# Form **990-EZ**

Department of the Treasury

### **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 of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

OMB No. 1545-1150

2009

Open to Public Inspection

_	nal Revenue		<u> </u>	► The organization may ha	ve to use a copy								
A	For the	2009 calend	ar year,	or tax year beginning	<u>Jar</u>	uary 1	2009, and	ending		December 31 , 20 09			
В	Check if ap	plicable	Please	C Name of organization					D Employer identification number				
V	Address ch	-	use IRS label or	National College Playe	rs Association	}			_	0	2-06	35571	
닖	Name char	-	print or	Number and street (or P.O.	box, if mail is no	t delivered to street add	iress) Ro	om/suite	E Telepi	hone ni	ımbe	er e	
님	Initial retur Terminated		type. See	P.O. Box 6917						95	1-89	98-0985	
片			Specific	City or town, state or count	ry, and ZiP + 4				F Grou	n Eve	mnt	ion	
H	Amended of Application		Instruc- tions.	Norco, CA 92860-9001						ber ▶	•	<b>011</b>	
느			<u> </u>	<u> </u>			-ttoob	G Accou				Cook Accruel	
	• Secti	ion 501(c)(3)		rations and 4947(a)(1) no inpleted Schedule A (Foi			attacn	1	(specify)	ethod: 🗹 Cash 🗌 Accrual			
		<del></del>		ipiotod dorioddio A (i di						<del></del>			
_								l .			_	nization is <b>not</b>	
-	<b>Nebsit</b> e		ncpan			. 🗖		,			hec	lule B (Form 990,	
ī.	Гах-ехе			nly one) — 🗹 501(c) ( 3			<u> </u> 527	<u> </u>	Z, or 990				
	Check >		_	zation is not a section 509			_						
				turn is not required, but i									
				9 to determine gross rece									
	art I	Revenu	ie, Exp	enses, and Change	s in Net As	isets or Fund Ba	alances	(See the	instruc	ctions	) TO		
	1			ts, grants, and similar a						1		135,084	
	2	Program s	ervice i	evenue including gove	rnment fees	and contracts .				2		0	
	3	Membersh	iip dues	and assessments.					[	3		0	
	4	Investmen	t incom	e					[	4		0	
	5a	Gross amo	ount fro	m sale of assets other	than inventor	y	5a		0	1			
	Ь	Less: cost	or othe	er basis and sales expe	enses		5b		0				
Revenue	С	Gain or (lo	ss) fron	n sale of assets other t	han inventory	(Subtract line 5b f	from line	5a)		5c		0	
	6			tivities (complete applicable p					<b>▶</b> □ 1				
	а			ot including \$			• •			- 1			
<u> </u>	-			)			6a		0	ĺ			
ш	b	-		nses other than fundra			6b		0				
				ss) from special events	• .			62)		6c		0	
	7a		-	rentory, less returns an			7a	oa)	0				
	1 -			• •			7b		0	}			
	b	Less: cost	•					<del></del>		7.		0	
	C		•	ss) from sales of inven		, -	The state of the s			7c		1604	
	8		•	escribe Interest from			PE	- 11 /6	)	8		1604	
	9			dd lines 1, 2, 3, 4, 5c, 6		9 1				-9		136,688	
	10			r amounts paid (attach		1(0)			·7	10		0	
	11	-		r for members		1 1	AUG	1. 6. 20		<u> </u>		0	
ěs	12			mpensation, and empl	-	1 0-			9 1 1	12		96,224	
penses	13			and other payments to		t contractors	000		· 18	<u>/13  </u>		1320	
_		•	•	utilities, and maintena			جزئزاآ	EN.U	7.14	14		15,183	
ũ	.~			ons, postage, and ship				2000	· · · · · ·	15		1,467	
	16			describe ► Public Av						16		71,956	
. —	17	Total exp	enses.	Add lines 10 through 1	<u>6</u>	<u></u>		· · ·	. ▶	17		186,150	
হ	18			for the year (Subtract		,				18		49,462	
Se	19			id balances at beginni									
¥		-	-	e reported on prior yea	·					19		341,856	
Net Assets	20		_	net assets or fund bala		•			ī	20		0	
	21	Net assets	or fund	d balances at end of ye	ar. Combine	lines 18 through 2	0		. ▶	21		292,394	
Ê	art II	Balanc	e Shee	ets. If Total assets on I		n (B) are \$1,250,0	00 or mor				<u>d o</u>		
				(See the instruction:	•			(A) Beg	inning of	<del>`</del>		(B) End of year	
2	2 Ca	sh, savings	, and in	vestments					34	1,856	=	292394	
2	3 Lai	nd and buil	dings .								23	0	
2	4 Otl	her assets (	describ	e <b>▶</b>			)				24	0	
2		tal assets							34	1,856	25	292394	
2	6 To	tal liabilitie	s (desc	cribe <b>&gt;</b>			}			0	26	0	
2	7 Ne	t assets o	fund b	palances (line 27 of co	lumn (B) mus	t agree with line 2	1)		34	1,856	27	292394	

