and investments 23 Land and buildings . . . . . . . . . . . . 24 Other assets (describe > 24 25 11,873 25 Total assets . . . .

must agree with line 21)

Par	tν	Other Information (Note the attachment requirement		uction \	/, pag	e 14.) <i>(</i> Co	ntinued)	
41 42a	List th The b Locat	ne states with which a copy of this return is filed. ► Tendooks are in care of ► Tendooks are in care of ► Rose Park Drive, Nash vive, Nash vi	Inessec	Telep	ohone r ZIP +	no. ► (.6.6 4 ► .3	7206	-3 075
	At any over a account "Ye See that any If "Ye	y time during the calendar year, did the organization have an i a financial account in a foreign country (such as a bank acco	nterest in or a signant, securities and the securities are securities.	gnature of coount, of the U	or other or other	authority r financial	42b 42c	es No
	and e	inter the amount of tax-exempt interest received or accrued during penalties of perjury, I declare that I have examined this return, including	uring the tax year	<u>r</u>	<u> l</u>	43		knowled
Plea Sign Here	า	and belief, it is true, correct, and complete. Declaration of preparer (other to Signature of officer  Tim Kernell, Treasurer  Type or print name and title.			mation o		arer has any	
Paid		Preparer's signature	Date	Check if self- employer	d <b>►</b> □	Preparer's SS	SN or PTIN (See	Gen. Inst.
Use	arer's Only	Firm's name (or yours if self-employed), address, and ZIP + 4			EIN Phone n	<b>▶</b> :	)	

Form **990-EZ** (200

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB N

200

Name of the c	organization Rejoice Ministri-	above organizations and a	ttached to their Fo	Employer identificat	
Part I	Compensation of the Five High (See page 1 of the instructions. I			ers, Directors, a	- 10
(a) Name	and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
/\/	one				
				H.a.	
Total number	of other employees paid over \$50,000 .				The state of
Part II-A	Compensation of the Five High (See page 2 of the instructions. Lis				
(a) N	lame and address of each independent contracto			of service	(c) Compensation
	one.				
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	er of others receiving over \$50,000 for all services				
Part II-B	Compensation of the Five High (List each contractor who perform firms. If there are none, enter "No	ne services other than p	orofessional ser		dividuals or
(a) N	Name and address of each independent contractor	r paid more than \$50,000	<b>(b)</b> Type	e of service	(c) Compensation
	lone				<u> </u>
			-	 	
			-		
			-		
	per of other contractors receiving over rother services				

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2005

For Paperwork Reduction Act Notice, see the Instructions for Form 990-EZ.

