Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2007 Open to Public

Inspection Department of the Treasury Internal Revenue Service December, 2001 , 2007, and ending A For the 2007 calendar year, or tax year beginning D Employer Identification number 83 + 0352243 Check if applicable: Please C Name of organizat use IRS Address change label or Number and street (or P.O. box, if mail is not delivered to street address) Room/suite Name change print or Initial return type. See Termination Specific City or town, state or country, and ZIP + 4 F Group Exemption 20740 Amended return MD Instruc-Number Application pending tions. G Accounting method: 🔽 Cash 🔲 Accrual Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) H Check ▶ M if the organization is not required to attach Website: ▶ Schedule B (Form 990, 990-EZ, or 990-PF). J Organization type (check only one) — 👿 501(c) (🏅) ◀ (insert no.) 🔲 4947(a)(1) or 🔲 527 K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions.) Part Contributions, gifts, grants, and similar amounts received. . . . Program service revenue including government fees and contracts 2 3 Membership dues and assessments . . . 3 Investment income Gross amount from sale of assets other than inventory . . . Gain or (loss) from sale of assets other than inventory. Subtract line 5b from line 5a (attach schedule) Revenue Special events and activities (attach schedule). If any amount is from gaming, check here Gross revenue (not including \$ _____ of contributions Less: direct expenses other than fundraising expenses L 6c c Net income or (loss) from special events and activities. Subtract line 6b from line 6a 7a Gross sales of inventory, less returns and allowances 7с Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a 8 Other revenue (describe > 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8. 403 9 9 10 Grants and similar amounts paid (attach schedule) 10 ~Ø~ 11 11 Benefits paid to or for members - O-12 Expenses 12 Salaries, other compensation, and employee benefits 79 13 Professional fees and other payments to independent contractors 13 20470 14 14 1715 15 Printing, publications, postage, and shipping, 15 Other expenses (describe \ event insurace, 20 cont wood, grascan 20569 16 16 4710 17 Total expenses. Add lines 10 through 16 17 929 18 Excess or (deficit) for the year. Subtract line 17 from line 9 . . . 18 Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 58552 19 0-20 Other changes in net assets or fund balances (attach explanation) . 20 784 Net assets or fund balances at end of year. Combine lines 18 through 20. 21 Balance Sheets-If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ. Part (B) End of year (A) Beginning of year (See page 60 of the instructions.) 67849 <u>57554</u> 22 22 Cash, savings, and investments -0-23 <u>-0 -</u> -0 24 Other assets (describe > 22223 678 Y9 25 Total assets . -0 26 Total liabilities (describe ▶ 28223 67849 Net assets or fund balances (line 27 of column (B) must agree with line 21)

Websenson Co.								
Œ	rt III Statement of Program Service Accom	plishments (See page 60	of the instruction	ns.)	(D-4	Expen		ر اد
Wh	at is the organization's primary exempt purpose?	holding Interestive ei	ints that An	mat att	and	uired for (4) org:	anizatiór	าร
Des	scribe what was achieved in carrying out the organize	ation's exempt purposes. Ir	ı a clear and cond	ise manner,	and)(4947(a) onal for c	(1) trust:	s;
des	cribe the services provided, the number of persons ber	netited, or other relevant into	rmation for each p	rogram title.	Ори			
28	Two internals—ents festivals were interactive antistry and symmetry use mode is a multiple grants were made	1260 12 400 1 POT	5 21025/2	promoting		ĺ		
	interactive antistry and farminity	participation. Total	ottendence	W65		47	107	ř
	1,600, multiple grays were mede	- 10 endre entrys	to CCCats	erthan No		' '	,,,	
	(Grants $\$$ 4233) If this amount incl	udes foreign grants, check	here	. ▶ □	28a			
29								
						1		
	·					ĺ		
	(Grants \$) If this amount inclu		,		29a	ļ		-
30			******					
			~~~~~~~~~~~~~~~~~~					
	(Grants \$ ) If this amount inclu	ıdes foreign grants, check	horo		30a			
	Other program services (attach schedule)				JUL			
		udes foreign grants, check			31a			
	Total program service expenses. Add lines 28a th				32			
D	rt IV List of Officers, Directors, Trustees, and Key	Employees (List each one eve	n if not compensate	d. See page 6		ie instruc	tions.)	
