. 990

Department of the Treasury Internal Revenue Service

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 2008

Open to Public Inspection

_	heck if ap		Please	1	of organization		on Equal O	portunit	v Group	T		D Employ	er identif	ication numb	er	
	Address	-	use IRS label or		Business As	Laucati	on Equal O	opo<u>rtanic</u>	y Cloup	j J N	۲	62-18608				
=	Name cha	-	print or			PO box if mail	is not delivered	to street a	ddress)	Ro	om/suite	E Telepho				
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Ħ	Amended		instruc- tions.	Nashville		contry, and an		ΓN	3720	12		G Gross r	eceipts \$			58,346
=		n pending			address of pri	nounal officer					H(a) la t	his a group i		ffiliator2	Yes	
پ	· ppilodilo				•	•	U- TN 070	00							-	=
			$\overline{}$			1056, Nashvi			1		H(b) Are	all affiliates		_	Yes_ `	No
1 1	ax-exer	npt status	X 50)1(c) (3) ◄ (ins	ertno) L	4947(a)(1)	or	527			If "No," attac	chalist (s	ee instruction:	3)	
JV	Vebsite	<u>: </u>									H(c) Gro	oup exempti	on number	•		
Кт	ype of or	ganization	X co	orporation	Trust	Association	Other >	•	L	. Year	of forma	ition	M:	State of legal	domicile	TN
P	art I	Sui	mmary													
	1			the organ	nization's mis	ssion or mos	t significant	activities	s				-			
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Ver	2			▶ ☐ ıf	the organiza	ation discont	inued its ope	erations	or dispos	sed o	of more	than 25%	of its a	ssets		
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ţ	risk low and moderate-income populations. EEOG provides custor conferences Check this box if the organization discontinued its operat Number of voting members of the governing body (Part VI, line 1a Number of independent voting members of the governing body (F Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary)												6			3
•	7a					ue from Part		, column	(C)				7a			0
	b	_				ne from Form					_		7b			0
	T					•						Prior Year	•	Cun	rent Year	
Revenue	8	Contribu	utions an	id grants	(Part VIII, lir	ne 1h)							146,272			0
	9	Program	n service	revenue	(Part VIII, I	ne 2g)							0			58,346
9.4	10					(A), lines 3,		_					0			0
č	11			ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1(e)					0			0				
	12		revenue-add lines 8 through 11 (must equal Part 24th polynom (A) line 12)										146,272			58,346
	13	Grants and similar amounts paid (Part IX, column A fines 1-3)										0			0	
	14	Benefits	paid to	or for me	mbers (Part	:IX, co(umn ((A), [ne-4]	Phone	\ <i>\i\</i>	ί.			0			0
ø.	15	Salaries	s, other c	compensa	ation, employ	: IX, column (yee benefits	(Part IX cal	ŋurk(X).	lines 15	(10)			0			32,400
Expenses	16a	Profess	ional fun	idraising f	fees (Part IX	i, column (A)	/ line[X[1][6]) _		IT	7	<u> </u>		0			0
хр	b	Total fur	ndraising	g expense	es (Part IX, d	column (A) column (D) lines 11a-1 ust equal Par	ine 25)	SEAJ.	U 1 29	,860	ļ					
ш	17	Other ex	xpenses	(Part IX,	column (A),	lines 11a-\1	10-175-231	سنيار			ļ		0	 		51,633
	18	Total ex	penses	Add lines	s 13–17 (mu	ist equal Pa	t IX, column	(A), line	25)				0	<u> </u>		84,033
	13	Revenu	e less ex	xpenses	Subtract line	18 from line	3-12						146,272			25,687
sets or											Be	ginning of			of Year	
Sec	20	Total as	sets (Pa	int-X, line							<u> </u>		27,206	1		1,519
Net Ass	21			Park X, lin		44:00 21 5:00	a line 20				<u> </u>		27,206	+		0 1,519
					es Supirar	tine 21 fron	Tillie 20		$\overline{}$				21,200	1		1,515
Г	irt II		nature		I de Nare that I	have examined	this return uncli	iding accor	nnahving s	chedu	les and s	tatements a	nd to the I	hest of my kno	wiedge	
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Ma	v the IF	₹S discu:	ss this re	aturn with	the prepare	er shown abo	ve? (see ins	structions	S)					1 1	Yes	No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

G15-16

Form **990** (2008)

		<u>62-1860835</u>	Page 2
Pa	Int III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission		
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2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes	X No
	If "Yes," describe these changes on Schedule O		_
4	Describe the exempt purpose achievements for each of the organization's three largest program services by	W AVDADGAG	
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount		ď
		ant or grants an	u
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 30,865 including grants of \$ 0) (Revenue \$		
	Save a Student Conference - held annual conference for high school and		
	college students A total of 1209 students have attended the conference		
	since we've began		

4b	(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$;	0)
	•••••		
	•••••		
		• • • • • • • • • • • • • • • • • • • •	
4c	(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$		0)
	/ / / / / / / / / / / / / / / / / / / /		/
	••••••		
<u></u>	Other pregram convece (Decarbe in Schedule O.)		
