## 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 private foundations)

2013

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Program service revenue including government fees and contracts  3 Membership dues and assessments  4 Investment income  5a Gross amount from sale of assets other than inventory  b Less: cost or other basis and sales expenses  5b   5b   5c   5c   5c   5c   5c   5c	A	For the	2013 calenda	ar year, or tax year beginning January 1, 2013 , 2013, and ending	Dece	mber 31,	, 20	13				
Number and street of P.O. box, if mail is not delivered to street address)   Room/suite   E Telephono number   14611 Blackburn Road   1	В	Check if ap	oplicable:	C Name of organization D	Emplo	yer identifica	ation numbe	r				
Instruction   Institution		Address c	hange	Christalis, Inc.	83-0427806							
Terminated   Application providing   Application   Applica				Number and street (or P.O. box, if mall is not delivered to street address)  Room/suite  E	Teleph	none number						
Annexidate return   Annexidate return   Annexidate return   City or forwn, state or province, country, and zill or foreign postal coop   F Group Exemption   Annexidate return   Annexidate   F Group Exemption   F Group Exemp						240-772	1131					
Appellations providing   Burtonsville, MD 20866   Accountal Other (specify)   Image:   Appellation   Accountal Other (specify)   Image:   Accountable (specify)   Image:   Image:   Accountable (specify)   Image:   Imag	$\equiv$			City or town, state or province, country, and ZIP or foreign postal code	Group	p Exemption	)					
Accounting Methics:	-		CONTRACTOR CONTRACTOR	Burtonsville, MD 20866	Numb	ber 🕨						
Website:	G	Account	ting Method:		eck ►	if the o	rganization	is <b>not</b>				
K Form of organization:	1. 1	<b>Vebsite</b>	www.				_					
K Form of organization:	J T	ax-exen	npt status (che	eck only one) -   501(c)(3)  501(c) ( )   (insert no.)  4947(a)(1) or  527 (Fo	rm 99	0, 990-EZ, d	or 990-PF).					
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I												
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check If the organization used Schedule O to respond to any question in this Part I I J 49,600  1 1 Contributions, gifts, grants, and similar amounts received 1 1 49,600  2 Program service revenue including government fees and contracts 3 Membership dues and assessments 3 3 Membership dues and assessments 4 4 Investment income 4 4 Investment income 4 4 Investment income 4 4 Investment income 5 Investment income 6 Investment Investment Income 6 Investment Inc	LA	Add lines	s 5b, 6c, and	7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total as	ssets							
Check if the organization used Schedule O to respond to any question in this Part I    Contributions, gifts, grants, and similar amounts received	(Pa	rt II, colu	umn (B) belov	v) are \$500,000 or more, file Form 990 instead of Form 990-EZ	20	\$						
1   Contributions, gifts, grants, and similar amounts received.   2   Program service revenue including government fees and contracts   3   3   3   3   3   3   3   3   3	Р	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the ins	struct	tions for F	Part I)					
1   Contributions, gifts, grants, and similar amounts received.   2   Program service revenue including government fees and contracts   3   3   3   3   3   3   3   3   3			Check if	the organization used Schedule O to respond to any question in this Part I	2 2	2 2 2	2 2 2	1				
## A membership dues and assessments ## A Investment income ## Sa Gross amount from sale of assets other than inventory ## b Less: cost or other basis and sales expenses ## c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) ## C Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) ## C Gaining and fundraising events ## a Gross income from gaming (attach Schedule G if greater than \$15,000) ## Basis income from fundraising events (not including \$ of contributions from fundraising events (rom fundraising events of the sum of such gross income and contributions exceeds \$15,000) ## C Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) ## A Gross sales of inventory, less returns and allowances ## B Less: cost of goods sold ## C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) ## D Less: cost of goods sold ## C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) ## D C Other revenue (describe in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar amounts paid (list in Schedule O) ## D Grants and similar		1						49,600				
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Sa Gross amount from sale of assets other than inventory   Sa   Sb   Sb   Sc   Sc   Sc   Sc   Sc   Sc		3	Membersh	ip dues and assessments		3						
b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) c Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) b Gross income from gaming (attach Schedule G if greater than \$15,000) c Less: direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events line 6c) c Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) d Net revenue (describe in Schedule O) fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue describe in Schedule O) fortal expenses and other payments to independent contractors fortal free payments (add lines 6a) fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 fortal expenses. Add lines 10 through 16 fortal expenses (describe in Schedule O) fortal expenses (deficit) for the year (Subtract line 17 from line 9) fortal expenses of deficit) for the year (Subtract line 17 from line 9) fortal expenses of deficit fortal expenses at end of year. Combine lines 18 through 20 fortal expenses of fund balances at end of year. Combine lines 18 through 20 fortal expenses from the assets or fund balan		4			1	4						
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6 Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000). b Gross income from fundraising events (not including \$		b	Less: cost	or other basis and sales expenses		1083						
a Gross income from gaming (attach Schedule G if greater than \$15,000).  b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000).  c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c).  7a Gross sales of inventory, less returns and allowances		С										