	You may use the worksheet in the instructions						
ale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2003	(c) 2002	(d) 200	)1	(e) Tot.
5	Gifts, grants, and contributions received. (Do		,				
	not include unusual grants. See line 28.).	27,993	17,386	14,040			59,414
<u> </u>	Membership fees received		,				
7	Gross receipts from admissions, merchandise sold or services performed, or furnishing of						·
	facilities in any activity that is related to the				-		
	organization's charitable, etc., purpose						
8	Gross income from interest, dividends,						
	amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and					ŀ	
	unrelated business taxable income (less						
	section 511 taxes) from businesses acquired						
	by the organization after June 30, 1975 .						
9	Net income from unrelated business					1	
	activities not included in line 18			·	-61		
20	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on					1	
	its behalf						
21	The value of services or facilities furnished to						
	the organization by a governmental unit without charge. Do not include the value of						
	services or facilities generally furnished to the	!					
	public without charge			-			
22	Other income. Attach a schedule. Do not					İ	
	include gain or (loss) from sale of capital assets						
	Total of lines 15 through 22	27, 993	17,386	14,040			59,419
:3		<del>, , , , , , , , , , , , , , , , , , , </del>					
	Line 23 minus line 17	27,993	17,386	14,040			59,419
24		27,993 280	17,386	14,040			A STATE OF BUILDING
24 25	Line 23 minus line 17	280	174	140	>	26a	
24 25 26	Line 23 minus line 17	280 a Enter 2% of	174 amount in colum	140 in (e), line 24	▶	26a	A STATE OF BUILDING
24 25 26	Line 23 minus line 17	280 a Enter 2% of the of and amoun	amount in column	140 In (e), line 24 each person (other		26a	1,188
24 25 26	Line 23 minus line 17	280 a Enter 2% of the of and amount action) whose tot	amount in column to contributed by all gifts for 2001 the	140 in (e), line 24 each person (other prough 2004 exce	eded the		A STATE OF BUILDING
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25 26 b c d e f	Enter 1% of line 23  Organizations described on lines 10 or 11:  Prepare a list for your records to show the nar governmental unit or publicly supported organizations shown in line 26a. Do not file this list w Total support for section 509(a)(1) test: Enter !!  Add: Amounts from column (e) for lines: 18  22  Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numerated))  Organizations described on line 12: a For person," prepare a list for your records to show Do not file this list with your return. Enter the (2004)  (2003)  For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year: (2004)	a Enter 2% of me of and amount action) whose tot ith your return. Ene 24, column (ene 24 and divided by or a punts inclust the ame of, and ene standard such actions of such a lived from each per year, that was most the larger amount in the	amount in column to contributed by all gifts for 2001 the inter the total of all of the interest of th	in (e), line 24 each person (other ough 2004 excell these excess ambiguity and the excess amb	vere receive ar from, each of these on line 25 fest with you are more than 1 (2001)	26b 26c 26e 26e 26f ed from the "discontinue difference	37,000 59,419 37,000 22,419 38 a a "disqualification personal pers
24 25 26 b c d e f	Enter 1% of line 23	a Enter 2% of the of and amount action) whose totalth.  a Enter 2% of the of and amount action) whose totalth.  Enter 24, column (example and divided by the ame of, and the ame of, and the arger amount and line 27b totalth.	amount in column to contributed by all gifts for 2001 the inter the total of all of the interest of the	in (e), line 24. each person (other ough 2004 excell these excess amble of the excess amble of the excess amble of these excess amble of these excess amble of the excess amble of these excess amble of the e	vere receiver from, each st with you turn of these turn of these turn of the second street with you  turn of t	26b 26c 26e 26e 26f ed from the "discontinue differed a list for the year return the difference and the year return the year r	1,188 37,000 59,419 37,800 22,419 38 The a "disqualified person your records ear or (2) \$5,0 The After computances (the exc
24 25 26 b c d e f 27	Enter 1% of line 23	a Enter 2% of the of and amount action) whose total are of and amount from line 24, column (example of a punts included by the ame of, and the are of such a straight 11b, as the arger amount from line 27b total armount from line	amount in column to contributed by all gifts for 2001 the inter the total of all of the interest of the	in (e), line 24. each person (other ough 2004 excell these excess ambiguity) each person (other ough 2004 excell these excess ambiguity) each person of (and 17 that we ceived in each year: disqualified person of (and 17 the amount of (b) the amount of (c), enter the second of (c), enter the seco	vere receiver on line 25 from of these counts.  (2001)  s"), prepare on line 25 from of these counts.  (2001)	26b 26c 26d 26e 26f ed from the "discorring the yr return the difference diff	37,000 59,419 37,000 22,419 38 a a "disqualification personal pers
24 25 26 b c d e f 27	Enter 1% of line 23	a Enter 2% of the of and amount action) whose total arrownt from line actors it is a super a super actors arrownt from the arrownt from line actors siviled by	amount in column to contributed by all gifts for 2001 the inter the total of all to the inter the total of all to the inter the total of all total amounts for each mounts for	in (e), line 24. each person (other ough 2004 excell these excess ambiguity) each person (other ough 2004 excell these excess ambiguity) each of the excess ambiguity) except and 17 that we derived in each year: disqualified person of (1) the amount of (1) the amount or (2), enter the second or (3).	vere receiver on line 25 first with you turn of these conditions.	26b 26c 26e 26e 26f ed from the "discontinue differed a list for the year return the difference and the year return the year r	1,188 37,000 59,419 37,800 22,419 38 The a "disqualified person your records ear or (2) \$5,0 The After computances (the exc