4d	Other program services (Describe in Schedule O)	0)	
_	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
<u>4e</u>	Total program service expenses > \$ 30,865 (Must equal Part IX, Line 25, column	n (B))	

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	Dan	t IV Checklist of Required Schedules	-		age •
1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A promptles Schedule A promptles Schedule A promptles Schedule C part I be organization engage in indicat or indirect political camping nativities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 Section 501(c)(4), 501(c)(8), and 501(c)(8) organizations. In the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, instonate treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, instonate treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, instonate treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 10 Did the organization more an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V Did the organization negotiation are an adulted financial statement for the year for which it is complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V Did the organization report more than \$15,000 on Part X, column (A), line 1 are than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule D, Part II II X Did the organization report more than \$15,000 on Part IX, column (A), line 1 are far	Fall	TV Checklist of Required Schedules		Yes	No
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II I Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization neopra an amount in Part X, lines 10, 12, 13, 15, or 257 If "Yes," complete Schedule D, Part V V VI, IVIII, IV, or Xe as applicable. 10 the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part XI, XII, and XIII that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part XI, XII, and XIII that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part XII, XII, and XIII that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part XII, XII, and XIII that was prepared in accordance with GAAP? If "Yes," complete Schedule E, Part II bid the organization maintain an office, employees, or agents outside of the U S? 10 bid the organization maintain an office, employees, or agents outside of the U S? 11 bid the organization maintain an office, employees, or agents outside of the U S? 12 bid the organization report on Part IX, column (A), line 3 more than \$1,000 of ragging at grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 12 bid the organization report more than \$1,000 to all or Part VIII, Inter Schedule F, Part II 13 bid the organization r		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
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9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10. Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11. Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 12. Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V 12. Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAPP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12. X 13. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14. X 14. Did the organization maintain an office, employees, or agents outside of the U.S.? If "Yes," complete Schedule E, Part I 14. X 14. X 14. Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II 15. X 15. Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 16. X 17. X 18. Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18. X 17. X 19. Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19. X 19. Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part II 19. X 19. Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part II 19. X 19. Did the organization neport more than \$15,000 on Part IX, column (A), line 19. If "Yes," complete Schedule G, Part II 19. X 19. Did the organization neport more than \$15,000 on Part IX, column (A), line 19. If "Yes,"	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
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Parts VI, VIII, IX, or X as applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part III 16 Did the organization report nor Part IX, column (A), line 3, more than \$5,000 of gargete grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H, Part III 10 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and III 21 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 22 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K If "No," go to question 25 24 Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 25 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during t			10		X
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization as school described in section 170(b)(1)(1)(4)(1)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the U S? 15 Did the organization news aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? "If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IXII, lines at and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 25 Did the organization invest any proceeds of tax-exempt bonds beyond	11		١		,