\$15,000).    Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000).    C Less: direct expenses from gaming and fundraising events   6c   8,631     Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c).   7a Gross sales of inventory, less returns and allowances   7a     b Less: cost of goods sold   7b     C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)   7c     8 Other revenue (describe in Schedule O)   8     9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8   9   57,146     10 Grants and similar amounts paid (list in Schedule O)   10   52,597     11 Benefits paid to or for members   11     12 Salaries, other compensation, and employee benefits   12     13 Professional fees and other payments to independent contractors   13   680     14 Occupancy, rent, utilities, and maintenance   14     15 Printing, publications, postage, and shipping   15   1,619     16 Other expenses (describe in Schedule O)   16   1,650     17 Total expenses. Add lines 10 through 16   17   56,536     18 Excess or (deficit) for the year (Subtract line 17 from line 9)   18   610.00     19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   12,667.00     20 Other changes in net assets or fund balances (explain in Schedule O)   20   21   12,146.00     21 Net assets or fund balances at end of year. Combine lines 18 through 20   21   12,146.00		6	Gaming and fundraising events									
sum of such gross income and contributions exceeds \$15,000).  c Less: direct expenses from gaming and fundraising events d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)  7a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)  8 Other revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8  10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 Excess or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 12,667.00 20 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 12,146.00		а	Gross inco	-0								
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Iline 6c)   7a   Gross sales of inventory, less returns and allowances   7a   7b		С	Less: direc	t expenses from gaming and fundraising events 6c 8	,631	C-177						
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C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7a	Gross sale	s of inventory, less returns and allowances 7a		77:1						
8 Other revenue (describe in Schedule O)		b	Less: cost	of goods sold		7.6						
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8  10 Grants and similar amounts paid (list in Schedule O)  11 Benefits paid to or for members  12 Salaries, other compensation, and employee benefits  13 Professional fees and other payments to independent contractors  14 Occupancy, rent, utilities, and maintenance  15 Printing, publications, postage, and shipping  16 Other expenses (describe in Schedule O)  17 Total expenses. Add lines 10 through 16  18 Excess or (deficit) for the year (Subtract line 17 from line 9)  Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  19 Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 18 through 20  10 Start Revenue.  10 Start Revenue.  11 Definition of the year (Subtract line 17 from line 9)  12 Salaries, other compensation, and employee benefits  12 Definition of the year (Subtract line 17 from line 9)  13 Grants and similar amounts paid (list in Schedule O)  14 Definition of the year (Subtract line 17 from line 9)  15 Total expenses. Add lines 10 through 16  16 Definition of the year (Subtract line 17 from line 9)  18 Grants and similar amounts paid (list in Schedule O)  19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  19 12,667.00  20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 through 20 Definition of the year (Subtract lines 18 thr		С			<b>1</b> 0	7c						
10   Grants and similar amounts paid (list in Schedule O)   10   52,587     11   Benefits paid to or for members   11     12   Salaries, other compensation, and employee benefits   12     13   Professional fees and other payments to independent contractors   13   680     14   Occupancy, rent, utilities, and maintenance   14     15   Printing, publications, postage, and shipping   15   1,619     16   Other expenses (describe in Schedule O)   16   1,650     17   Total expenses. Add lines 10 through 16   17   56,536     18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   610.00     19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   12,667.00     20   Other changes in net assets or fund balances (explain in Schedule O)   20     21   Net assets or fund balances at end of year. Combine lines 18 through 20   21   12,146.00		8	Other reve	nue (describe in Schedule O)	*6	8						
Benefits paid to or for members  Salaries, other compensation, and employee benefits  Professional fees and other payments to independent contractors  Occupancy, rent, utilities, and maintenance  Printing, publications, postage, and shipping  Other expenses (describe in Schedule O)  Total expenses. Add lines 10 through 16  Excess or (deficit) for the year (Subtract line 17 from line 9)  Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 18 through 20  11  12  13  680  14  15  16  17  16  18  610.00  18  610.00  19  18  610.00  19  19  12,667.00  20  21  12,146.00			Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶	9		57,146				
Salaries, other compensation, and employee benefits  12					ē.	10	Į.	52,587				
Professional fees and other payments to independent contractors  13 680  14 Occupancy, rent, utilities, and maintenance  15 Printing, publications, postage, and shipping  16 Other expenses (describe in Schedule O)  17 Total expenses. Add lines 10 through 16  18 Excess or (deficit) for the year (Subtract line 17 from line 9)  19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  20 Other changes in net assets or fund balances (explain in Schedule O)  21 Net assets or fund balances at end of year. Combine lines 18 through 20  21 12,146.00		11										
16 Other expenses (describe in Schedule O)	es	12				12						
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18   Excess or (deficit) for the year (Subtract line 17 from line 9)						16		1,650				
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	_		Total expe	nses. Add lines 10 through 16		17		56,536				
21 Net assets or fund balances at end of year. Combine lines 18 through 20 P1 12,146.00	ţ		Excess or	(deficit) for the year (Subtract line 17 from line 9)		18		610,00				
21 Net assets or fund balances at end of year. Combine lines 18 through 20 P1 12,146.00	Se	19	Net assets			5113						
21 Net assets or fund balances at end of year. Combine lines 18 through 20 P1 12,146.00	As					19	12,	667.00				
21 Net assets or fund balances at end of year. Combine lines 18 through 20 P1 12,146.00	é	1										
	_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	<b>&gt;</b>	21	12,	146.00				