	000 EE (E000)					raye =
Par	t III Statement of Program Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses
Wha		To educate the public about				ired for section
Desc	cribe what was achieved in carrying out the org	anization's exempt purpos	ses. In a clear ar	nd concise		)(3) and 501(c)(4)
	ner, describe the services provided, the number of					izations and section a)(1) trusts, optional
	program title.	•			for ot	
28	Public Awareness Campaign - Through several publi	ic events, media coverage, a	nd the NCPA's	-		
_	newsletter, the NCPA provided hundreds of thousan					
	that college student-athletes and high school recrui			ections.		
		includes foreign grants, che	··	▶ □	28a	18,023
29	The NCPA advocated legislation that, if approved, we			· • <u>-</u>		
	student-athletes to provide information about key at			rts-related		
	medical bills, whether or not a school would renew a				:	
		includes foreign grants, che	<i>-</i>	▶ □	29a	5343
30					234	50.0
30			<del>-</del> -			
	(Cronto C	maludas faraign grants ab			200	
24		includes foreign grants, che			30a	
31	, ,				24.	
20		includes foreign grants, che			31a 32	
32 Par			en if not compens			tions for Part IV )
rai	List of Officers, Directors, Trustees, and Rej	(b) Title and average	(c) Compensation	(d) Contributio		(e) Expense
	(a) Name and address	hours per week	(If not paid,	employee benefit	plans &	account and
Davi	on McCutcheon	devoted to position	enter -0)	deferred comper	isauon	other allowances
		Director, .25 hrs/wk	o		0	0
	Box 6917, Norco, CA 92860 riel Crecion		U			
	Alcove Ave, Valley Village, CA 91607	Director, CFO, .25 hrs/wk	0		0	0
	yane Caldwell					
	Box 1212, Rialto, CA 92377	Director, .5 hrs/wk	0		0	0
	Smith, 3699 Wilshire Blvd., Ste. 1200		0			U
	Angeles, CA 90010	Secretary, .5 hrs/wk	0		0	o
	nogi Huma					
	Box 6917, Norco, CA 92860	President, 50+ hrs/wk	83024		0	o
F.O.	BOX 0917, NOICO, CA 92000		63024			
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Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		<b>√</b>
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 5,343			
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 period covered by this return? .	38a		<b>√</b>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
40a	section 4911 ▶ ; section 4912 ▶ 0 ; section 4955 ▶ 0			
Ь	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior			1
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40ь		•
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed. ▶ California		·	<del></del> -
42a		51-89	8-0985	5
	Located at ► 11748 Magnolia Ave, Suite C1, Riverside, CA ZIP + 4 ►	92503	-4955	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	1		
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	40.	Yes	
	account)?	42b		<b>√</b>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		
•	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. •	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	L]		آبِــــ
	Form 990-EZ	44		✓_
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	)-F7	<u>√</u>
		~ ~~		

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	section 4947(a)(1) non 17(a)(1) nonexempt cha d 51.	<b>exempt charit</b> aritable trusts m	able trusts only. A nust answer question	dl sec ons 4	:tion 5-491	b
46	Did the organization engage in direct or indirect					Yes	No
	candidates for public office? If "Yes," complete \$				46		<b>✓</b>
47	Did the organization engage in lobbying activities				47	<b>V</b>	<del> </del>
48 49a	Is the organization a school as described in section Did the organization make any transfers to an ex		•		46 49a	$\vdash$	7
	If "Yes," was the related organization a section 5	· · · · · · · · · · · · · · · · · · ·	-		49b		1
50	Complete this table for the organization's five his employees) who each received more than \$100,	ghest compensated emp	loyees (other tha	n officers, directors,			
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation		(e ac	Expensional Expension	nse and
None							
					┼		
		<del></del>			+-		
					—		
f	Total number of other employees paid over \$100	0,000	0				
	\$100,000 of compensation from the organization (a) Name and address of each independent contractor		,	Type of service	(c) Co	mpens	ation
None							
		•••••					
d	Total number of other independent contractors e	ach receivii					
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration						
		o. p. op. d					
Sign							
Here	Signature of officer						
	Ramogi Huma, President						
	Type or print name and title						
Paid	Preparer's signature						
Prepare	er's Firm's name for						
Use On	yours if self-employed), address, and ZIP + 4						
May th	e IRS discuss this return with the preparer showr	above? Se					

## SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

#### 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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number **National College Players Association** 0635571 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 331/4 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **c** ☐ Type III–Functionally integrated **b** ☐ Type II a Type I **d** ☐ Type III–Other e D By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col support governing document? above or IRC section. col (i) of your (i) organized in the (see instructions)) US? support? Yes No Yes Yes

Total

	Support Schedule for Org (Complete only if you check	anizations D ked the box o	escribed in on line 5, 7, c	Sections 170 or 8 of Part I.	0(b)(1)(A)(iv) )	and 170(b)(1	)(A)(vi) 
	tion A. Public Support	,				<del></del> -	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	182,068	217,991	212,012	177,355	135,084	924,510
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	182,068	217,991	212,012	177,355	135,084	924,510
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)						182,205
6	Public support. Subtract line 5 from line 4.						742,305
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	182,068	217,991	212,012	177,355	135,084	924,510
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	7537	4193	1604	13,334
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10 .	L					937,844
12	Gross receipts from related activities, etc	•	•			12	0
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>	d, third, fourth	•		n 501(c)(3) ► □
	tion C. Computation of Public Su					44	79 %
14	Public support percentage for 2009 (line 6	, ,,	,			15	79 % 87 %
15 10-	Public support percentage from 2008 Sch					•	
	331/3 % support test—2009. If the organization qualifies	as a publicly s	upported organ	nization			▶ ☑
b	33% % support test—2008. If the organization quality box and stop here. The organization quality					33⅓ % or more, 	check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums organization meets".	acts-and-circun	nstances" test,	check this box	and <b>stop here.</b>	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum inces" test. The	stances" test, o organization qua	heck this box a lifies as a public	and <b>stop here.</b> Ily supported or	Explain in Part ganization	IV how the

Sche	dule A (Form 990 or 990-EZ) 2009						Page 3
	t III Support Schedule for Orga (Complete only if you checke				a)(2)		
Sec	tion A. Public Support						
	alendar year (or fiscal year beginning in) >	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
	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						<b></b>
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	:					
	tion B. Total Support	·					,
C	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	payments received on securities loans, rents, royalties and income from similar						
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 carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14 <del>500</del>	First five years. If the Form 990 is for organization, check this box and stop	here					on 501(c)(3) ▶ □
-	tion C. Computation of Public Su					1 1	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 Stripp D. Computation of Investment	Schedule A, Pa	art III, line 15			16	<u>%</u> %
	tion D. Computation of Investmer					T 2-T	
17	Investment income percentage for 2009		• • •	•		17	<u> </u>
18 19a	Investment income percentage from 20 33% % support tests—2009. If the organization part than 221/10/2 check the base of the control of the co	anızatıon dıd n	ot check the b	ox on line 14, a	and line 15 is r		%, and line _
b	17 is not more than 33½%, check this b 33½% support tests—2008. If the organ line 18 is not more than 33½%, check this	ization did not	check a box or	n line 14 or line	19a, and line 1	6 is more than	331/3 %, and _

	orm 990 or 990-EZ) 20	009					Page <b>4</b>
Part IV	Supplemental Part II, line 17	I <b>Information.</b> a or 17b; and	Complete this Part III, line 12.	part to provid Provide any o	le the explanate other additional	ons required information.	by Part II, line 10; See instructions.
	• • • • • • • • • • • • • • • • • • • •						
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#### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

• Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

• Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B

		that have NOT filed Form 5768 (elections," to Form 990, Part IV, line 5 (Prox		(h)): Complete Part II-B. De	o not complete Part II-A.
• ;	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nar	ne of organization	-		Employe	er identification number
Nat	tional College Players Ass			02	0635571
Par	t I-A Complete if the	organization is exempt unde	er section 501(c	c) or is a section 527	organization.
1	Provide a description of th	ne organization's direct and indirect	ct political campai	gn activities in Part IV.	
2	Political expenditures .			· · · · · <b>▶</b> \$	
3	Volunteer hours				
_				1/01	
Par		organization is exempt und			<del> </del>
1		xcise tax incurred by the organiza		n 4955 ▶ \$	
2		xcise tax incurred by organization			
3		d a section 4955 tax, did it file For	·-		Lyes Lyes
	Was a correction made?  If "Yes," describe in Part I				· · L Yes L No
		v. e organization is exempt und	er section 501/	c) except section 5	i01(c)(3)
1		expended by the filing organization			
2	Enter the amount of the fil	ing organization's funds contribute	ed to other organi	zations for section	
	527 exempt function activi	ities		<b>▶</b> \$	
3	Total exempt function exp	penditures. Add lines 1 and 2. Er	nter here and on	Form 1120-POL,	
	line 17b			▶ \$	
4		file Form 1120-POL for this year?			🗌 Yes 📙 No
5		and employer identification numbe			
		zation listed, enter the amount paid fi			
		were promptly and directly delivered			s a separate segregated
	rund or a political action co	mmittee (PAC). If additional space is	s needed, provide i	niormation in Part IV.	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds. If none, enter -0-	promptly and directly
					delivered to a separate political organization if
					none, enter -0
	***************************************				
		-			

					3
P	art II-A	Complete if the organizat under section 501(h)).	ion is exempt under section 501(c)(3) and	filed Form 5768	election
A B			belongs to an affiliated group. checked box A and "limited control" provision	ons apply.	
			bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1:	a Total le	obbying expenditures to influence	e public opinion (grass roots lobbying)	0	NA NA
1			e a legislative body (direct lobbying)	5,343	NA NA
			1a and 1b)	5,343	NA
		. •		180,807	NA
			Id lines 1c and 1d)	186,150	NA.
•		ng nontaxable amount. Enter the	amount from the following table in both	37,230	NA
	1	nount on line 1e, column (a) or (b) is: or \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e.		
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$1	7,000,000	\$1,000,000.		
	g Grassr	oots nontaxable amount (enter 2	.5% of line 1f)	9308	
	h Subtra	ct line 1g from line 1a. If zero or	less, enter -0	0	
		ct line 1f from line 1c. If zero or		0	<del></del>
			either line 1h or line 1i, did the organization file Fo		☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d</b> ) 2009	(e) Total					
2a Lobbying nontaxable amount	16,187	35,355	38,144	37,230	126,916					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					190,374					
c Total lobbying expenditures	0	о	0	5,343	5,343					
d Grassroots nontaxable amount	4,047	8,839	9,536	9,308	31,730					
Grassroots ceiling amount (150% of line 2d, column (e))					47,595					
f Grassroots lobbying expenditures	0	o	0	0	0					

Schedule C (Form 990 or 990-EZ) 2009

Pai	Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).									
		(8	)		(b)					
		Yes	No	A	mount	t				
1	During the year, did the filing organization attempt to influence foreign, national, state or loc legislation, including any attempt to influence public opinion on a legislative matter referendum, through the use of:									
а	Volunteers?									
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .									
С	Media advertisements?	-								
d	Mailings to members, legislators, or the public?			<del></del>						
0	Publications, or published or broadcast statements?									
f	Grants to other organizations for lobbying purposes?	$\vdash$	-							
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	$\vdash$	-							
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .									
j	Other activities? If "Yes," describe in Part IV									
j	Total. Add lines 1c through 1i									
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .									
	If "Yes," enter the amount of any tax incurred under section 4912									
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504/0)/	<u> </u>							
Pal	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(C)(	<b>5),</b> 0	r secti	on					
					Yes	No				
1	Were substantially all (90% or more) dues received nondeductible by members?			1						
2	Printed and the second and the secon			2						
_3_	Did the organization agree to carryover lobbying and political expenditures from the prior year? .	<u> </u>		3						
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."					ed				
1	Dues, assessments and similar amounts from members		1							
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid).	olitical								
a	Current year		2a							
b	Carryover from last year		2b							
C	Total		2c							
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible to		3							
	and political expenditure next year?		4							
5	Taxable amount of lobbying and political expenditures (see instructions)		5							
Pa	rt IV Supplemental Information			<del></del>	-					
	nplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-6, complete this part for any additional information.			Part II-I	3, line	e 1i.				
					• • • • •	••••				
			·							