Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 **2011** Open to Public

	nai Revenue Servici		rung requ	inements.	Inspection
<u>A</u>	For the 2011 (	calendar year, or tax year beginning $05/01/11$ , and ending $04/30/12$			
<b>B</b> (	Check if applicable:	C Name of organization		D Emplo	yer identification number
	Address change	Angel Society of Fallbrook			
$\Box$	Name change	Doing Business As P.O. Box 1408		95-	3258567
	Name change	Number and street (or P.O. box if mail is not delivered to street address)  Room	/suite		one number
	Initial return	PO Box 1408		760	-728-6513
	Terminated	City or town, state or country, and ZIP + 4		,,,,	720 0010
	A	Fallbrook CA 92088-1408		• 0	eipts\$ 269,719
Η,	Amended return	F Name and address of principal officer:		<b>G</b> Gross rec	elpts\$ 209,119
	Application pending	. ' ' u/a	) Is this a gr	oup return for	affiliates? Yes X No
		Marylyn Miller, President			ed? Yes No
		2000 200 20000	) Are all affi		
		Fallbrook CA 92028	II "INO,	, attach a lis	t. (see instructions)
I	Tax-exempt status:				
J	Website: W		Group exe		ber 🕨
K	Form of organization	n: X Corporation Trust Association Other ▶ L Year of fo	ormation: 19	978	M State of legal domicile: CA
P	art I Su	ummary			
	1 Briefly de	escribe the organization's mission or most significant activities:			
පු	The	purpose of the Angel Society of Fallbrook shall be t	o fund	d, sup	port and
aŭ	enh	ance charitable projects and programs of community o	r soc	ial we	lfare,
Governance		out not limited to, the greater Fallbrook area.			
ŏ		is box ▶ if the organization discontinued its operations or disposed of more than 25%	of its not	accote	
					33
න් ග		of voting members of the governing body (Part VI, line 1a)		··	33
ij		of independent voting members of the governing body (Part VI, line 1b)			
Activities		mber of individuals employed in calendar year 2011 (Part V, line 2a)			0
Ä		mber of volunteers (estimate if necessary)	, ,		205
		related business revenue from Part VIII, column (C), line 12	,		0
	<b>b</b> Net unre	lated business taxable income from Form 990-T, line 34	.,	7b	0
			Prior Yea		Current Year
ne	8 Contribu	tions and grants (Part VIII, line 1h)	8	,243	38,034
en	9 Program	service revenue (Part VIII, line 2g)		0	0
Revenue		ent income (Part VIII, column (A), lines 3, 4, and 7d)		125	473
-	11 Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,401	86,179
	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,769	124,686
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)	101	,379	122,725
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		0	0
es	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
ટ	16aProfession	onal fundraising fees (Part IX, column (A), line 11e)		0	0
Exper	<b>b</b> Total fun	draising expenses (Part IX, column (D), line 25) ▶ 0			
ũ	17 Other ex	penses (Part IX, column (A), lines 11a–11d, 11f–24e)	5	,006	11,381
		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		,385	134,106
		e less expenses. Subtract line 18 from line 12		,616	-9,420
es es			ning of Curi		End of Year
Net Assets or Fund Balances	20 Total ass	sets (Part X, line 16)	1,176	,923	1,146,497
Ass	21 Total liab	pilities (Part X, line 26)		,229	634,449
- Net	22 Net asse	ets or fund balances. Subtract line 21 from line 20		,694	512,048
		gnature Block			
		perjury, I declare that I have examined this return, including accompanying schedules and statemen	nts and to t	the hest of	my knowledge and helief it i
		complete. Declaration of preparer (other than officer) is based on all information of which preparer ha	,		my knowlodgo dna bollot, k i
				Ť	
Sig	un   F	signature of officer		Date	
	)··				
He	_	ype or print name and title			
			Data	1	X if PTIN
Paid		e preparer's name Preparer's signature	Date	Check	<u></u> "
	KICHA	rd F. Levering, CPA Richard F. Levering, CPA		12 self-em	
	parer Firm's na		Fi	rm's EIN	26-0283164
USE	Only	PO Box 400			
	Firm's ac	·	Ph	none no.	<u>760-728-8393</u>
May	the IRS discu	ss this return with the preparer shown above? (see instructions)			Yes No