that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 1 is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 1 is the organization maintain an office, employees, or agents outside of the U S? 1 ib Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part II 1 ib Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II 1 ib Did the organization report one Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 1 ib Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 2 ib Did the organization report more than \$15,000 on Part IXI, line 93? If "Yes," complete Schedule G, Part III 3 ib Did the organization operate one or more hospitals? If "Yes," complete Schedule H 3 ib Did the organization report more than \$15,000 on Part IXI, column (A), line 11e! "Yes," complete Schedule I, Parts I and III 4 ib Did the organization report more than \$5,000 on Part IXI, column (A), line 21 If "Yes," complete Schedule I, Parts I and III 5 ib Did the organization report more than \$5,000 on Part IXI, entime (A), line 21 If "Yes," complete Schedule I, Parts I and III 6 ib Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No," go to question 25 6 b Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 6 b Did the organization answer "Yes," c			11	_	<u> </u>
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16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 21 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 22 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K If "No," go to question 25 23 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 25c Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25d Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27d Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	15		15		l _x
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			<u> 26</u>	\vdash	 ^
	21		27		Y

Form 990 (2008) Education Equal Opportunity Group Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			_
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		×
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
			~~~	

Form **990** (2008)

ı aı	Catemonia Regularing Carol Into Fillingo and Fax Compilarios		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable	ĺ		}
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	}
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
•-	Instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	ļ	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<del>  ^</del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			╁
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			1
	and Financial Accounts			<u> </u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
	Regarding Prohibited Tax Shelter Transaction?	5c		<del> </del>
6a	Did the organization solicit any contributions that were not tax deductible?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b	-	$\vdash$
7_	Organizations that may receive deductible contributions under section 170(c).  Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			1
а	\$75?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		┢
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		<u> </u>	<u> </u>
•	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			l
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f_		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		<b>↓</b>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	l		
_	required?	7h	<del> </del>	<del> </del>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	<b>509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		- <u>-</u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	-		╁ <del>^</del>
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12		[	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			1
а	Gross income from members or shareholders	]		1
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them )	ļ		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<b> </b>	₩
b	If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b	i i	l l	1

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

			Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions			l į
1a	Enter the number of voting members of the governing body  1a 8			l i
b	Enter the number of voting members that are independent 7			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
•	any other officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		v
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Χ	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following			
a	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<del></del>
9a b	Does the organization have local chapters, branches, or affiliates?  If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	9a		<u> </u>
D	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
Sect	ion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	426		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b		_
С	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b		X
40-	Describe the process in Schedule O (see instructions)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	IVa		<del>-^-</del>
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			!
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► TN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s o	nly)		
	available for public inspection. Indicate how you make these available. Check all that apply			
40	Own website Another's website X Upon request	-+		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of intere- policy, and financial statements available to the public	ડા		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	e		