Pa	rt II Balance Sheets (see the instructio	ns for Part II)				
	Check if the organization used Sched	fule O to respond to a	ny question in this	Part II		[
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[	12,667.00	22	11,749.0
23	Land and buildings			,2	23	
24	Other assets (describe in Schedule O)				24	397.0
25	Total assets			12,667.00	25	12,146.0
26	Total liabilities (describe in Schedule O)	3 3 3 3 3 3 5 5			26	
27	Net assets or fund balances (line 27 of colu			12,667.00	27	12,146.00
Par	t III Statement of Program Service Acc					Expenses
	Check if the organization used Sched			Part III 🗹	(Red	quired for section
Wha	t is the organization's primary exempt purpose'	Please see attachm	ent - schedule O			(c)(3) and 501(c)(4)
as n	cribe the organization's program service accor neasured by expenses. In a clear and concis ons benefited, and other relevant information fo	e manner, describe th	of its three largest p e services provided	rogram services, d, the number of	494	anizations and section 7(a)(1) trusts; optional others.)
28						
	Please see Schedule O	**************************	*****	***************************************		
	***************************************	***************************************		*******************************		
	(Grants \$ ) If this amo	unt includes foreign gr	ants, check here .		28a	52,58
29		**************************		***************************************		
		***************************************	********************			
		***************************************		***************************************		
	(Grants \$ ) If this amo	unt includes foreign gr	ants, check here .	10 10 10 P	29a	<u> </u>
30	***************************************	***************************************		***************************************		
	***************************************	***************************************		***************************************		
	***************************************	***************************************				
		unt includes foreign gr			30a	
31	Other program services (describe in Schedule	O) at a, at a at a	w w s se se se se se			
	(Grants \$ ) If this amo	unt includes foreign gr	ants, check here .		31a	
32	Total program service expenses (add lines 2	8a through 31a) 🔒 👊	s in in the last test test	sat has the Let 🕨	32	52,58
Par					nstruc	ctions for Part IV)
	Check if the organization used Sched	lule O to respond to a	ny question in this	Part IV		🗸
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)		0	Estimated amount of other compensation
Shali	ni David, Founder & CEO					
		30	C	8	0	0
Eliza	beth David, Founder	2.5.1-161				
		1	C	:	0	0
Evon	David, Co-Founder	-1 =			1	
		40	0		0	0
Selw	yn T. David					
		1			0	0
Sneh	al Pulivarti, Secretary	0-00			Ť	
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		55.57				
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			I .	II.	- 11	

	90-EZ (2013)			age 3
Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	-	<b>V</b>
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
00	detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		V
•	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	1		
	change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	-		_
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		1
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a	-81	120 3 3 3	APA I
b	Did the organization file Form 1120-POL for this year?	37b		/
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		11111	18113
h		38a		<b>V</b>
39	If "Yes," complete Schedule L, Part II and enter the total amount involved	- 3.00		
а	Initiation fees and capital contributions included on line 9	<b>USA</b>	Mala	134/3
b	Gross receipts, included on line 9, for public use of club facilities		10010	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1985	1.58	EX.
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		15.57	70
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		/
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	336	96	
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			10.5
الم		186	7.15	
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		11.2	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter	(36)	100	
	transaction? If "Yes," complete Form 8886-T	40e	19091	1
41	List the states with which a copy of this return is filed ▶	100		ν
42a		301 79	2 8263	3
	Located at ► 11105 Scaggsville Road, Laurel, MD ZIP + 4 ►		723	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	1	
	If "Yes," enter the name of the foreign country: ▶ Uganda			SAM'Y
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank		20.6	
	and Financial Accounts.	TEST III	MOV.	
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	<b>/</b>	
43	If "Yes," enter the name of the foreign country: ► Kesese, Uganda  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			- 171
40	and enter the amount of tax-exempt interest received or accrued during the tax year	8 8	23	▶ ✓
	43		Yes	none
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	-77	100	140
	completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	377	ne y	
	completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			Thu
4.5	explanation in Schedule O	44d		/
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	- Alle Land	1
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		You	
	Form 990-EZ (see instructions)	45h	/ The Co	1