	(2011) Angel Society	of Fallbrook	95-3258567	Page <b>2</b>
Part II		Service Accomplishments	73 020007	1 ago <b>=</b>
			stion in this Part III	
1 Brie	fly describe the organization's mission			
The	purpose of the An	gel Society of Fa	llbrook shall be to	fund, support a
en	hance charitable p	rojects and progra	ams of community or	social welfare,
in	but not limited to	, the greater Fall	lbrook area.	
	the organization undertake any signi	ficant program services during the y	ear which were not listed on the	□ v <b>∀</b> u.
•	r Form 990 or 990-EZ?	0-1		Yes X No
	'es," describe these new services on the organization cease conducting, or		t conducto con program	
	rine organization cease conducting, c rices?	in make significant changes in now i	conducts, any program	Yes X No
	es," describe these changes on Sch	edule O		I 163 21 NO
	_		three largest program services, as me	easured by
			(1) trusts are required to report the an	
-	nts and allocations to others, the total			
9	,			
<b>4a</b> (Co	de: ) (Expenses \$	95,425 including grants of	f\$ <b>95,425</b> ) (Revenu	ue\$)
Cas	h Contributions to	Fallbrook Area Cl	\$ 95,425 ) (Revenue titles including	\$12,000 to
The	Fallbrook Land Co	nservancy, \$10,000	O for the Boys & Gi	rls Club of Nort
Cou	nty and \$7,500 to	the North County S	Solutions for Chang	e.
		/		
<b>4b</b> (Co	do: \(\( \( \( \) \\ \) \\ \( \) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	27 300 including grants of	97 300 ) (Bayon)	10 ft
FOII	ue. / (Expenses v		LI JOO ) (Neveril	
- <del></del> -	rteen programs at	Fallbrook area lo	ral schools totalin	g \$12,300 and si
sch	rteen programs at olarships to Fallb	27,300 including grants of Fallbrook area look rook. California	cal schools totalin area residents tota	g \$12,300 and siling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and si ling \$15,000.
sch	rteen programs at olarships to Fallb x \$2,500 scholarsh	rook, California a	cal schools totalin area residents tota	g \$12,300 and si ling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and si ling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and siling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and siling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and s: ling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and s: ling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and si ling \$15,000.
sch	olarships to Fallb	rook, California a	cal schools totalin area residents tota	g \$12,300 and si ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
sch (si	olarships to Fallb x \$2,500 scholarsh	rook, California a	area residents tota	ling \$15,000.
\$ch (si	olarships to Fallb x \$2,500 scholarsh  de: )(Expenses\$	rook, California a ips)  including grants of	area residents tota	ling \$15,000.
4c (Co	olarships to Fallb x \$2,500 scholarsh  de: )(Expenses\$  er program services. (Describe in Sci	rook, California a ips)  including grants of	area residents tota	ling \$15,000.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			7.7
_	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			37
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		37
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
•	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			X
10	complete Schedule D, Part IV	9		^
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		Λ
• •	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	Πα	22	
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2011) Angel Society of Fallbrook

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization 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 Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	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," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	X	
			000	1