_•	organization ► George Thomas 615-876-02′			
	P O Box 24056, Nashville, TN 37202			

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compe	nsate any office	er, dire	ecto	or, t	rus	tee, o	r ke	ey employee		·
(A)	(B)			(	C)			(D)	(E)	(F)
Name and Trile	Average hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated at employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
George Thomas President	40			х	x			30,000	0	0
	0							0	0	0
	0_							0	0	0
	0							0	0	_ 0
	0							0	0	0
	0							0	0	0
	0				L			0	0	0
	. 0							0	0	0
	0							0	0	c
	0	<u> </u>						0	0	
	0							0	0	c
	0	<u> </u>						0	0	c
	0			ļ				_ 0	0	
	0							0	0	
	0				L			0	0	
	0				L			0	0	
	0								0	

	Section A. Onicers, Directors, Tre		ipioy I	ees,			Jiiesi	CUI			T		
	(A)	(B)	_{B0}	ertion		C) k all ti	hat ap	nh/\	(D)	(E)		(F)	
	Name and title	Average hours per week	or director		Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fi org an	stimated mount of other opensated from the ganizated anizated	of tion tion tion ed
		0							0				0
		0							o				0
		0							0	(			0
		0							0	(			0
		0							0	(			0
		0							0	(			0
		0							0	(			0
		0							0				0
		0							0	(			0
		.0							0	(			0
		0							0	(	<u> </u>		0
		0							0		,		0
		0							0		+		0
<u>1b</u>	Total							<b>&gt;</b>	30,000				0
2	Total number of individuals (including those organization ► 0	ın 1a) who rece	eived	mor	e tha	n \$1	100,0	00 ır	reportable com	pensation from	the		
									•		Y	es	No
3	Did the organization list any <b>former</b> officer, employee on line 1a? If "Yes," complete Sci			•		yee,	or h	ghe	st compensated		3	$\neg$	X
4	For any individual listed on line 1a, is the su the organization and related organizations g	m of reportable	com	pens	atior								
	ındıvıdual										4		Χ
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y								ganization for		5	-	X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest concompensation from the organization	npensated indep	pend	ent c	ontra	acto	rs tha	t red	ceived more thai	n \$100,000 of			
	(A) Name and business a	address							(B) Description of ser	vices	(C Comper		
													0
								ļ					0
								-					0
													<u>0</u> 0
2	Total number of independent contractors (in compensation from the organization	cluding those in		/ho r	ecen	/ed i	more	thar	\$100,000 in				

Part VIII		Statement of Revenue							
			·			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
1		<u> </u>	<del></del>			_	revenue		512, 513, or 514
울 달	1a	Federated campaigns	_	1a	0				1
[ 등	b	Membership dues	L	1b	0				1
S, E	C	Fundraising events	L	1c	0				;
ar B	d	Related organizations	L	1d	0				i
ξ <u>Ε</u>	е	Government grants (contributions)	L	1e	0				1
t s	f	All other contributions, gifts, grants,	and						'
를 를 [		similar amounts not included above	L	1f	0				,
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in li	nes 1a-1	f \$	0				j
္မွ န	h	Total. Add lines 1a-1f			<b>&gt;</b>	0			
ė					Business Code			·	
ě.	2a					58,346	58,346		
ھ ا	b					0			
흲	C					0			
Se l	d					0			
Ē	е					0			
- B	f	All other program service revenue				0			
ď	Я	Total. Add lines 2a-2f			<b>•</b>	58,346			
	3	Investment income (including divide	ends, inte	erest, and	1				
		other similar amounts)			<b>•</b>	0			
	4	Income from investment of tax-exer	npt bond	proceed	ls 🕨	0			
	5	Royalties			<b>•</b>	0			
			(ı) F	Real	(II) Personal				
	6a	Gross Rents							i
	b	Less rental expenses							l
	C	Rental income or (loss)		0	0				
	d	Net rental income or (loss)			<b>•</b>	0			
	7a	Gross amount from sales of	(ı) Sed	curities	(II) Other				
		assets other than inventory		0	.0				
	b	Less cost or other basis	İ						1
		and sales expenses		0	0				
	C	Gain or (loss)		0	0				
	d	Net gain or (loss)				0			
0	8a	Gross income from fundraising							
enue		events (not including \$	<u> </u>				:		
		of contributions reported on line 1c)	)						
ž		See Part IV, line 18		а	0				
Other Reve		Less direct expenses		b	0		· · · · · · · · · · · · · · · · · · ·		
ŏ		Net income or (loss) from fundraisir	_	3	<b>•</b>	0			
	9a	Gross income from gaming activitie	s		_				
	_	See Part IV, line 19		a :	0				
		Less direct expenses		b					
		Net income or (loss) from gaming a	ctivities	ĺ		0			
	ıva	Gross sales of inventory, less returns and allowances		_	_				
	_			a b	0				;
		Less cost of goods sold	nvonton	-		0			
	Ç	Net income or (loss) from sales of it  Miscellaneous Revenue	iiveniory		Business Code				
	11a			_	240000 0048	0			
	b					0			-
	C					0			
	d	All other revenue				0			
	_	Total. Add lines 11a-11d		l	<b>&gt;</b>	0			
	12	Total Revenue. Add lines 1h, 2g, 3	3, 4, 5, 60	d, 7d, 8c.					
		9c, 10c, and 11e		•	<b>&gt;</b>	58,346	58,346	o	0

## Form 990 (2008) Education Equal Opportunity Group Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column	(A) but are not rec	uirea to complete	columns (B), (C), a	na (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	o			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	o			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,			_	
	trustees, and key employees	30,000	10,000	10,000	10,000
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)	1			
	and section 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	2,400	800	800	800
11	Fees for services (non-employees)				
а	Management	0			<del></del> .
