SCHEDULE G

(Form	990 or	990-	EZ)
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## Department of the Treasury Internal Revenue Service

## Name of the organization

Part I

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## Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047
2009
Open To Public Inspection

No

Employer identification number

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1	Indicate whether	the organization	raised funds t	hrough any	of the following activities.	Check all that apply.

**a** Mail solicitations **b** Internet and email solicitations

Phone solicitations

In-person solicitations

- e Solicitation of non-government grants
- f 🔄 Solicitation of government grants
- **g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	<b>(vi)</b> Amount paid to (or retained by) organization	
		Yes	No						
Total			►						
<b>3</b> List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.									

						(add col. (a) through col. (c))				
Ø			(event type)	(event type)	(total number)					
enue		<b>A</b>								
Revenue	1	Gross receipts								
ш	2	Less: Charitable contributions								
	3	Gross income (line 1								
		minus line 2)								
	4	Cash prizes								
	_									
	5	Noncash prizes								
ŝ	6	Rent/facility costs								
Direct Expenses	-	,								
xpe	7	Food and beverages								
ш Х										
lired	8	Entertainment								
	9	Other direct expenses								
	3	Other direct expenses								
	10	Direct expense summary. Ad				( )				
	11	Net income summary. Comb	ine line 3, column (d), a	nd line 10	<u> </u>					
Ра	rt II	Gaming. Complete if t than \$15,000 on Form		vered "Yes" to Form	990, Part IV, line 19,	or reported more				
			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add				
nue			(a) Billgo	bingo/progressive bingo		col. (a) through col. (c)				
Revenue										
ш	1	Gross revenue								
6	_									
Ise	2	Cash prizes								
kper	3	Noncash prizes								
Direct Expenses	Ŭ									
irec	4	Rent/facility costs								
Δ	-	Other divert evenence								
	5	Other direct expenses .	Yes %	Ves %	Yes %					
	~	Valuetaan laban	□ Yes <sup>70</sup>	│	│					
	6	Volunteer labor								
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)	•	( )				
	8	Net gaming income summary	/. Combine line 1, colur	nn d, and line 7	<u> </u>					
						Yes No				
9		Enter the state(s) in which the organization operates gaming activities:								
a b		Is the organization licensed to operate gaming activities in each of these states?								
D.										
10a	W	ar? <b>10a</b>								
b	lf '	"Yes," explain:								
44		es the organization operate o				44				
11 12		bes the organization operate g the organization a grantor, be			a partnership or other	•				
		rmed to administer charitable								

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

(b) Event #2

(c) Other events

(a) Event #1

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(d) Total events

			Yes	No
13 a b 14	Indicate the percentage of gaming activity operated in:       13a       %         The organization's facility			
	Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$			
с	If "Yes," enter name and address of the third party:			
	Name  Address			
16	Gaming manager information:			
17 a	Name ▶			
d	retain the state gaming license?	17a		
b				

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