		(B) Title and average	(C) Compensation	(D) Contribution	ns to	(E) E	xpense	
	(A) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit   deferred compen	plans & sation	acco other a	unt and llowances	s
	see statement 1	, · · ·	,					_
				ļ				
		,						
						i		
le <u>man</u> a								
Цē	rtV Other Information (Note the statemen	t requirement in Genera	I Instruction V.)				Yes N	0
33	Did the organization make a change in its activitie	s or methods of conductin	ng activities? If "Y	es," attach a				
	· detailed statement of each change , .					33		
34	Were any changes made to the organizing or government						$ \lambda $	<i>-</i> -
						34		0859
35	If the organization had income from business activities, s				ot			
	reported on Form 990-T, attach a statement explaining y				•	365-563	india lui	
a	Did the organization have unrelated business gros					05-	X	۰,
h	proxy tax requirements?				•	35a	-\frac{\tau}{\times}	
	If "Yes," has it filed a tax return on Form 990-T fo					35b		
36	Was there a liquidation, dissolution, termination, o	r substantial contraction d	uring the year? If	"Yes," attach	n a	200	1	
272	statement.	to the second constitution of the second		11.	•	36		
ora h	Enter amount of political expenditures, direct or ind	irect, as described in the ins	structions. > 13/6	ر_) * ا		1076	*   <u>}</u>	
38a	Did the organization file Form 1120-POL for this y	earr			•	37b		
ooa	the state of the s	ns to, any officer, director,	trustee, or key en	iployee or we	ere	38a	X	
h	any such loans made in a prior year and still unpa If "Yes," attach the schedule specified in the line	io at the start of the penot	a covered by this	return?	•	Jua		
IJ	involved			,				
39	501(c)(7) organizations. Enter:					1 1		
	Initiation fees and capital contributions included or	n line 9						
b	Gross receipts, included on line 9, for public use of	of club facilities	391			1000	386	

Page

Par		Other Information (Note the statement requirement	in General Instr	uction V.) (Continued)	
	section	c)(3) organizations. Enter amount of tax imposed on the orga	nization during the	year under: 955 ►	Yes No
	year of	(3) and (4) organizations. Did the organization engage in any sector did it become aware of an excess benefit transaction from a	prior year? if res,	attacit all explanation	40b ×
	the ve	amount of tax imposed on organization managers or disque ear under sections 4912, 4955, and 4958			
d	Enter	amount of tax on line 40c reimbursed by the organization			-
е	transa	rganizations. At any time during the tax year, was the organi action?		pronibited tax shelter	40e X
41	List th	he states with which a copy of this return is filed.		Talanta and A	1 587-533
42a	The b	he states with which a copy of this return is filed.  books are in care of beautiful Cymil Low  books are in care of beautiful Cymil Low  ted at by 6/4 menchesier Rd #6 51 we	- Spring MD	ZIP + 4 ▶	20901
c	over a account "Yes See the At any of "Yes	ny time during the calendar year, did the organization have a financial account in a foreign country (such as a bank a unt)?  es," enter the name of the foreign country:  the instructions for exceptions and filing requirements for Formy time during the calendar year, did the organization maintages," enter the name of the foreign country:  ion 4947(a)(1) nonexempt charitable trusts filing Form 990-Experiments.	orm TD F 90-22.1.	de of the U.S.?	Yes No 42b    42c
43	and e	enter the amount of tax-exempt interest received or accrued	i guring the tax ye	ar, 43	
Plea Sign	ase 1	Under penalties of peril and belief, it is true, co [519 nature] rer (oth	udlan accompanies s	chedules and statements, and to the don all information of which prepa	rer has any knowledge.
