MENVAL Form 990 ON EXTENSION

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

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

OMB No. 1545-0047

2004

Open to Public Inspection

Depart	ment of	the Treasury ue Service The organization may have to	it trust or private foundation) use a copy of this return to satisfy:	state reporting requiremen	ts.	Inspection
		2004 calendar year, or tax year beginning	, and ending			
		applicable: Please C Name of organization			D Employ	er identification no.
		use IRS			62-1	1836815
\Box	Name c	laber of trail and			E Telepho	one number
\vdash	Initial re		s not delivered to street address)	Room/suite	615	-321-0009
П	Final re	Con 110 mun Mila Dila			F Accour	nting method: X Cash
П		Specific City or town, state or country, and 7/P	+ 4		Accrual	Other (specify)
П		tion pending tions. Goodlettsville	TN 37072-18	332	>	
_	••	Section 501(c)(3) organizations and 4947(a)	(1) nonexempt charitable H a	nd I are not applicable to s	ection 527 orga	nizations.
		trusts must attach a completed Schedule A	(Form 990 or 990-EZ). H(a) Is this a group return fo	or affiliates?	Yes X No
G V	<u>Vebsite</u>	e: ▶ N/A	H(t) If "Yes," enter number	of affiliates 🕨	
		cation type		c) Are all affiliates include	ed?	Yes No
(check o	only one) $\triangleright X$ 501(c) (3) \lt (insert no.)	.947(a)(1) or 527	(If "No," att. a list. See	instr.)	
K C	Check h	nere if the organization's gross receipts are normal	ally not more than \$25,000. H(d	d) Is this a separate return	n filed by an	
Т	The org	anization need not file a return with the IRS; but if the orga	anization received a	organization covered b	y a group ruling	? Yes No
F	orm 99	90 Package in the mail, it should file a return without finan	cial data. Some states	Group Exemption N	lumber 🟲	
r	equire	a complete return.		M Check ▶ 📗 if th	ne organizatio	n is not required
L (Gross r	eceipts: Add lines 6b, 8b, 9b, and 10b to line 12	349,480	to attach Sch. B (Fo	orm 990, 990-	EZ, or 990-PF).
Pa	ırti	Revenue, Expenses, and Changes in Ne	t Assets or Fund Balan	ces (See page 18	of the inst	tructions.)
	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	347,35	55	
-	b	Indirect public support				
1	С	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash \$ 34'	7,355 noncash \$)	1d	347,355
	2	Program service revenue including government fees and	contracts (from Part VII, line 9	3)	2	
1	3	Membership dues and assessments				
Ì	4	Interest on savings and temporary cash investments			4	2,125
	5	Dividends and interest from securitles			. 5	
	6a	Gross rents	1 1			-
	b	Less: rental expenses				
- 1	С	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
R	7	Other investment income (describe) ,		7	
e	8a	Gross amount from sales of assets other	(A) Securities	(B) Other		
e n		than inventory	8a			
u e	b	Less: cost or other basis and sales expenses	8b			
•	С	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
]	9	Special events and activities (attach schedule). If any am	ount is from gaming, check ne	ere 🕨 💹		
	а	Gross revenue (not including \$	_ of			
j		contributions reported on line 1a)	9a			
	b	Less: direct expenses other than fundraising expenses	9b			
	С	Net income or (loss) from special events (subtract line 9th	from line 9a)		9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less: cost of goods sold	10b			
	С	Gross profit or (loss) from sales of inventory (attach sche	dule) (subtract line 10b from lin			
}	11	Other revenue (from Part VII, line 103)			11	
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c	, and 11)		12	349,480
E x	13	Program services (from line 44, column (B))	en e		13	247,758
p l	14	Management and general (from line 44, column (C))			14	44,935
e n	15	Fundraising (from line 44, column (D))			15	· · · · · · · · · · · · · · · · · · ·
s e	16	Payments to affiliates (attach schedule)			. 16	
S	17	Total expenses (add lines 16 and 44, column (A))			17	292,693
A	18	Excess or (deficit) for the year (subtract line 17 from line	12)		18	56,787
N S e a	19	Net assets or fund balances at beginning of year (from li	ne 73, column (A))		19	183,103
e e t t	'20	Other changes in net assets or fund balances (attach ex			20	000 000
•	1 24	Not accets or fund balances at and of year (combine line	a 10 10 and 20\		1 24 1	239 890