40	U:4 +F	e organization engage, directly or inc	directly in political a	ampaign activities o	n behalf of	or in opposit	Yes No	0
		e organization engage, directly of inc ididates for public office? If "Yes," co						/
Part V	- /	Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51. Check if the organization used Sch	must answer que				e tables for lines	
48 49a b 50	year? Is the Did th If "Yes Comp emplo	ne organization engage in lobbying a lf "Yes," complete Schedule C, Part organization a school as described in e organization make any transfers to s," was the related organization a second the stable for the organization's byees) who each received more than Name and title of each employee	II section 170(b)(1)(A)(i) an exempt non-chaction 527 organization five highest compen	i	e Schedule Education? ther than of anization. If (d) Heal contribution	ficers, direct	47 48 49a 49b ors, trustees and ke, enter "None."	/ / key
		, ,	devoted to position	(Forms W-2/1099-MISC		s, and deferred pensation	other compensation	_
				,				
*********		NONE						
************								
51	Comp	number of other employees paid over plete this table for the organization's 000 of compensation from the organ	s five highest compe	ensated independer	nt contracto	ors who each	received more th	an
	(a)	Name and business address of each independent	ent contractor	(b) Type of se	ervice	(c)	Compensation	
		NONE						
-		***************************************						
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .	. ▶			
		ne organization complete Schedule A kempt charitable trusts must attach a					► ☑ Yes ☐ No	
Under pe	enalties rect, an	of perjury, I declare that I have examined this red d complete. Declaration of preparer (other than	eturn, including accompar officer) is based on all info	lying schedules and state ormation of which prepare	ments, and to t er has any know	the best of my ki vledge.	nowledge and belief, it is	3
0:		- Lily Whim				- 4	9,2014	
Sign Here		Signature of officer  Selwyn T. David, Chief Financial Of	ffice		L	Date		
-		Type or print name and title  Print/Type preparer's name	Preparer's signature		Date		PTIN	
Paid Prepa	arer	т по туре ргерагег в папте	,			Check self-emplo	) if	
Use (		Firm's name			F	irm's EIN ▶	Ti.	
		Firm's address ▶		Procedure of Proce	F	hone no.		
May th	ie IRS	discuss this return with the preparer	shown above? See	instructions	H N N H	20 20 20	▶ ☐ Yes ☐ No	

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

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

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or Form 990-EZ. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