пег			100 11		
		Type or print name and title.		Check if Preparer's SSI	N or PTIN (See Gen, Inst. X)
Paid	- 1	Preparer's signature	Date	self- employed >	V OF PTIM (See Gen. HISL A)
•	arer's Only	Firm's name (or yours		EIN ► i	
	Villy	if self-employed), address, and ZIP + 4		Phone no. ► ( )	
		:			Form <b>990-EZ</b> (2007)

# Schedule of 2007 Playa del Fuego Art Grants

83-0352243

\$4,233.00

Statement 1
Part IV - List of Officers, Directors, Trutee, and Key Employees

Name and Address	<u>Title and</u> avrg hrs/wk	Compens- ation	<u>Employee</u> Benefit Plan	Expense Account
Dave Diller 8905 48th Ave College Park, MD 20740	President 1	0	0	0
Jamíe Lynne Love 8614 Manchester Rd #6 Silver Spring, MD 20901	Treasurer 1	0	O	0
K. Suzanne Henderson 4536 Salem Bottom Road Winfield, MD 21157-7940	Secretary 1	0	0	0
Mike Galleher 16A North Street NE Leesburg, VA 20176	Board Member 1	0	0	0
Leah Marcus 27 Milkwood Ct Owings Mills, MD 21117	Board Member 1	0	0	0
Ben Sarsgard 6105 York Road Baltimore, MD 21212	Board Member 1	0	0	0
Brian Shaw 1522 Elson Street Takoma Park, MD 20912	Board Member 1	0	0	0
Mark Borden 3109 18th St Washington, DC 20010	Board Member	0	0	0
Andy Wing 422 Woodhill Rd Wayne PA 19087	Board Member	0	0	0

### 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 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Name of the organization Play & & &	190 , Inc		Employer identificat	tion number 2243
Compensation of the Five High (See page 1 of the instructions. I	est Paid Employees O ist each one. If there ar	ther Than Offic e none, enter "N	ers, Directors, a lone.")	and Trustees
. (a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE		0.		
	:			
Total number of other employees paid over \$50,000 . Part II-A Compensation of the Five High (See page 2 of the instructions. Lis	est Paid Independent (	Contractors for	Professional Se	rvices
(a) Name and address of each independent contractor			of service	(c) Compensation
A))))	- Paid more than 600,000	(5) 1) po		0
		,		
	:		· · · · · · · · · · · · · · · · · · ·	
Total number of others receiving over \$50,000 for professional services	0			
Part II-B Compensation of the Five Higher (List each contractor who perform firms. If there are none, enter "No	ned services other than p	orofessional serv	Other Services ices, whether inc	lividuals or
(a) Name and address of each independent contractor	r paid more than \$50,000	(b) Туре	of service	(c) Compensation
NONE				Ò
	:			
			,	-
	······································			,
				None and the second second second
Total number of other contractors receiving over \$50,000 for other services	0			

Pari	Statements About Activities (See page 2 of the instructions.)		169	140
	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities   (Must equal amounts on line 38,	1		X
	Part VI-A, or line i of Part VI-B.)			
	Organizations that made an election under section 501(n) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
	Sale, exchange, or leasing of property?	2a		X
а	Sale, exchange, or leasing of property?	2b		$\lambda$
b	Lending of money or other extension of credit?	20		X
c	Furnishing of goods, services, or facilities?	20		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
е	Transfer of any part of its income or assets?	2e		
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		X
· b	Did the organization have a section 403(b) annuity plan for its employees?	3b	-	X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	30	-	X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3 <u>d</u>		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	<u>4a</u>		X
b	Did the organization make any taxable distributions under section 4966?	4b		
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	<u> </u>	
ď	Enter the total number of donor advised funds owned at the end of the tax year	,		<u></u>
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0	
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			

Pa	$\Pi$	Reason for Non-Private	Foundation :	Status (See pages 4	through 8 c	of the instruc	tions.)				
l ce	tify	that the organization is not a priva	te foundation bed	cause it is: (Please check	k only <b>ONE</b> ap	plicable box.)					