6, 80, 9b, 10b, 07-16 of Hart Fill services and dended Grants and allocations (asers respetue) 22	000000000000000000000000000000000000000				uired for section 501(c)(3)	
(A) retail services and allocations (anone shedule) (cash 5		(a)(1) none:	xempt charitable trusts bu	ut optional for others. (Se	e page 22 of the instruction	is.)
65, Bb, Sp, TuD, of 16 of Faff I. Still Services and dendral Canst S	•		(A) Total	(B) Program	(C) Management	(D) Fundraising
Specific assistance to individuals 23	6b, 8b, 9b, 10b, or 16 of Part I.		(A) 10(a)	services	and general	(2) Tonordiang
Cash Specific assistance to Individuals 23	2 Grants and allocations (attach schedule)	1 1				
4 Benefits paid to or for members 24	(cash\$)	22				
Senefish paid to or for members 24	3 Specific assistance to individuals	23				
S Compensation of efficiers, directors, etc. 25 \$ 32, 202 \$ 65, 762 \$ 16, 440 \$ 7 80 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100 \$ 100		24				
26 92,465 80,368 12,097						
Pension plan contributions						
8 Other employee benefits			13,142			
9 Payroll taxes			28,882	23,105		
0 Professional fundraising fees 31 7,200 5,200 2,000 2 Legal fees 31 7,200 5,200 2,000 3 2 Legal fees 32 2 3 3 1,946 1,751 1,95 3 4 Telephone 34 5,778 5,200 578 5 2 2 2 3 3 1,946 1,751 1,95 3 4 Telephone 34 5,778 5,200 578 5 2 2 2 3 3 1,347 1,212 135 5 2 2 2 3 3 2 3 1,347 1,212 135 5 2 2 2 3 3 2 3 1,347 1,212 135 5 2 2 2 3 3 2 3 1,948 7 1,212 135 5 2 2 2 3 3 2 2 3 2 3 2 3 2 3 2 3 2 3			12,409	10,382	2,027	
1 Accounting fees 31 7,200 5,200 2,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000 3 34 5,778 5,200 578 4 7elephone 34 5,778 5,200 578 5,200 578 6 7ectage and shipping 35 1,347 1,212 135 5 7ectage and shipping 36 0 Couparcy 38 7ectage and shipping 38 7ectage 37 9 68 871 997 3 7equipment rental and maintenance 37 9 68 871 997 3 7equipment rental and maintenance 37 9 68 871 997 3 7equipment rental and maintenance 38 1,908 1,908 9 7equipment rental and maintenance 39 7 9 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Professional fundraising fees	30				
2 Legal fees 3 Upplies 3 1,946 1,751 1,95 4 Telephone 3 1,778 5,200 578 5 Postage and shipping 3 5 1,347 1,212 135 5 Postage and shipping 3 5 1,347 1,212 135 5 Postage and shipping 3 6 Secupancy 3 8 8,748 7,873 875 7 Equipment rental and maintenance 3 7 Feurpment rental and maintenance 3 1 968 8,711 97 8 Printing and publications 9 Travel 3 9 Travel 3 9 Travel 3 0 Conferences, conventions, and meetings 4 0 5,109 5,349 760 1 Inforest 4 1 87 87 2 Depreciation, depletion, etc. (statach schedule) 4 2 2,916 2,916 3 3 Other expenses not covered above (itemize):a 4 2 2,916 2,916 3 3 Other expenses not covered above (itemize):a 4 3	1 Accounting fees	31	7,200	5,200	2,000	
33 1,946 1,751 1,95	2 Legal fees	32				
4 Telephone	3 Supplies		1.946	1,751	195	
5 Postage and shipping 35	4 Telephone					
6 Occupancy	5 Postage and shinning					
Total functional expenses (add lines 22 - 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	6 Occupancy	36				
38	7 Equipment rental and maintenance					
19 Travel 39						
Conferences, conventions, and meetings						··
In Interest 2 Depreciation, depletion, etc. (attach schedule) 42 2,916 2,916 42 2,916 43 43 43 43 43 43 43 43 43 43 43 43 43	10 Conference conventions and meetings	-	6.109	5.349	760	··
Depreciation, depletion, etc. (attach schedule) 2						
A3 Other expenses not covered above (itemize):a 43	Degraciation depletion at (attach schedule)	42		2 916		
b See Statement 1			2,710	2,710		
C	b See Statement 1	434	25 586	25 573	1 013	
d		1 1	20,300	23,313	1,013	
43e		·				
Total functional expenses (add lines 22-43), Organizations completing columns (B)-(D), carry these totals to lines 13-15 44 292,693 247,758 44,935	a					
completing columns (8)-(0), carry these totals to lines 13-15 44 292,693 247,758 44,935 Joint Costs. Check if you are following SOP 98-2. Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Tres.* enter (i) the aggregate amount of these joint costs ind (iv) the amount allocated to Program services Ill) the amount allocated to Management and genera8 ind (iv) the amount allocated to Fundraising Partill Statement of Program Service Accomplishments (See page 25 of the instructions.) What is the organization's primary exempt purpose? Program Service Accomplishments (See page 25 of the instructions.) What is the organization's primary exempt purpose achievements in a clear and concise manner. State the number of cleans served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charactable trusts must also enter the amount of grants and allocations to others) (Grants and allocations \$) 2444 (Grants and allocations \$) (Grants and allocations \$) (Grants and allocations \$)						
Vest		1 1	202 (02	247 750	44 035	
Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If "Yes," enter (I) the aggregate amount of these joint costs\$ (ii) the amount allocated to Program services \$ iiii) the amount allocated to Program service \$ iiii) the amount allocated to Fundraising\$ Partill® Statement of Program Service Accomplishments (See page 25 of the instructions.) What is the organization's primary exempt purpose? Reconciling men to God, their families, and society. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) (Grants and allocations \$) 244 b (Grants and allocations \$) 244 (Grants and allocations \$) 244 (Grants and allocations \$) 244		5 44	232,033	247,730	44,333	
FYes,* enter (i) the aggregate amount of these joint costs\$	· 		t-t		i 0	▶ □ ,
Program Service Accomplishments (See page 25 of the instructions.) Part III Statement of Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Program Service Accomplishments (See page 25 of the instructions.) Reconciling men to God, their families, and society. Reconciling men to God, their families and soc			-			Yes A No
Partill Statement of Program Service Accomplishments (See page 25 of the instructions.) What is the organization's primary exempt purpose? ▶ Reconciling men to God, their families, and society. All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (Required for 50 (clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) progranizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) ■ (Grants and allocations \$) 244 ■ (Grants and allocations \$) ■ (Grants and allocations \$) ■ (Grants and allocations \$) ■ (Grants and allocations \$) }				=		i
What is the organization's primary exempt purpose? Reconciling men to God, their families, and society. It organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) propartizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) (Grants and allocations \$) 244 (Grants and allocations \$) (Grants and allocations \$) (Grants and allocations \$)	**************************************					
Reconciling men to God, their families, and society. Required for 50 (derits served, publications issued, etc. Discuss achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) trusts; but optogranizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) (Grants and allocations \$) 244 (Grants and allocations \$)		compile	snments (See pa	age 25 of the inst	ructions.)	·
a See Statement 2 (Grants and allocations \$) 244 (Grants and allocations \$)	► Reconciling men to God, the All organizations must describe their exempt purpose achieved for clients served, publications issued, etc. Discuss achieved	rements in	a clear and concise if	manner. State the nui	1 (4)	Expenses (Required for 501(c)(3) (4) orgs., & 4947(a)(1 trusts; but optional fo
(Grants and allocations \$) 244 (Grants and allocations \$)	3 See Statement 2					
(Grants and allocations \$) 244 (Grants and allocations \$)						
Grants and allocations \$ 244						
Carants and allocations Carants and allo)	244,84
(Grants and allocations \$) d (Grants and allocations \$)	E					
(Grants and allocations \$) d (Grants and allocations \$)						
(Grants and allocations \$) d (Grants and allocations \$)					****	
C			(Grants and al	locations \$)	
(Grants and allocations \$) d (Grants and allocations \$) (Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) 2						
(Grants and allocations \$)						
(Grants and allocations \$) (Grants and allocations \$) (Grants and allocations \$) (Grants and allocations \$) 2			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Grants and allocations \$) Contact the program services (attach schedule) (Grants and allocations \$) 2					;	
Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) 2	ف ا					
(Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) 2						
(Grants and allocations \$) e Other program services (attach schedule) (Grants and allocations \$) 2			-			
e Other program services (attach schedule) (Grants and allocations \$) 2						1
	e Other program services (attach schedule)				1	2,91
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		44, colum			>	247,75