Pai	Lobbying Expenditures by Eig (To be completed ONLY by an	ec <b>ting Public</b> ( eligible organi	<b>Charities</b> (See zation that file	page 9 of the d Form 5768)	e instructions.)	-
Chec	k ▶ a ☐ if the organization belongs to an affilia				and "limited contro	l" provisions
	Limits on Lobbyin				(a) Affiliated group totals	(b) To be comple. for ALL electin.
	(The term "expenditures" mea:				101213	organizations
36	Total lobbying expenditures to influence public				<del>-</del>	
37	Total lobbying expenditures to influence a legis			37		<del></del>
38 20	Total lobbying expenditures (add lines 36 and 3			· · · -		
39 40	Other exempt purpose expenditures					<del>                                     </del>
40 41	Lobbying nontaxable amount. Enter the amount			70	7.65645	
71		bbying nontaxa				Jaka :
	Not over \$500,000 20% of			C. C		
	Over \$500,000 but not over \$1,000,000 \$100.00			1 17292336		
	Over \$1,000,000 but not over \$1,500,000 . \$175.3	•		1 1	·ex-	
	Over \$1,500,000 but not over \$17,000,000. \$225.0	•		I Escour	4.76.76	103204
	Over \$17,000,000 \$1,000	,000				
42	Grassroots nontaxable amount (enter 25% ef 3	r 3 41)				
43	Subtract line 42 from line 36. Enter -0- if line 42	is more than lin	e 36			
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lin	e 38	44		
	Caution: If there is an amount on either line 43	or line 44, you n	nust file Form 47	20.	a de la companya de	
	<del></del>	aging Period		1999-000		Georgia and Section (Section )
	(Some organizations that made a section See the instructions for	n 501(h) election	do not have to	complete all of the		oelow.
		Lob	bying Expenditu	ıres During 4-Y	ear Averaging F	Period
	Calendar year (or	(a)	(b)	(c)	(d)	(e)
	fiscal year beginning in) ▶	2005	2004	2003	2002	Total
45	Lobbying nontaxable amount					105
46	Lobbying ceiling amount (150% of line 45(e))	2006				
47	Total lobbying expenditures					
48	Grassroots nontaxable amount					94
49	Grassroots ceiling amount (150% of line 48(e))					
50	Grassroots lobbying expenditures					
F &	rt VI-B Lobbying Activity by Nonelea (For reporting only by organiza			Part VI-A) (Se	e page 11 of t	he instructions.)
	ng the year, did the organization attempt to influent to influence public opinion on a legislative of		_	-	any Yes No	o Amount
а	Volunteers					一 上海上。
b	• • • • • • • • • • • • • • • • • • • •	on in expenses r	eported on lines	c through h.).		
C					• •	
d						
e	, ,				• •	<del></del>
f	Grants to other organizations for lobbying purp				• •	
9	Direct contact with legislators, their staffs, governalities, demonstrations, seminars, conventions					
n i	Total lobbying expenditures (Add lines c through					
•	If "Yes" to any of the above, also attach a sta	noot diving a d	latailed descripti	on of the lobbying	na activities	

Par	t. VI	Information Exempt Or	n Regarding Ti ganizations (Se	ransfers To and Transace e page 12 of the instructior	ctions and Relationships With No ns.)	ncharita	able	
51					following with any other organization descrion 527, relating to political organizations?	bed in se	ction	
а			rs from the reporting organization to a noncharitable exempt organization of:					
<b>u</b>		•		· · · · · · · · · · · · · · · · · · ·	51a	Yes	X	
	٠,				a(i		Ì	
					· · · · · · · · · · · · · · · · · · ·	<del>"                                     </del>		
D		er transactions:				.	X	
					ion , , , , , , , , , , , , b(		<del>^</del> _	
				, -	<u>b</u> (i		X_	
	(iii)	Rental of facilities	, equipment, or oth	erassets			X	
	(iv)	Reimbursement a	rrangements		<u>b(i</u>	<u>v)</u>	$X_{-}$	
	(v)	Loans or loan gua	arantees		<u>b(</u>	1)	<u> </u>	
	(vi)	Performance of se	ervices or members	hip or fundraising solicitations	<u>b(v</u>	/i)	$X_{-}$	
С	Sha	ring of facilities, eq	uipment, mailing lis	sts, other assets, or paid employ	yees <u>c</u>		X	
d	If th	e answer to any of	the above is "Yes,"	complete the following schedule	. Column (b) should always show the fair mark	cet value o	of the	
	goo	ds, other assets, or	r services given by	the reporting organization. If the	ne organization received less than fair markers, other assets, or services received:	t value ir	n any	
(a	)	(b)		(c)	(d)	-		
Line	no.	Amount involved	Name of nonc	haritable exempt organization	Description of transfers, transactions, and sharing	arrangeme	nts	
				- <del> </del>				
							-	
			······································					
				· · · · · · · · · · · · · · · · · · ·				
				<del></del>				
		1		- rent - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
	des	cribed in section 50		other than section 501(c)(3)) or i	e or more tax-exempt organizations n section 527? ▶ □	∕es 🏻	No	
		(a)		(b)	(c)			
		Name of organiz	ation	Type of organization	Description of relationship			
	<del></del>							
			<del></del>			<del></del>		
		\$ <sup>7</sup>		<del></del>				
				<u> </u>				