5		A church, convention of churches	s, or association of	of churches. Section 170	D(b)(1)(A)(i).						
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)									
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).										
8	A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).										
9		A medical research organization of and state ▶					ne hospital's name, city				
10		An organization operated for the b (Also complete the Support Scheo	-	or university owned or op	perated by a g	overnmental ur	nit. Section 170(b)(1)(A)(iv)				
11a		An organization that normally rece 170(b)(1)(A)(vi). (Also complete the			a governmenta	l unit or from th	ne general public. Section				
i 1b		A community trust. Section 170(b	)(1)(A)(vi). (Also co	omplete the <b>Support Sc</b>	<b>hedule</b> in Pari	t IV-A.)					
12	Þ	An organization that normally receives: (1) more than 33%% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33%% 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). (Also complete the Support Schedule in Part IV-A.)									
13		An organization that is not contrarequirements of section 509(a)(3).					and otherwise meets the				
		☐ Type I ☐ Type II	☐Type I	III-Functionally Integrate	ed [	Type III-Othe	er				
		Provide the following info	rmation about th	e supported organizat	ions. (See pag	je 8 of the inst	ructions.)				
Na	me(	(a) s) of supported organization(s)	(b) Employer identification	(c) Type of organization	ls the si organizati	d) upported on listed in	(e) Amount of support				
			number (EIN)	(described in lines 5 through 12 above or IRC section)	organi	oporting zation's documents?					
			:		Yes	No					
,			·								
		,									
			:								
ota	·		* * * * * * * * * * * * * * * * * * *			🛌					
4		An organization organized and op	erated to test for	public safety. Section 5	09(a)(4). (See	page 8 of the i	nstructions.)				

Par	t IV-A Support Schedule (Complete only You may use the worksheet in the instructions	y if you checked for converting fr	a box on line 10, om the accrual to	11, or 12.) <b>Use</b> of the cash method	cash method of d of accounting.	accounting.
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do					
	not include unusual grants. See line 28.) .					
16	Membership fees received					
17	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	58832	43783	208-77	19149	14264
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	-0"	-0-	-01	-0-	-0-
19	Net income from unrelated business activities not included in line 18	-0-	-0~	10	-0-	10
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.	-0-	~o~.	-0-	-0-	-0-
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.	-0-	-0-	-0-	-0-	-0-
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	-0-	-0-	-0-	-0-	142651
23	Total of lines 15 through 22	58732	43783	20881	19149	19000
24	Line 23 minus line 17	0	0	10	101	10
25	Enter 1% of line 23	588	438	209	191	
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in colum	nn (e), line 24 .	▶ <u>26a</u>	
b	Prepare a list for your records to show the nar governmental unit or publicly supported organiamount shown in line 26a. Do not file this list was	zation) whose tot vith your return. E	al gifts for 2003 t inter the total of a	hrough 2006 exce Il these excess an	eeded the nounts > 26b	
C	Total support for section 509(a)(1) test: Enter I				▶ 26c	
đ	Add: Amounts from column (e) for lines: 18		19		▶ 26d	
e f	Public support (line 26c minus line 26d total)  Public support percentage (line 26e (numer	ator) divided by	line 26c (denom	inator))		%
27		or amounts inclu- the name of, and	ded in lines 15, I total amounts re	16, and 17 that v ceived in each ye year:	were received fro	om a "disqualified
	(2006) (2005)	4/5-	(2004)	-0-	(2003) *** (	<i>)</i> -