Part IV Balance Sheets (See page 25 of the instructions.)

	lote:	Where required, attached schedules and amounts with		(A) Beginning of year		(B) End of year
т		column should be for end-of-year amounts only.		Beginning or year	45	24,742
	45	Cash-non-interest-bearing		185,956	46	207,991
	46	Savings and temporary cash investments		183,330	40	201,331
			1 1			
- 1	47a	Accounts receivable	47a		******	
1	þ	Less: allowance for doubtful accounts	47b		47c	
l	•					
	48a	Pledges receivable	48a			
	b	Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable	<u>_</u>		49	
- 1	50	Receivables from officers, directors, trustees, and key				
Αl	,	(attach schedule)			50	
s	51a	Other notes and loans receivable (attach				
	J.E	•	51a			
s	ь	schedule) Less; allowance for doubtful accounts			51c	
8	52				52	
		Inventories for sale or use			53	
\$.53	Prepaid expenses and deferred charges			54	
	54	Investments-securities	Cost TWV			
	55a	Investments-land, buildings, and	les l			
		equipment: basis	55a			
	b	Less: accumulated depreciation (attach				
		schedule)	55b		55c	
	56	Investments-other (attach schedule)			56	
	57a	Land, buildings, and equipment: basis	57a 16,096			
	b	Less: accumulated depreciation (attach				
		schedule)	57b 4,432		57c	11,664
	58	Other assets (describe)		58	
	59	Total assets (add lines 45 through 58) (must equal l	ine 74)	185,956	59	244,397
	60	Accounts payable and accrued expenses			60	
L.	61	<u> </u>			61	
a	62	Deferred revenue			62	
þ	63	Loans from officers, directors, trustees, and key emp	ployees (attach			
İ		schedule)			63	
i	64a	Tax-exempt bond liabilities (attach schedule)			64a	
t	b		e)		64b	
i	65	Other liabilities (describe > See Stateme		2,853	65	4,507
e s						
	66	Total liabilities (add lines 60 through 65)		2,853	66	4,507
		anizations that follow SFAS 117, check here ▶ X	and complete lines			
		67 through 69 and lines 73 and 74.				
NF	67		•	183,103	67	239,890
e t		Temporarily restricted			68	
t n	60	Demonstrated			69	
d		anizations that do not follow SFAS 117, check here	▶ and		103	
A s E	1	complete lines 70 through 74.	and			
s a		•		70		
eΙ	1 "	Capital stock, trust principal, or current funds	amont fund		71	
t a	70	Paid-in or capital surplus, or land, building, and equi			72	
s r		Retained earnings, endowment, accumulated incom			1 1 2	
0 6		Total net assets or fund balances (add lines 67 thr	ough os at lines			
rs		70 through 72;	uni lino 24)	183,103	73	239,890
	7.	column (A) must equal line 19; column (B) must eq		185,956		244,397
	74	Total liabilities and net assets / fund balances (ac	iu iiiies oo ahu (s).	1 100,000	1 14	227,331