þ	Legal	0			
C	Accounting	<u> </u>			· · · · · · · · · · · · · · · · · · ·
d	Lobbying	<u>0</u>	*		······
e f	Professional fundraising services See Part IV, line 17 Investment management fees	0			
g	Other	0			
12	Advertising and promotion				
13	Office expenses	2,685		2,685	<del></del>
14	Information technology	2,000		2,000	· · · · · · · · · · · · · · · · · · ·
15	Royalties	0		-	
16	Occupancy	6,000	2,000	2,000	2,000
17	Travel	7,823		7,823	<u> </u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0			<del> </del>
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				İ
_	5% of total expenses shown on line 25 below ) Save a Student Conference Expenses	19.065	10.005		
a b	Oals Franks and Francisco	18,065 17,060	18,065		17,060
C		17,000	<del></del> -		17,000
d		0			<del></del>
e		0			<del>_</del>
f	All other expenses	0	-		
25	Total functional expenses. Add lines 1 through 24f	84,033	30,865	23,308	29,860
26	Joint Costs. Check here ▶ If following			,	
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising				
	solicitation			j	

Pa	art X	Balance Sheet									
					В	(A) Beginning of year			(E End o		-
	1	Cash-non-interest-bearing				27,206	1				1,519
	2	Savings and temporary cash investments					2				.,0.0
	3	Pledges and grants receivable, net				0					
	4	Accounts receivable, net				0					0
	5	Receivables from current and former officers.	direct	ors. trustees. kev		<u> </u>		<u> </u>			
		employees, or other related parties Complete		•		0	5				0
	6	Receivables from other disqualified persons				<del></del>					_
	_	4958(f)(1)) and persons described in section									
		Part II of Schedule L	•			0	6				0
23	7	Notes and loans receivable, net				0	7				0
Assets	8	Inventories for sale or use					8				
Ä	9	Prepaid expenses and deferred charges					9				
	10a	Land, buildings, and equipment cost basis	10a		0						
	b	Less accumulated depreciation Complete			T						
		Part VI of Schedule D	10b		0	0	10c				0
	11	Investments-publicly traded securities				0	11				0
	12	Investments-other securities See Part IV, lin	e 11			0	12				0
	13	Investments-program-related See Part IV, II	ne 11			0	13				0
	14	Intangible assets					14				
	15	Other assets See Part IV, line 11				0	15				0
	16	Total assets. Add lines 1 through 15 (must e	equal lu	ne 34)		27,206	16				1,519
	17	Accounts payable and accrued expenses					17				
	18	Grants payable					18				
	19	Deferred revenue			19						
	20	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '									0
es	21 Escrow account liability Complete Part IV of Schedule D										
IIti	22	Payables to current and former officers, direct	tors, tr	ustees, key							
Liabilities		employees, highest compensated employees	s, and d	disqualified							
=		persons Complete Part II of Schedule L			<u> </u>	0	22				0
	23	Secured mortgages and notes payable to un	related	third parties		0	23				0
	24	Unsecured notes and loans payable				0					0
	25	Other liabilities Complete Part X of Schedule	D D			0	25			_	0
	26	Total liabilities. Add lines 17 through 25		<del> </del>		0	26				0
"		Organizations that follow SFAS 117, chec			ŀ						
nce		complete lines 27 through 29, and lines 33	3 and 3	34.			07		··		
<u>a</u>	27	Unrestricted net assets					27 28				
<u> </u>	28 29	Temporarily restricted net assets					29				
Š	25	Permanently restricted net assets		$\Box$			20				
or Fund Balances		Organizations that do not follow SFAS 11 and complete lines 30 through 34.	7, ched	ck here ▶							
Net Assets	30	Capital stock or trust principal, or current fund	ds				30	l			
SS	31	Paid-in or capital surplus, or land, building, or		ment fund			31				
Ę,	32	Retained earnings, endowment, accumulated				27,206					1,519
Š	33	Total net assets or fund balances		,		27,206					1,519
	34	Total liabilities and net assets/fund balances				27,206					1,519
Pa	rt XI	Financial Statements and Reporting	9						-		
			. r <del></del>	. —		<u> </u>				Yes	No
1		ccounting method used to prepare the Form 99			ccrual	Other				l	<u> </u>
2		lere the organization's financial statements con		-					2a		X
		lere the organization's financial statements and		· · · · · · · · · · · · · · · · · · ·					2b	Х	-
1		"Yes" to lines 2a or 2b, does the organization h					ignt of	the		J	
_		udit, review, or compilation of its financial stater							2c	X	├