. b	For any amount included in line 17 that was rece show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and	ived from each pe year, that was mo 5 through 11b, as I the larger amour	rson (other than "or ore than the larger well as individuals at described in (1)	of (1) the amount .) Do not file this li or (2), enter the s	on line 25 for the ist with your retui sum of these diffe	year or (2) \$5,000. rn, After computing
	amounts) for each year (2006) (2005)	-O-	(2004)	-O-	(2003)	- O
					(2000)	
С	Add: Amounts from column (e) for lines: 15 17 142 5 1 20 Add: Line 27a total 20	- O-	16		<b>&gt;</b> 27c	(4264)
đ	Add: Line 27a total	and line 27b tota	al <u>-0</u> -		. ▶ 27d	-0-
е		otaľ)			. 27e	(4264)
f	Total support for section 509(a)(2) test: Enter a	amount from line	23, column (e) .	. ► 27f 12	12631	G0 (53)
g h	Public support percentage (line 27e (numer Investment income percentage (line 18, col	ator arvided by	mic Ell (denomi	matory,	, , , <u></u>	99,473% 9000 %
28	Unusual Grants: For an organization describ prepare a list for your records to show, for ea description of the nature of the grant. Do not	ach year, the nan	ne of the contribu	utor, the date and	d amount of the	grant, and a brief

Œ	Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
00	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32 a	Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	14,725 A752	(Allery see
b		32b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d		32d	1 (0)	183.48
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		,
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
. h	Other extracurricular activities?	33h	601	
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
-		95, 29		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		<del></del>
, b	Has the organization's right to such aid ever been revoked or suspended?	34b		(5) (4) (6)
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pandiscrimination? If "No." attach an explanation	0.5		

and the same	To be completed ONLY by a	<b>lecting Public</b> n eligible orgai	: <b>Charities</b> (Senization that fi	ee page 11 led Form 5	of th 768)	ne instruc	ctions	:.)
Che	eck ▶ a ☐ if the organization belongs to an affil					nd "limited	control	" provisions apply.
	<b>Limits on Lobby</b> (The term "expenditures" mea					(a) Affiliated total	group	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public		·		36			organizations
37	Total lobbying expenditures to influence a legi				37			
38	Total lobbying expenditures to trilidence a regi				38			
39	Other exempt purpose expenditures		39	<u></u>				
40	Total exempt purpose expenditures (add lines		40					
41	Lobbying nontaxable amount. Enter the amou				70		Contract Contract	
•		obbying nontax						
	Not over \$500,000 20%							Control Colored
	Over \$500,000 but not over \$1,000,000 . \$100,							
	Over \$1,000,000 but not over \$1,500,000 . \$175,				41	T-CT-S VALORATED STREET	*4111001159091	
	Over \$1,500,000 but not over \$17,000,000. \$225,							
		0,000						
42	Grassroots nontaxable amount (enter 25% of				42	WAY WITH GET SHANGES CONSISTED		
43	Subtract line 42 from line 36. Enter -0- if line 4	12 is more than li	ne 36		43			
44	Subtract line 41 from line 38. Enter -0- if line 4				44			
•				5		6000000		
	Caution: If there is an amount on either line 4:	3 or line 44, you i	must file Form 4	720.				
	(Some organizations that made a section See the instructions to	or lines 45 throug	do not have to gh 50 on page 1  bying Expendit	3 of the instri	ıctio	ns.)		
	Calendar year (or	(a)	(b)	(a)		(-1)		(-)
	fiscal year beginning in) ►	2007	(b) 2006	(c) 2005		<b>(d)</b> 2004	1	(e) Total
				-		200		, vica
45	Lobbying nontaxable amount		1	1				
46								
46	Lobbying ceiling amount (150% of line 45(e))							
47	Lobbying ceiling amount (150% of line 45(e))  Total lobbying expenditures							
	Total lobbying expenditures							
47 48	Total lobbying expenditures						6.0	
47	Total lobbying expenditures							
47 48 49 50	Total lobbying expenditures							
47 48 49 50 Pai	Total lobbying expenditures	tions that did i	not complete l				of the	e instructions.)