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

organization and all related organizations, of which more than \$10,000 was provided by the related organizations?

Yes X No

If "Yes," attach schedule-see page 28 of the instructions.

orm 9	990 (2004)	Men	of	Valor		62-1836	6815				Pa	ge 5
					page 28 of the instruct	tions.)					Yes	No
		nization e	engage i	in any activity	not previously reported to the	ne IRS? If "Yes," attach a deta	ailed desc	cription of		.		
	each activity	_								76		X
			ade in t	he organizing	or governing documents bu	it not reported to the IRS?				77		X
	-	-		copy of the c	-							
						or more during the year cover	ed by this	s return?	••	78a		X
					990-T for this year?					78b		
						ction during the year? If "Yes,"						
	statement									79		X
		ization re	lated (o	ther than hy	association with a statewide	or nationwide organization) th	rough co	mmon				
						empt or nonexempt organizat				80a	***************************************	X
				es, trustecs, ne organizatio	.			• • • • • • • • • •				
b	•			•		and check whether it is ex	xemot or	nonex	emnt.			
04.5	Entor direct	and indic	ost polit	ical expendit	. 	S	81a		J., 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			
					for this year?		(4.4.)		•	81b	***********	X
						equipment, or facilities at no	charne			J		_==_
					0					82a		Х
		•		fair rental value		lo this amount as	• • • • • •			02 a		
a					ese items here. Do not includ		82b					
					t II. (See Instructions in Part						X	(2000)
						or returns and exemption appli			N/A	83a	A	
b	_					to quid pro quo contributions?				83b		x
84a					ons or gifts that were not tax					84a	*******	<u> </u>
ь					every solicitation an express	s statement that such contribu	tions		NT / 7			
	or gifts wer								N/A	84b	-	
85						leductible by members?			N/A	85a		
þ					lobbying expenditures of \$2,				N/A	85b	0000000000	100000000
						ough 85h below unless the org	anization					
					the prior year.							
C										-		
d										4		
0						es				-		
f						35e)	85f		27/2	- *****		
g					ection 6033(e) tax on the amo				N/A	85g		
h						n agree to add the amount on					}	
	reasonable	estimate	of dues	s allocable to	nondeductible lobbying and	political expenditures for the f	following	tax	27/2	Ì		
								1	N/A	85h		30000000
86						ed on line 12				4		
b	Gross rece	eipts, inclu	uded on	line 12, for p	ublic use of club facilities		. 86b			4		
87	501(c)(12)	orgs. Ent	ter: a Gr	oss income f	from members or shareholde	rs	. 87a			_		
b	Gross inco	me from	other so	ources. (Do n	ot net amounts due or paid t	o other						
										_		
88	At any time	e during tl	he year,	did the orga	nization own a 50% or greate	er interest in a taxable corpora	ation or					
	partnership	o, or an e	ntity disi	regarded as :	separate from the organization	on under Regulations sections	;					
	301.7701-2	2 and 301	.7701-3	? If "Yes," co	omplete Part IX			• · • · • · · · · · · · · · · · · · · ·		88		X
89a	501(c)(3) c	organizatio	ons. Ent	ter: Amount o	of tax imposed on the organiz	zation during the year under:						
	section 49	11 ▶		0	; section 4912	0 ; section 4955	>		_0			
þ	501(c)(3) a	and 501(c)(4) org:	s. Did the org	janization engage in any sec	tion 4958 excess benefit trans	saction					
	during the	year or di	id it bec	ome aware o	f an excess benefit transacti	on from a prior year? If "Yes,"	attach				į	
				n transaction						89Ь	<u> </u>	X
c	Enter: Amo	ount of ta	x impos	ed on the org	ganization managers or disqu	alified persons during the yea	ır under					
	sections 4			958					->			0
d	Enter: Am	ount of ta	x on line	e 89c, above,	reimbursed by the organiza	tion			▶			0
90a	List the sta	ates with	which a	copy of this r	return is filed None							
b	Number of	f employe	es emp	loyed in the p	pay period that includes Marc	ch 12, 2004 (See instructions.))		90b			6
91	The books					• • • • • • • • • • • • • • • • • • • •			. >			
	Located at	t 🕨					Z	iP+4 ▶				<u>-</u> -
92	Section 49	947(a)(1)	nonexe	mpt charitable	e trusts filing Form 990 in lie	u of Form 1041- Check here						
	and enter	the amou	int of tax	x-exempt inte	rest received or accrued dur	ing the tax year		>	92			