3		s a result of a federal award, was the organizat	ion req	juired to undergo ai	audit or	audits as set forth i	n		_		"
		e Single Audit Act and OMB Circular A-133?							3a		X
	<u>b lf </u>	"Yes," did the organization undergo the require	ed audi	t or audits?					3b		<u> </u>

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

 2008

Open to Public Inspection

Name of the organization **Employer Identification number** 62-1860835 **Education Equal Opportunity Group** Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt 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 acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III-Functionally integrated d | Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the organizations the organization supports (III) Type of organization (Iv) is the organization (v) Did you notify (vi) is the (vil) Amount of (I) Name of supported (II) EIN support (described on lines 1-9 in col (I) listed in your the organization in organization in col organization above or IRC section governing document? (I) organized in the col.(I) of your (see instructions)) US? support? Yes No Yes Yes No 0 0 0 0 0 Total

Par ——	(Complete only if you checked				I)(A)(IV) and	17U(b)(1)(A)(	VI) 
	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants")	_0	0	0			0
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf	0	0	0			0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0			0
4	Total Add lines 1-3	0	0	0	0	0	0
5	The portion of total contributions by each					·	
	person (other than a governmental unit						
	or publicly supported organization)						
	included on line 1 that exceeds 2% of the						
_	amount shown on line 11, column (f)		-				
6	Public support. Subtract line 5 from line 4	ll		1			0
	lon B. Total Support ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	• , • • • • •						
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources	l ol	0	o			0
9	Net income from unrelated business	<u> </u>	J				
•	activities, whether or not the business is						
	regularly carried on						0
10	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV )	0	0	0			0
11	Total support. Add lines 7 through 10	ĮI					0
12	Gross receipts from related activities, etc. (s	ee instructions	)			12	
13	First five years. If the Form 990 is for the o	rganization's fire	st, second, thir	d, fourth, or fiftl	n tax year as a	section 501(c)	(3)
	organization, check this box and stop here						▶_
Sect	ion C. Computation of Public Suppor						
14	Public support percentage for 2008 (line 6, o	column (f) divide	ed by line 11, c	olumn (f))		14	0 00%
15	Public support percentage from 2007 Sched	lule A, Part IV-A	A, line 26f			15	0 00%
16a	33 1/3% support test-2008. If the organiza	ition did not che	ck the box on	line 13, and line	e 14 is 33 1/3%	6 or more, chec	k this box
	and stop here. The organization qualifies as	s a publicly sup	ported organiz	ation			▶ [
b	33 1/3% support test-2007. If the organiza	ition did not che	ck a box on lin	e 13 or 16a, ar	nd line 15 is 33	1/3% or more,	check this
	box and stop here. The organization qualifie	es as a publicly	supported org	anızatıon			▶ _
17a	10%-facts-and-circumstances-test-2008.	If the organizat	tion did not che	eck a box on lin	e 13, 16a, or 1	6b, and line 14	ıs 10%
	or more, and if the organization meets the "f	•					
	the organization meets the "facts-and-circum	nstances" test	The organizati	on qualifies as	a publicly supp	orted organiza	tion ▶ 🗀
b	10%-facts-and-circumstances test-2007.	If the organizat	ion did not che	ck a box on lin	e 13, 16a, 16b	, or 17a, and lir	ne 15 is 10%
	or more, and if the organization meets the "f	facts-and-circun	nstances" test,	check this box	and stop her	re. Explain in F	art IV how
	the organization meets the "facts-and-circum	nstances" test	The organizati	on qualifies as	a publicly supp	orted organiza	tion ▶ 🗌
18	Private foundation. If the organization did not ch	neck a box on line	13. 16a. 16b. 1	7a .or 17b. check	this box and se	e instructions	<b>▶</b> X

Scried	Education Equa	i Opportunity G	Toup			02-186083	5 Page 🗗			
Par	t III Support Schedule for Organiz	ations Desci	ribed in Sect	ion 509(a)(2)	_					
	(Complete only if you checked t	he box on line	9 of Part I.)							