**Employer identification number** 

Par	t Reason f	or Public Cha	rity Status (All orga	nization	s must c	omplete	this pa	rt.) See i	nstructio	ons.		
			ation because it is: (Fo				•					
1	_	•	hes, or association of		_		_		1			
2			170(b)(1)(A)(ii). (Attac			oa 111 <b>000</b>		(~)( ')(/')(	<b>,</b> -			
3			spital service organiza		-	saction :	170(6)/1)	(A)/iii)				
4			on operated in conjun						0(b)(1)(A)	(iii). Ent	er the	
	hospital's nan	ne, city, and stat	e:									
5		on operated for <b>b)(1)(A)(iv).</b> (Com	the benefit of a colle plete Part II.)	ge or uni	versity o	wned or	operated	l by a go	vernment	tal unit	descri	bed in
6	☐ A federal_stat	e or local gover	nment or government	al unit de	scribed in	section	170(b)(1	I)(A)(v).				
7	☐ An organization	on that normally	receives a substantia (A)(vi). (Complete Par	al part of					nit or fron	n the ge	eneral	public
8	☐ A community	trust described i	n <b>section 170(b)(1)(A</b>	<b>)(vi).</b> (Cor	mplete Pa	art II.)						
9	☐ An organization	on that normally	receives: (1) more that	an 33¹/₃%	6 of its su	apport fro	om contr	ibutions,	members	ship fee	s, and	gross
	receipts from	activities related	d to its exempt funct	ions-sul	bject to d	certain ex	xceptions	s, and (2)	no more	e than 3	33¹/3%	of its
			ent income and unre after June 30, 1975. Se						n 511 ta	x) from	busir	esses
10	·	=	d operated exclusively						4).			
11			nd operated exclusive							or to c	arrv o	ut the
• •			olicly supported organ									
			describes the type of									
	a ☐ Type I								Non-funct	_	ntegra	ted
_	• •	• • • • • • • • • • • • • • • • • • • •	that the organization		-	_				-	_	
C	, .	,	ers and other than on			•		, ,		•		
	or section 509	_	oro and other than on	0 01 111010	publicly	oupport	ou organ	124110110	200011000	111 0001		<b>Ο(α)(1)</b>
f			a written determination	on from	the IRS t	that it ic	a Type	I Type	II or Tyr	اء ااا م	ınnorti	na
•		check this box						i, iypc				
a	•		he organization acce			ntributio	n from a	nv of the				· ⊔
g	following pers		ne organization acce	pica any	girt or ot	Jiitiibatio	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ary Or tric	,			
	• •		ndirectly controls, eit	her alone	or toget	her with	nersons	describe	d in (ii) ar	nd	Yes	No
			ody of the supported							11g	_	1
			on described in (i) abo							11g(	-	
		-	a person described in							11g(i		
h			ion about the support							1190	,	
	Name of supported	(ii) EIN	(iii) Type of organization	1	organization		ou notify	()	ls the	(vii) Amo	unt of m	onotoni
(1)	organization	(II) LIN	(described on lines 1–9		sted in your		nization in		tion in col.		unt of m support	Onetary
			above or IRC section	governing	document?	col. (i)	of your port?		zed in the S.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
(A)												
(A)												
(B)												
(C)												
(D)												
(E)												
<del></del> /												
										I		

Part II

	(Complete only if you checked the Part III. If the organization fails to				-	•	alify under
Secti	on A. Public Support	1 7				,	
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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.						
	on B. Total Support	( ) 0000	# > 0040		( 1) 00 ( 0	( ) 0040	(A T
_	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the	•	,			12 ear as a section	n 501(c)(3)
	organization, check this box and stop her						
Secti	on C. Computation of Public Suppor	t Percentag	e				
14	Public support percentage for 2013 (line 6			1, column (f))		14	%
15	Public support percentage from 2012 Sch					15	%
16a	331/3% support test—2013. If the organization qual						heck this . ► □
b	331/3% support test—2012. If the organic check this box and stop here. The organi					15 is 33 <sup>1</sup> / <sub>3</sub> %	or more, . ▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ets the "facts-	and-circumsta	nces" test, ch	eck this box ar	nd <b>stop here.</b> E	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part IV how the organization m supported organization	ion meets the eets the "facts	facts-and-ci	rcumstances" tances" test. T	test, check th	nis box and <b>st</b>	op here.
18	Private foundation. If the organization did	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

<u> </u>	if the organization rails to quality	under the te	ists listed beit	Jw, piease co	Jilipiele Fait	11.)	
	on A. Public Support		T				
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise						
2	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support			T	1	Γ	
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources .						
	•						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	•						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
	9 ,						
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,		-				
10	and 12.)						
14	First five years. If the Form 990 is for the	e organizatio	ı's first secon	l d third fourth	or fifth tax v	 	n 501(c)(3)
17	organization, check this box and <b>stop he</b> l	•					* , , ,
Secti	on C. Computation of Public Suppor						, _
15	Public support percentage for 2013 (line 8			3 column (f))		15	%
16	Public support percentage from 2012 Sch					16	<del></del>
	on D. Computation of Investment Inc					1	70
17	Investment income percentage for 2013 (I			v line 13. colu	mn (f))	17	%
18	Investment income percentage from 2012			-		18	<del></del>
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2013. If the organi						
	17 is not more than 33 <sup>1</sup> /3%, check this box						
b	33 <sup>1</sup> / <sub>3</sub> % support tests—2012. If the organiz	_	=	-		=	_
~	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this b						
20	Private foundation. If the organization di		_		· · · · · ·		_

Schedule A (I	Page 4 (Form 990 or 990-EZ) 2013					
Part IV	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; a Part III, line 12. Also complete this part for any additional information. (See instructions).	and				

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

**Employer identification number** 

Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization						
	☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	☐ 527 political organization						
Form 990-PF	☐ 501(c)(3) exempt private foundation						
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3) taxable private foundation						
	covered by the <b>General Rule</b> or a <b>Special Rule.</b> '), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General Rule							
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or one contributor. Complete Parts I and II.						
Special Rules							
under sections 509(at the greater of <b>(1)</b> \$5	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33½ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, I contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, oses, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
during the year, con not total to more tha year for an exclusive	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, tributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did an \$1,000. If this box is checked, enter here the total contributions that were received during the <i>ely</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> nization because it received <i>nonexclusively</i> religious, charitable, etc., contributions of \$5,000 or r						