Part VII	Analysis of Income-Proc	ucing Activities	0 (000 pag		1			
Note: Enter gro	oss amounts unless otherwise			1 business income		d by sec. 512,		(E) Related or
ndicated.			(A) Business code	(B) Amount	(C) Exclusion	(D) Amou	int	exempt function
Program s	ervice revenue:	<u> </u>			code			income
a								
b								
c								
d								
θ						 	· · · · ·	
	Medicaid payments							
	contracts from government agenc							
	nip dues and assessments					 		2,12
	n savings and temporary cash inve					 		2,12
	and interest from securities	10						
	income or (loss) from real estate:							
a debt-finan	ced property					+		
n not debt-fi	nanced property					 		
	income or (loss) from personal pr				-	-		
Other inve	estment income	n inventor				 		
	oss) from sales of assets other tha					 	 -	
	ne or (loss) from special events							
	ofit or (loss) from sales of inventory	· · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·	
_	enue: a							
				·				
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W Subtatal /	(add columns (P) (D) and (E))		_					2.12
5 Total (add ote: Line 105 Part VIII	(add columns (B), (D), and (E)) d line 104, columns (B), (D), and (plus line 1d, Part I, should equal t Relationship of Activitie	(E)) the amount on line 1 es to the Accon	2, Part I. nplishmen	t of Exempt P	Purposes	(See page	e 34 of ti	2,12
ote: Line 105 Part VIII	d line 104, columns (B), (D), and (plus line 1d, Part I, should equal t	(E)) the amount on line 1 es to the Accon ch income is reporte	2, Part I. nplishmen a in column (f	t of Exempt P E) of Part VII cont	Purposes	(See page	. •	2,12
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O5 Total (addote: Line 105 Part VIII Line No. V N/A Part X Name, additates	d line 104, columns (B), (D), and (plus line 1d, Part I, should equal to Relationship of Activities Explain how each activity for white of the organization's exempt purpose the organization of the organizat	the amount on line 1: es to the Accom the income is reporte tooses (other than by axable Subsidia (B) Percentage of	2, Part I. nplishmen o in column (f providing fun aries and [t of Exempt F E) of Part VII cont ds for such purpo Disregarded E (C)	Purposes tributed imposes). Entities (S	(See page portantly to the See page (D)	e 34 of the	2,12 ne instructions. shment e instructions.) (E) End-of-year
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Form 8868

(Rev. December 2004)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Automatic 3-Month Extension of Time- Only submit original (no copies needed) Form 990-T corporations requesting an automatic 6-month extension-check this box and complete Part I only All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041. Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile. Type or Name of Exempt Organization Employer identification number print Men of Valor 62-1836815 File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions. filing your 118 Two Mile Pike return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions Goodlettsville TN 37072-1832 Check type of return to be filed (file a separate application for each return): X Form 990 Form 4720 Form 990-T (corporation) Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 he books are in the care of FAX No. ▶ Telephone No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) is for the whole group, check this box ▶ . If it is for part of the group, check this box▶ and attach a list with the names and EINs of all members the extension will cover, I request an automatic 3-month (6-months for a Form 990-T corporation) extension of time until 8/15/05to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2004 or tax year beginning , and ending If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

for payment instructions.

ched	uie A	(Form 990 or 990-EZ) 2004 Men of Valor 62-1836815		ρ	age 2
Pa	r t []]	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atter	ng the year, has the organization attempted to influence national, state, or local legislation, including any mpt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid curred in connection with the lobbying activities \$ (Must equal amounts on line 38, VI-A, or line I of Part VI-B.)	1		x
	Orga orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other inizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of obbying activities.	-		41
2	subs with own	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority er, or principal beneficiary? (If the answer to any question is "Yes." attach a detailed statement explaining the sactions.)			
a	Sale	e, exchange, or leasing of property?	2a	000000000	X
b		ding of money or other extension of credit?	2b		Х
C	Furr	nishing of goods, services, or facilities?	2c		X
d	Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	ļ	X
_	· T	and an advanced of the improved respect to 2			x
ө 3а	Do :	nsfer of any part of its income or assets? you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
b		determine that recipients qualify to receive payments.) you have a section 403(b) annuity plan for your employees?	3a 3b		X
4a		you maintain any separate account for participating donors where donors have the right to provide advice	30		1
		he use or distribution of funds?	4a		x
b		you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X
P	ırt I\	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The	orgar	nization is not a private foundation because it is: (Please check only ONE applicable box.)			
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Ц	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	H	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	L	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, cit	у,		
10	П	and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)	 A)(iv).		
	_	(Also complete the Support Schedule in Part IV-A.)	/\··/·		
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Sect	ion		
441.	\Box	170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11b 12	H	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
-	ш	receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquire	ed		
	_	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations			
		described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See			
		section 509(a)(3).) Provide the following information about the supported organizations. (See page 5 of the instructions.)			
			b) Line	numb	er
		(a) Name(s) of supported organization(s)	•	above	
14	\prod	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)			