	tion A. Public Support									
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")	0	0	0			0			
2	Gross receipts from admissions, merchandise									
	sold or services performed, or facilities furnished									
	in any activity that is related to the									
	organization's tax-exempt purpose	0	0	. 0			0			
3	Gross receipts from activities that are not an			-						
	unrelated trade or business under section 513						0			
4	Tax revenues levied for the organization's									
	benefit and either paid to or expended on									
-	its behalf	0	0	0			0			
5	The value of services or facilities									
	furnished by a governmental unit to the		ا	•			•			
6	organization without charge <b>Total.</b> Add lines 1-5	0	0 0	O	0	0	0			
_	Amounts included on lines 1, 2, and 3	4				- 0	0			
, 4	received from disqualified persons						0			
b	Amounts included on lines 2 and 3				· <del>-</del>					
_	received from other than disqualified									
	persons that exceed the greater of 1%									
	of the total of lines 9, 10c, 11, and 12 for									
	the year or \$5,000						0			
C	Add lines 7a and 7b	0	0	0	0	0	0			
8	Public support (Subtract line 7c from									
	line 6 )						0			
	tion B. Total Support					<u>.</u>				
	endar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	( <b>d)</b> 2007	(e) 2008	(f) Total			
9	Amounts from line 6	0	0	0	0	0	0			
10a	Gross income from interest, dividends,									
	payments received on securities loans,									
	rents, royalties and income from similar						_			
b	Sources						0			
IJ	Unrelated business taxable income (less section 511 taxes) from businesses									
	acquired after June 30, 1975					i	•			
С	Add lines 10a and 10b	0	0	o	0	0	0			
11	Net income from unrelated business	<u> </u>				<del></del>				
• •	activities not included in line 10b.									
	whether or not the business is regularly									
	carried on						0			
12	Other income Do not include gain or									
	loss from the sale of capital assets									
	(Explain in Part IV)	0	0	0	_		0			
13	Total support. (Add lines 9, 10c, 11,									
	and 12)						0			
14	First five years. If the Form 990 is for the org	anızatıon's first	, second, third	, fourth, or fifth	tax year as a s	section 501(c)(3	3)			
	organization, check this box and stop here						▶□			
Sec	tion C. Computation of Public Support	Percentage								
15	Public support percentage for 2008 (line 8, co		by line 13, co	lumn (f))		15	0 00%			
16	Public support percentage from 2007 Schedu			.,,		16	0 00%			
Sec	tion D. Computation of Investment Inco									
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))  17 0 00%									
18	Investment income percentage from 2007 Sci	18	0 00%							
19a	33 1/3% support tests-2008. If the organization									
	not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization									
b	33 1/3% support tests-2007. If the organization di									
	line 18 is not more than 33 1/3%, check this box ar						▶□			
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									

	990 or 990-EZ) 2008		ual Opportunity			62-	1860835	Page 4
Part IV	Supplemental	Information.	Complete this	part to provide	the explanation	required by Pa	art II. line 10:	
					er additional info			
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