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Part I	Contributors (see instructions). Use duplicate cop	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.							
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		  \$\$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		   \$						
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		   \$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		  \$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received					
		\$						

Employer identification number

Name of organization

				I .		
Part III	Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organization that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)					
	Use duplicate copies of Part III if add	litional space is need	ded.			
(a) No. from Part I	(b) Purpose of gift (c) Use of gift			(d) Description of how gift is held		
		(e) Transf	er of gift			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transfer					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(a) Transf				
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		/a\ T f	or of aift			
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee					

## **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Schedule B (Form 990, 990-EZ, or 990-PF), such as legislation enacted after the schedule and its instructions were published, go to <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

**Note.** Terms in **bold** are defined in the *Glossary* of the Instructions for Form 990.

## **Purpose of Schedule**

Schedule B (Form 990, 990-EZ, or 990-PF) is used to provide information on contributions the organization reported on:

- Form 990-PF, Return of Private Foundation, Part I, line 1;
- Form 990, Return of Organization Exempt from Income Tax, Part VIII, Statement of Revenue, line 1: or
- Form 990-EZ, Short Form Return of Organization Exempt from Income Tax, Part I, line 1.

#### **Who Must File**

Every organization must complete and attach Schedule B to its Form 990, 990-EZ, or 990-PF, unless it certifies that it does not meet the filing requirements of this schedule by taking the following action:

- Answering "No" on Form 990, Part IV, Checklist of Required Schedules, line 2, or
- Checking the box on
  - Form 990-EZ, line H, or
  - Form 990-PF, Part I, Analysis of Revenue and Expenses, line 2.

See the separate instructions for these lines on those forms.

If an organization is not required to file Form 990, 990-EZ, or 990-PF but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

### **Accounting Method**

When completing Schedule B (Form 990, 990-EZ, or 990-PF), the organization must use the same accounting method it checked on Form 990, Part XII, *Financial Statements and Reporting*, line 1; Form 990-EZ, line G; or Form 990-PF, line J.

## **Public Inspection**

• Schedule B is open to public inspection for an organization that files Form 990-PF.

- Schedule B is open to public inspection for a section 527 political organization that files Form 990 or 990-EZ.
- For all other organizations that file Form 990 or 990-EZ, the names and addresses of contributors are not required to be made available for public inspection. All other information, including the amount of contributions, the description of noncash contributions, and any other information, is required to be made available for public inspection unless it clearly identifies the contributor.

If an organization files a copy of Form 990 or 990-EZ, and attachments, with any state, it should not include its Schedule B (Form 990, 990-EZ, or 990-PF) in the attachments for the state, unless a schedule of contributors is specifically required by the state. States that do not require the information might inadvertently make the schedule available for public inspection along with the rest of the Form 990 or 990-EZ.

See the Instructions for Form 990, 990-EZ, or 990-PF for information on telephone assistance and the public inspection rules for these forms and their attachments.

## Contributors to be Listed on Part I

A contributor (person) includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations. In addition, section 509(a)(2), 170(b)(1)(A)(iv), and 170(b)(1)(A)(vi) organizations must also report **governmental units** as contributors.

#### **Contributions**

Contributions reportable on Schedule B (Form 990, 990-EZ, or 990-PF) are contributions, grants, bequests, devises, and gifts of money or property, whether or not for charitable purposes. For example, political contributions to section 527 political organizations are included. Contributions do not include fees for the performance of services. See the Instructions for Form 990, Part VIII, line 1, for more detailed information on contributions.

## **General Rule**

Unless the organization is covered by one of the *Special Rules* below, it must list in Part I every contributor who, during the year, gave the organization, directly or indirectly, money, **securities**, or any other type of property that total \$5,000 or more for the organization's **tax year**. In determining the total amount, separate and independent gifts of less than \$1,000 can be disregarded.

Include each contribution included on Form 990, Part VIII, line 1, in calculating a contributor's total contributions and determining whether that contributor must be reported on Schedule B under this General Rule (or one of the following Special Rules, if applicable). For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property in Part VIII, line 1, it must include the value of that contribution in calculating whether the contributor meets the General Rule (or one of the Special Rules, if applicable), even if the organization did not receive the property during the tax year.

## **Special Rules**

Section 501(c)(3) organizations that file Form 990 or 990-EZ. For an organization described in section 501(c)(3) that meets the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and not just the 10% support test (whether or not the organization is otherwise described in section 170(b)(1)(A)), list in Part I only those contributors whose contribution of \$5,000 or more during the tax year is greater than 2% of the amount reported on Form 990, Part VIII, line 1h, or Form 990-EZ, line 1.