Part V. A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting (a) 2003 (b) 2002 (c) 2001 (d) 2000 (e) Total Calendar year (or fiscal year beginning in) Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) Membership fees received 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 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefit and either paid to it or expended on 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 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets . . . 23 Total of lines 15 through 22 Line 23 minus line 17 25 Enter 1% of line 23 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c Add: Amounts from column (e) for lines: 18 26b 22 26d Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." N/ADo not file this list with your return. Enter the sum of such amounts for each year: (2001) (2002) For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess N/Aamounts) for each year: Add: Amounts from column (e) for lines: 27c d Add: Line 27a total. and line 27b total 27d Public support (line 27c total minus line 27d total) Total support for section 509(a)(2) test: Enter amount from line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27g 27h h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003,

prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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) Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws. Yes 29 other governing instrument, or in a resolution of its governing body? 29 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, 30 programs, and scholarships? 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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff? 32a Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? 33b Employment of faculty or administrative staff? 33c Scholarships or other financial assistance? Educational policies? 33e Use of facilities? 33f Athletic programs? Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. 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

Part VI-A Lobbying Expend (To be completed							1 490 0
Check ▶ a if the organization belo							trol" provisions apply.
Limits or	n Lobbying Exper	nditures	- *		(a) Affiliated gro totals		(b) To be completed for ALL electing organizations
	itures" means amounts						
36 Total lobbying expenditures to influenc				36 37			
37 Total lobbying expenditures to influence				38			
38 Total lobbying expenditures (add lines				39			
39 Other exempt purpose expenditures40 Total exempt purpose expenditures (ac				40			
41 Lobbying nontaxable amount. Enter the				40			
If the amount on line 40 is-		ontaxable amount is-					
	• •		7				
	20% of the amount						
Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000	· ·		l l	41			
Over \$1,500,000 but not over \$17,000,000	· •			41			
	•		1 1				
Over \$17,000,000 42 Grassroots nontaxable amount (enter:	25% of line 41)			42	**************	*********	
43 Subtract line 42 from line 36. Enter -0-	if line 42 is more than	line 36		43			
44 Subtract line 41 from line 38. Enter -0-				44			
Caution: If there is an amount on either	er line 43 or line 44, vo	u must file Form 4720.					
		aging Period Und	ler Section	n 501(h	1)		
(Some organizati	ions that made a section			-	•	columns b	elow.
(00000 003000000		or lines 45 through 50					
	I						· ····································
		Lobbying Expe	nditures Du	uring 4-Ye	ar Averaging	g Period	
Calendar year (or	(a)	(b)	(c)	(d))	(e)
fiscal year beginning in)	2004	2003	200	02	200)1	Total
45 Lobbying nontaxable amount					}		
46 Lobbying ceiling amount (150% of							
line 45(e))							
iiie 45(e))							
47 Total lobbying expenditures							
48 Grassroots nontaxable amount							
49 Grassroots ceiling amount (150% of							
line 48(e))							
50 Grassroots lobbying expenditures	<u> </u>						
	ty by Nonelect ing						
					(See page	: 11 of t	he instructions.) N/I
During the year, did the organization atten-				ng any	1,	es No	Amount
attempt to influence public opinion on a le	gislative matter or refe	rendum, through the us	se of:		Ľ		Amount
a Volunteers							
b Paid staff or management (Include	compensation in expen	ises reported on lines of	through h.				
c Media advertisements							
d Mailings to members, legislators, or	the public						
 Publications, or published or broade 	cast statements						
f Grants to other organizations for lob							
g Direct contact with legislators, their	staffs, government offi	cials, or a legislative be	ody		L		
h Rallies, demonstrations, seminars,							
The state of the s		, lectures, or any other	means				
Total lobbying expenditures (Add ling of "Yes" to any of the above, also at	nes c through h.)				🖺		

F		•	•	1 of the instructions.)	ns and Relationships with Noncharita	DIE EXE	mpt	
5 1	Did the repo	orting organization direc	tly or indirect	ly engage in any of the following	with any other organization described in section			
					relating to political organizations?			
a	Transfers fro	om the reporting organi	ization to a no	oncharitable exempt organization	of:		Yes	No
	(I) Cash					51a(i)		X
	(ii) Other	assets			•••••	a(ii)		X
b	Other transa							
	(i) Sales	or exchanges of asset	s with a nonc	haritable exempt organization		b(i)		X
	(ii) Purch	ases of assets from a	noncharitable	exempt organization		b(ii)		X
	(iii) Renta	al of facilities, equipmer	nt, or other as	sets		b(iii)		X
	(iv) Reim	bursement arrangemer	nts			b(iv)		X
						b(v)		X
						b(vi)		X
c						С		X
ď					mn (b) should always show the fair market value o	f the		
_					zation received less than fair market value in any			
	-		•		other assets, or services received:			
	(a)	(b)	1, 01.000 11.00	(c)	(d)			
	Line no.	Amount involved	Name of	noncharitable exempt organization	Description of transfers, transactions, and sharing	ng arranger	ments	
	i							
N	/A					-		
	/		· · · · ·					
	- 		 					
-		 	ļ					
		 	 			-		
		ļ	 					
			<u> </u>					
_			†					
52a	described	= = = = = = = = = = = = = = = = = = = =	Code (other	d with, or related to, one or more than section 501(c)(3)) or in section		▶ 🗌 Y	es [ХN
		(a) Name of organization		(b) Type of organization	(c) Description of relationship			
	N/A							
					·			
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_								
	 -							
_								
								
								
-								
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	,							
				1				

4562 Form

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

2004

Department of the Treasury Internal Revenue Service Name(s) snown on return

► See separate instructions.