47 48 49 50 <b>2</b> al	Total lobbying expenditures	tions that did rence national, sta	not complete l	lation, includi				
47 48 49 50 Pari	Total lobbying expenditures	tions that did rence national, stater or referende	not complete late or local legis um, through the	lation, includi			No	e instructions.) Amount
47 48 49 50 Purir atter	Total lobbying expenditures	tions that did rence national, stater or referended in the control of the control	not complete ate or local legis um, through the	lation, includi use of:	ng ai		No X	
47 48 49 50 During atter a b	Total lobbying expenditures	ence national, stater or referendence	not complete ate or local legisum, through the	lation, includi use of:	ng ai		No X X	
47 48 49 50 Pal During atter a b c	Total lobbying expenditures	ence national, stater or referended in the control of the control	not complete ate or local legis um, through the	lation, includi use of:	ng ai		No X X	
47 48 49 50 Pal Durit atter a b c d	Total lobbying expenditures	ence national, stater or referended in the control of the control	not complete ate or local legis um, through the	lation, includi use of:	ng ai		No X X	
47 48 49 50 During atter a b c c d e	Total lobbying expenditures	ence national, stater or referended in the control of the control	not complete ate or local legisum, through the	lation, includi use of:	ng ai		No X X	
47 48 49 50 During atter a b c d e f	Grassroots nontaxable amount	ence national, stater or referended in expenses referenced in the expenses referenced in the expenses referenced in the expenses referenced in the expense i	not complete ate or local legis um, through the eported on lines	lation, includi use of: c through h.)	ng ai		No X X	
47 48 49 50 During atter a b c d e f g	Grassroots nontaxable amount	ence national, stater or referended in the control of the control	not complete ate or local legis um, through the comported on lines comported on lines comported on lines comported on lines	lation, includi use of: c through h.)	ng ai		No X X	
47 48 49 50 During atter a b c d e f	Grassroots nontaxable amount	ence national, stater or referendal on in expenses re cents ones ernment officials, speeches, lecture	not complete ate or local legis um, through the comported on lines comported on lines comported on lines comported on lines	lation, includi use of:	ng ai		No X X	

Pal	YE V		n Regarding rganizations (S	Transfers To See page 14 of	and Transa the instruction	actions and ons.)	Relationships	With	None	chari	table
51	Dic 50	I the reporting orga I(c) of the Code (ot	anization directly of the than section to the than section to the them.	or indirectly enga 501(c)(3) organiza	age in any of the	e following with	any other organiz	ation de	escribe	d in s	ection
а	Tra	insfers from the rep	orting organization	n to a noncharita	able exempt ord	anization of:	,		•	Yes	No
								. [	51a(i)		X
	(ii)	Other assets .						. [	a(ii)		X
b	Oth	ner transactions:						•			``
	(i)	Sales or exchang	es of assets with	a noncharitable	exempt organiza	ation		ł	b(i)	ĺ	X
*	(ii)	Purchases of ass	ets from a nonch	aritable exempt o	rganization .			•	b(ii)		X
	(iii)		s, equipment, or o	ther assets .					b(iii)		X
	(iv)	Reimbursement a	arrangements .						b(iv)		X X X
	(v)							. [	b(v)		X
	(vi)	Performance of s	ervices or membe	ership or fundraisi	ing solicitations			' [	b(vi)		X
C		aring of facilities, ec						. [	С		7
đ	If th	ne answer to any of	the above is "Yes	" complete the fo	llowing schedule	Column (b) sh	ould always show t	he fair r	narket :	value	of the
	900	ds, other assets, o saction or sharing a	or services diven l	ov the reporting (	organization if t	the organization	received loce than	fair m	arket v	alue i	n any
(8	-	(b)		(c)			(d)				
Line	по.	· Amount Involved	Name of no	ncharitable exempt o	rganization	Description of	transfers, transactions	, and sha	iring arra	ngeme	nts
				:							
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	1						· · · · · · · · · · · · · · · · · · ·				
	ause	ne organization direction so pribed in section 50 es," complete the f	rito) or the Code (	lother than sectio	r related to, on on 501(c)(3)) or i	e or more tax-en section 527?	exempt organization	ons	Yes	A	No
		(a)	alia m	(b			(c)	•			
		Name of organiza	ation	Type of org	ganization		Description of relat	ionship			
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