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on Form 990, Part VIII, line 1h. The organization is only required to list in Parts I and II of its Schedule B each person who contributed more than the greater of \$5,000 or 2% of \$700,000 (\$14,000) during the tax year. Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization was greater than \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For contributions to these social and recreational clubs, fraternal beneficiary and domestic fraternal societies, orders, or associations that were not for an exclusively religious, charitable, etc., purpose, list in Part I each contributor who contributed \$5,000 or more during the tax year, as described under *General Rule*, earlier.

For contributions to a section 501(c)(7), (8), or (10) organization received for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals (sections 170(c)(4), 2055(a)(3), or 2522(a)(3)), list in Part I each contributor whose aggregate contributions for an exclusively religious, charitable, etc., purpose were more than \$1,000 during the tax year. To determine the more-than-\$1,000 amount, total all of a contributor's gifts for the tax year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that listed an exclusively religious, charitable, etc., contribution in Part I or II must also complete Part III to provide further information on such contributions of more than \$1,000 during the tax year and show the total amount received from such contributions that were for \$1,000 or less during the tax year.

However, if a section 501(c)(7), (8), or (10) organization did not receive total contributions of more than \$1,000 from a single contributor during the tax year for exclusively religious, charitable, etc., purposes and consequently was not required to complete Parts I through III with respect to these contributions, it need only check the third *Special Rules* box on the front of Schedule B and enter, in the space provided, the total contributions it received during the tax year for an exclusively religious, charitable, etc., purpose.

## **Specific Instructions**



Do not attach substitutes for Schedule B or attachments to Schedule B with information on contributors. Parts I, II,

and III of Schedule B may be duplicated as needed to provide adequate space for listing all contributors. Number each page of each part (for example, Page 2 of 5, Part II).

Part I. In column (a), identify the first contributor listed as No. 1 and the second contributor as No. 2, etc. Number consecutively. In column (b), enter the contributor's name, address, and ZIP code. Identify a donor as "anonymous" only if the organization does not know the donor's identity. In column (c), enter the amount of total contributions for the tax year for the contributor listed.

In column (d), check the type of contribution. Check all that apply for the contributor listed. If a *cash contribution* came directly from a contributor (other than through payroll deduction), check the "Person" box. A cash contribution

includes contributions paid by cash, credit card, check, money order, electronic fund or wire transfer, and other charges against funds on deposit at a financial institution.

If an **employee's** cash contribution was forwarded by an employer (indirect contribution), check the "Payroll" box. If an employer withholds contributions from employees' pay and periodically gives them to the organization, report only the employer's name and address and the total amount given unless you know that a particular employee gave enough to be listed separately.

Check the "Noncash" box in column (d) for any contribution of property other than cash during the tax year, and complete Part II of this schedule. For example, if an organization that uses the accrual method of accounting reports a pledge of noncash property on Form 990, Part VIII, line 1, it must check the "Noncash" box and complete Part II even if the organization did not receive the property during the tax year.

For a section 527 organization that files a Form 8871, Political Organization Notice of Section 527 Status, the names and addresses of contributors that are not reported on Form 8872, Political Organization Report of Contributions and Expenditures, do not need to be reported in Part I if the organization paid the amount specified by section 527(j)(1). In this case, enter "Pd. 527(j)(1)" in column (b) instead of a name, address, and ZIP code; but you must enter the amount of contributions in column (c).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. In column (b), describe the noncash contribution received by the organization during the tax year, regardless of the value of that noncash contribution. Note the public inspection rules discussed earlier.

In columns (c) and (d), report property with readily determinable market value (for example, marked quotations for securities) by listing its fair market value (FMV). If the organization immediately sells securities contributed to the organization (including through a broker or agent), the contribution still must be reported as a gift of property (rather than cash) in the amount of the net proceeds plus the broker's fees and expenses. See the Instructions for Form 990, Part VIII, line 1g, which provide an example to illustrate this point. If the property is not immediately sold, measure market value of marketable securities registered and listed on a recognized securities exchange by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and

asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When FMV cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution subject to an outstanding debt, subtract the debt from the property's FMV. Enter the date the property was received by the organization, but only if the donor has fully given up use and enjoyment of the property at that time.

The organization must report the value of any **qualified conservation contributions** and contributions of **conservation easements** listed in Part II consistently with how it reports revenue from such contributions in its books, records, and financial statements and in Form 990, Part VIII, Statement of Revenue.

For more information on noncash contributions, see the instructions for Schedule M (Form 990), Noncash Contributions.