Attach to your tax return.

Attachment Sequence No. 67

Identifying number

62-1836815 Men of Valor Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 102,000 1 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed in service (see page 3 of the instructions) 2 410,000 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 3 of the instructions (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2003 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property. Part II Special depreciation allowance for qualified prop. (other than listed prop.) placed in service during the tax year (see pg. 3 of the instructions Property subject to section 168(f)(1) election (see page 4 of the instructions) 15 Other depreciation (including ACRS) (see page 4 of the instructions) MACRS Depreciation (Do not include listed property.) (See page 5 of the instructions Part III Section A 0 17 MACRS deductions for assets placed in service in tax years beginning before 2004 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2004 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property year placed in (business/investment use (e) Convention (f) Method (a) Depreciation deduction period service cnly-see instructions) 3-year property 14,580 5.0 200DB 2,916 b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 yrs. Residential rental S/L 27.5 yrs. MM property MM S/L 27.5 yrs. Nonresidential real MM 39 yrs. S/L property MM Section C-Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L 40-year S/L 40 yrs. MM Summary (see page 8 of the instructions) Part IV Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 2,916 Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr. 23 For assets shown above and placed in service during the current year, 'enter the portion of the basis attributable to section 263A costs

44 DAA

Total. Add amounts in column (f). See page 12 of the instructions for where to report

Men of Valor

Tama 4560 (0004)			Dogo 1
Form 4562 (2004)			Page 2
	(1	· 14. 1. 1	

nm 4562 (4			
Part V	Listed Property (Include automobiles, certain other vehicles, cellular telephones, cert	ain computers,	and
and a supplier of a position of the con-	property used for entertainment, recreation, or amusement.)	·	
	Alabar Carana which face high carrains the standard mileson rate or deducting longs synopes, complete only		

Sect	on A-Der	24a, 24b, columns preciation and Otl	icle for which you ar (a) through (c) of So her Information									omobiles	.)	·		
		ive evidence to supp					Yes	No				vidence			Yes	No
Type (list	(a) e of prop. vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or bas	olher		(e) for depre ness/inve	stment	(f) Recovery period	Me	(g) thod/ vention		(h) Depreciati deductio		El sect	(i) ecled tion 179 cost
25		depreciation allow used more than	ance for qualified							-		-				
20										· · · · · · · · · · · · · · · · · · ·	2	5 [<u> </u>	
26	Property	used more than 5	1 I I	i business u	se (see	l age o	or the ins	struction	15):	T					Т	
			%													
			/4	****		+		····	 	 		<u> </u>	.,.		†	
			%													
27	Property	used 50% or less	in a qualified bu	siness use	(see pag	e 8 of th	e instru	ctions):	4							
					·											
			%							S/L-						
															7	
			%							S/L-						
28		ounts in column (h					21, pag	je 1			2	8				
29	Add am	ounts in column (i), line 26. Enter h	ere and on	line 7, pa	ge 1							-	29	<u> </u>	
									/ehicles							
		section for vehicle d vehicles to your											lina thio	castion	for the	امنطمييم
				2115WEI 11:E (· —				Υ	······································			T		TOT UTO:	
30		isiness/investmen			(a	•	1	b)) (c	· 1		d)	{ ·	e)	1	(f)
	_	he year (do not in ee page 2 of the ir	_		Vehi	ile i	ven	icle 2	Vehi	sie 3	ver	icle 4	ven	icle 5	Ve	hicle 6
31		ee page 2 of the fi ommuting miles dr	*	oor			 		 				 		+	
32		her personal (none			 				 							
33		iles driven during		Sullveil					1				 		 	
		s 30 through 32	•													
34		e vehicle available			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		ing off-duty hours'	•								127	1		1	1	1.,0
35	Was the	e vehicle used prin	narily by a	· · · · · · · · · · · ·												
	more th	an 5% owner or re	elated person? .				-			1						
36	Is anoth	ier vehicle availab	le for personal us	se?												
			Section C-Que	stlons for E	mployer	s Who	Provide	Vehicle	s for Us	by The	ir Emp	loyees				
		questions to dete						B for v	ehicles us	ed by e	mploye	es who a	are			
not	more than	1 5% owners or re	lated persons (se	e page 10 c	of the ins	ruction	s). 									·
	_														Yes	No
37		maintain a written							-			•	•	?		
38		maintain a written							•			employe	es?			
20		ge 10 of the instru		-			director	rs, or 1%	% or more	owners					-	 -
39		treat all use of vel		•												
40		provide more than				ain intoi	mation i	rom you	ur employ	ees abo	ut					ļ
41		of the vehicles, as meet the requirem				domes										+
71		your answer to 3	_	•				•	, .			cuons.)				
P	art VI	Amortizatio		113 163, 1	10 1101 66	inhiere	Section	D IOI III	e covered	vernicie	۵,				10000000000	
<u> </u>		AMOTOLEGO		1								(e)				
		(a)		(b			A	(c)		(d)		Amortiza	ation		(f)	- 4
		Description of cos	ts	Date amo				ortizable mount		Coo		period percent		An	nortizatio this yea	
42	Amortiz	ration of costs that	t begins during yo	our 2004 tax	year (se	e page	11 of the	e instruc	ctions):							
											Τ					
			·	1												
43	'Amorti:	zation of costs tha	t began before yo	our 2004 tax	year								43			(