Part V	Private School Questionnaire (See page 7 of the instructions.)
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		Ä
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:	***		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d		32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			*
а	Students' rights or privileges?	33a	_	
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		<u> </u>
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		2.50
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		i te	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Schec	dule A (Form 990 or 990-EZ) 2005	F	age
Par	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities   (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a b c d	Sale, exchange, or leasing of property?		XXX
e 3a b	Transfer of any part of its income or assets?		XXX
	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?  Do you provide credit counseling, debt management, credit repair, or debt negotiation services?  4a 4b		X X
Par	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)		
5 6 7 8	organization is not a private foundation because it is: (Please check only <b>ONE</b> applicable box.)  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's and state ▶	name	e, cit;
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 17 (Also complete the <b>Support Schedule</b> in Part IV-A.)	'0(b)(1)	(A)(iv
11a	An organization that normally receives a substantial part of its support from a governmental unit or from the general put 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)	blic. Se	ectio
11b 12	☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.) ☐ An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gr from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acq organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)	of its su	oqqu
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and supports of described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(the box that describes the type of supporting organization: Type 1 Type 2 Type	a)(2). (	
	Provide the following information about the supported organizations. (See page 6 of the instructions.)  (a) Name(s; of supported organization(s)  (b) Line num from about the supported organization(s)		

Par	Statement of Program Serv	Accom	plishments (See page 4	2 of the instruction	ons.)		Expens	ses
	is the organization's primary exempt		Teach ballet to a			(Req	uired for	r 501(c)(
Desc	ribe what was achieved in carrying out ribe the services provided, the number o	organiza	ation's exempt purposes. In	n a clear and cond	ise manner,	and	49 (4) 4947(a)( onal for c	(1) trust
28	After school dance instruction	Thro	vehout 2005, more	than 30 c	hildren			
	participated in dance instru	x + p	rectorned multiple 1	thes in chi	with			
	4 community settings				<u></u>		77	, 000
	Grants \$ ) If this		udes foreign grants, check			28a	22	
29 	Summer Intensive Program faight jozz, builet, hi	in In	is program, 20 t		••••••		/	A4 6
<u>(C</u>	Grants \$ ) If this	unt inclu	udes foreign grants, check	chere		29a	6	000
30			•••••					
			•••••	• • • • • • • • • • • • • • • • • • • •	an.			
(0	Grants \$ ) If this		udes foreign grants, check			30a		
	ther program services (attach schedule							
	Grants $$$ ) If this $\varepsilon$		udes foreign grants, check			31a		
	otal program service expenses (add		rough 31a)			32		000
Par	t IV List of Officers, Directors, Trustee	and Key	Employees (List each one eve (B) Title and average	en if not compensate (C) Compensation				<del></del>
	(A) Name and address		hours per week devoted to position	(If not paid, enter -0)	(D) Contributio employee benefit deferred comper	plans &	àcco	Expense ount and allowances
	(See attached)							<u></u>
• • • • • •								
				<u> </u>			L	<del></del>
Par			ent requirement in Gene		<del>- 1 - 2 </del>			Yes No
33	Did the organization engage in any act description of each activity		eviously reported to the IF				33	X
34	Were any changes made to the organiattach a conformed copy of the change	g or gov	eming documents but not	reported to the IF	RS? If "Yes,"		34	X
35	If the organization had income from busines reported on Form 990-T, attach a statemen.		such as those reported on lin your reason for not reporting	·	•	not		
а	Did the organization have unrelated bu	ess gros	s income of \$1,000 or mo	re or 6033(e) notic	e, reporting, a	and		
	proxy tax requirements?						35a	^
þ	If "Yes," has it filed a tax return on For						35b	
36	Was there a liquidation, dissolution, testatement.)		or substantial contraction (	• •	f "Yes," attac	ha	36	X
37a	Enter amount of political expenditures,	ect or inc	direct, as described in the in	nstructions. ► 37	/a N/A			
	Did the organization file Form 1120-P	for this	year?				37b	-  X
38a	Did the organization borrow from, or many such loans made in a prior year ar		ans to, any officer, director aid at the start of the perion			ere	<b>38</b> a	Ž
þ	If "Yes," attach the schedule specified involved	n the line	e 38 instructions and ente		3b N/A			
39	501(c)(7) organizations. Enter:					•		
а	Initiation fees and capital contributions	cluded o	on line 9	· · · · · <del></del>	9a №/A		_	
b	Gross receipts, included on line 9, for	ablic use	of club facilities		Bb NA		_	
40a	501(c)(3) organizations. Enter amount consection 4911 ▶; se					_		
b	501(c)(3) and (4) organizations. Did the orygear or did it become aware of an excess		engage in any section 4958 ansaction from a prior year?			the	40b	
С	Enter amount of tax imposed on organ sections 4912, 4955, and 4958	ation ma		sons during the ye	ear under	·	NA	<b>.</b>
d	Enter amount of tax on line 40c reimb			• • •	_		2//0	·