If the organization received a partially completed Form 8283, Noncash Charitable Contributions, from a donor, complete it and return it so the donor can get a charitable contribution deduction. Keep a copy for your records.

Original (first) and successor donee (recipient) organizations must file Form 8282, Donee Information Return, if they sell, exchange, consume, or otherwise dispose of (with or without consideration) charitable deduction property (property other than money or certain publicly traded securities) within 3 years after the date the original donee received the property.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions for use exclusively for religious, charitable, etc., purposes during the tax year must complete Parts I through III for each person whose gifts totaled more than \$1,000 during the tax year. Show also, in the heading of Part III, the total of gifts to these organizations that were \$1,000 or less for the tax year and were for exclusively religious, charitable, etc., purposes. Complete this information only on the first Part III page if you use duplicate copies of Part III.

If an amount is set aside for an exclusively religious, charitable, etc., purpose, show in column (d) how the amount is held (for example, whether it is commingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

## **SCHEDULE 0** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number

Schedule O (Form 990 or 990-EZ) (2013)		Page 2
Name of the organization	Employer identification number	
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#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Schedule O (Form 990 or 990-EZ), such as legislation enacted after the schedule and its instructions were published, go to www.irs.gov/form990.

#### **Purpose of Schedule**

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Do not use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

#### Who Must File

All organizations that file Form 990 and certain organizations that file Form 990-EZ must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization is not required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

## **Specific Instructions**

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return is not filed by the due date (including any extension granted), attach a separate statement giving the reasons for not filing on time. Do not use this schedule to provide the latefiling statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

**Group return.** If the organization answered "Yes" to Form 990, line H(a), but "No" to line H(b), use a separate

attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Do not use** this schedule. See the Instructions for Form 990, *I. Group Return.* 

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

- 1. Part III, Statement of Program Service Accomplishments.
  - a. "Yes" response to line 2.
  - b. "Yes" response to line 3.
  - c. Other program services on line 4d.
- 2. Part V, Statements Regarding Other IRS Filings and Tax Compliance.
  - a. "No" response to line 3b.
  - b. "Yes" or "No" response to line 13a.
  - c. "No" response to line 14b.
- 3. Part VI, Governance, Management, and Disclosure.
- a. Material differences in voting rights among members of the governing body in line 1a.
- b. Delegation of governing board's authority to executive committee.
  - c. "Yes" responses to lines 2 through 7b.
- d. "No" responses to lines 8a, 8b, and 10b.
  - e. "Yes" response to line 9.
- f. Description of process for review of Form 990, if any, in response to line 11b.
  - g. "Yes" response to line 12c.
- h. Description of process for determining **compensation** in response to lines 15a and 15b.
- i. If applicable, in response to line 18, an explanation as to why the organization checked the "Other" box or did not make any of Forms 1023, 1024, 990, or 990-T publicly available.
- j. Description of public disclosure of documents in response to line 19.
- 4. Part VII, Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors.
- a. Explain if reporting of compensation paid by a related organization is provided only for the period during which the related organization was related, not the entire calendar year ending with or within the tax year, and state the period during which the related organization was related.
- b. Description of reasonable efforts undertaken to obtain information on compensation paid by related organizations, if the organization is unable to obtain such information to report in column (E).
- 5. Explanation for Part IX, Statement of Functional Expenses, line 11g (other fees

for services), including the type and amount of each expense included in line 11g, if the amount in Part IX, line 11g, exceeds 10% of the amount in Part IX, line 25 (total functional expenses).

- 6. Explanation for Part IX, Statement of Functional Expenses, line 24e (all other expenses), including the type and amount of each expense included in line 24e, if the amount on line 24e exceeds 10% of the amount in Part IX, line 25 (total functional expenses).
- 7. Part XI, Reconciliation of Net Assets. Explain any other changes in net assets or fund balances reported on line 9.
- 8. Part XII, Financial Statements and Reporting.
- a. Change in accounting method or description of other accounting method used on line 1.
- b. Change in committee oversight review from prior year on line 2c.
  - c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions:

- 1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.
- a. Description of other revenue, in response to line 8.
- b. List of grants and similar amounts paid, in response to line 10.
- c. Description of other expenses, in response to line 16.
- d. Explanation of other changes in net assets or fund balances, in response to line 20.
  - 2. Part II, Balance Sheets.
- a. Description of other assets, in response to line 24.
- b. Description of total liabilities, in response to line 26.
- 3. Description of other program services in response to Part III, Statement of Program Service Accomplishments, line 31.
  - 4. Part V, Other Information.
  - a. "Yes" response to line 33.
  - b. "Yes" response to line 34.
- c. Explanation of why organization did not report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35b.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available