44

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No. 1545-0047

Employer identification number

2004

Department of the Treasury Internal Revenue Service Name of the organization

Supplementary Information-(See separate instructions.)

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

62-1836815 Men of Valor Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (e) Expense (b) Title and average hours (a) Name and address of each employee paid more (c) Compensation empl. ben. plans & account and other than \$50,000 per week devoted to position deferred comp. allowances NONE Total number of other employees paid over Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (b) Type of service (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 NONE Total number of others receiving over \$50,000 for professional services

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

Schedule A (Form 990 or 990-EZ) 2004

:MENVAL Men of Valor

62-1836815

FYE: 12/31/2004

Federal Statements

Statement 1 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	To Expe	tal nses	Program Service	Mgt & General	Fund- Raising
	\$	\$		\$	\$
Expenses					
Automobile Expense		2,607	2,607		
Bank Charges		223		223	
Contingency Expense		512	512		
Contract Labor		50	50		
Dues & Subscriptions		59	59		
Family Assistance		6,294	6,294		
Flowers & Gifts		45		45	
Inner Change Expense		6,447	6,447		
Van Insurance		1,688	1,688		
Licenses & Permits	•	745		745	
Ministry Materials		3,017	3,017		
Prison Expense		4,135	4,135		
Promotional		764	764		
Total	\$ 2	6,586 \$	25,573	\$ 1,013	\$ 0

Statement 2 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

Adult Prisoners. This program offers evangelism, disciple-ship, family reconciliation, job counseling & assistance, housing assistance, a home church location and follow-up to men and their families.

MENVAL Men of Valor

62-1836815

FYE: 12/31/2004

Federal Statements

Statement 3 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Withheld payroll taxes Bank overdraft	\$ 2,853	\$ 4,507
Total	\$ 2,853	\$ 4,507

MENVAL Men of Valor

62-1836815

FYE: 12/31/2004

Federal Statements

Statement 4 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

<u> </u>	lame	Ac	ddress	·			
	City, Sta	ite, Zip	Title	Average Hours	Compensation	Benefits	Expenses
Carl Carlson		1004 Clearview Dr	r				
	Mt. Juliet TN		Exective Dir		82,202	37,102	0
John B Avery III		6109 Elizabethan	Dr				
_	Nashville TN 37205		Board Chair	•	0	0	0
Stephen Butler		5512 Hillview Dr					
	Brentwood TN 37027		Director		0	0	0
Steve Childress	•	40 Eagle Roost Co			_	_	_
	Waverly TN 37185		Director		0	0	0
Richasr Cook	T	643 Blake Moore I			•	•	^
	Lavergne TN 37086	212 December	Treasurer		0	0	0
J R Davis	Nashville TN 37209	213 Dearpointe	Director	t	0	0	0
Bruce Francis	Nashviile in 3/209	507 Arrowwood Dr	DITECTOL		U	U	U
Bruce Francis	Nashville TN 37220	307 Allowwood Di	Secretary		0	0	0
Jerry Jennings	Madifference in 37220	3410 Richards St	Decreasing		· ·	Ŭ	ŭ
derry commenge	Nashville TN 37215		Director		0	0	0
Granville Lyons		1341 Lunar Dr					
-	Murfressboro TN 372	219	Director		0	0	0
Henry McFadden	,	2010 Galbraith Dr					
	Nashville TN 37215		Director		0	0	0
Overton Thompson	III	3419 Hampton Ave					
	Nashville TN 37215		Director		0	0	0
James A Webb		Freeman Webb Comp				_	_
	Nashville TN 37228	00000	Director		0	0	0
Andrew Wilson	Nachadala mn 25004	96 Sutton Hill Ro			^	^	
	Nashville TN 37204		Director		0	0	0

MENVAL Men of Valor 62-1836815

FYE: 12/31/2004

Federal Statements

Form 990, Part I, Line 1a - Direct Public Support

Description	 Cash	Nonca	sh	 Total
Various Individuals and foundations Other Contributions	\$ 114,849 232,506	\$		\$ 114,849 232,506
Total	\$ 347,355	\$	0	\$ 347,355