Check if Schedule O contains a response to any question in this Part V  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country: ▶  5e instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or either than the such contributions or every solicitation an express statement that such contributions or every solicitation an express statement that such contributions or every solicitation an exp	1c 2b	es No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or	1c 2b 3a	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or	2b 3a	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or	2b 3a	
<ul> <li>Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</li> <li>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</li> <li>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</li> <li>b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O</li> <li>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>	2b 3a	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ▶  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or	3a	
<ul> <li>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</li> <li>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</li> <li>b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O</li> <li>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>	3a	
<ul> <li>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</li> <li>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</li> <li>b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O</li> <li>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>	3a	
<ul> <li>Did the organization have unrelated business gross income of \$1,000 or more during the year?</li> <li>If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O</li> <li>At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>		
<ul> <li>b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O</li> <li>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>		
<ul> <li>At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>	3b	X
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or		
account)?  b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or		
<ul> <li>b If "Yes," enter the name of the foreign country: ►</li> <li>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</li> <li>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>		
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or	4a	X
<ul> <li>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>		
<ul> <li>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</li> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>	Fa	v
<ul> <li>c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?</li> <li>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>b If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>		X
<ul> <li>Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?</li> <li>If "Yes," did the organization include with every solicitation an express statement that such contributions or</li> </ul>	. 5c	
organization solicit any contributions that were not tax deductible? <b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or	. 30	-
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	х
citic ways not toy deductible?	.   50	
gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		
and services provided to the payor?	. 7a	X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
required to file Form 8282?	. 7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. <b>7f</b>	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g	X
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	? 7h	X
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		
organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		
organization, have excess business holdings at any time during the year?  Spansoring organizations maintaining dones advised funds	. 8	
<ul><li>Sponsoring organizations maintaining donor advised funds.</li><li>Did the organization make any taxable distributions under section 4966?</li></ul>	9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:	. 00	
a Initiation fees and capital contributions included on Part VIII, line 12 10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders 11a		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources		
against amounts due or received from them.)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?	. 13a	
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which	The second second second second	TOTAL PROPERTY.
the organization is licensed to issue qualified health plans  13b		
c Enter the amount of reserves on hand  13c	_	
14a Did the organization receive any payments for indoor tanning services during the tax year?  b If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a	X

Form 990 (2011) **Angel Society of Fallbrook** 95-3258567 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 33 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 33 1b **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No **10a** Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? **Section C. Disclosure** List the states with which a copy of this Form 990 is required to be filed ▶ CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website **X** Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the

760-728-6513

Fallbrook

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

Check if Schedule O contains a response to any question in this Part VII

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the org	•		elate	d or	gani	zation	ns c	compensated any current	officer, director, or trustee	е.
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box	, unle	Pos heck ss pe	rson i irecto	than on a both a both s both service Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)Marylyn Miller President	6.00	х		X				0	0	0
(2) Jennifer Anders 1st - Vice-President		х		x				0	0	0
(3) Jean Dooley	8.00	Λ		Λ				0	U	0
2nd - Vice-President	5.00	х		X				0	0	0
(4)Gerri Ankerman										
Secretary	12.00	Х		X				0	0	0
(5)Billie Foli										
Treasurer	14.00	X		X				0	0	0
(6) <b>Mania Black</b> Director	10.00	x						0	o	0
(7)Donna Boren										
Director	4.00	Х						0	0	0
(8) Nancy Chapman	10.00									
Director	18.00	Х						0	0	0
(9) Susan Coughlin Director	6.00	x						0	o	0
(10) Sharon Daniels	6.00	Λ						U	U	U
Director	11.00	x						0	0	0
(11)Gigi Eckels	11.00	Λ							<u> </u>	<u> </u>
Director	7.00	х						0	0	0
(12)Jackie Edgerton										
Director	8.00	Х						0	0	0
(13)Kathy Gausepohl										
director	4.00	X						0	0	0
(14)Judy Haggard										
Director	4.00	X						0	0	0 (2044)

Form **990** (2011)

Part VII Section A. Office	rs, Directors, T	ruste	es,	Key	Em	ploy	ees/	s, and Highest Compens	ated Employees (continu	ued)
(A) Name and title	(B) Average hours per week (describe hours for	box	k, unle	Pos check ess pe nd a d	ition more rson	is both	n an	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W 27000 MIGG)	organization and related organizations
(15)Joan Hatfield Director	6.00	х						0	0	0
(16)Cathy Jones Director	7.00	x						0	0	o
(17)Kathryn Kopitzl Director	9.00	х						0	0	0
(18)Barbara Loehner		х						0	0	0
(19)Connie Loeschne	r									
Director (20)Martha MacFarla	•	X						0	0	0
Director (21)Judy Messina	4.00	Х						0	0	0
Director (22)Marnie Mifflin	8.00	X						0	0	0
Director (23)Veryl Mitchell	10.00	X						0	0	0
Director (24)Gina Palulich	5.00	X						0	0	0
Director (25)Rita Pankey	6.00	X						0	0	0
Director	18.00	x						0	0	0
1b Sub-total		, Se	ctio	n <b>A</b> .			<b>&gt;</b>			
d Total (add lines 1b and 1c)  Total number of individuals		t lim	ited	to th	ose	liste	<b>▶</b> d ab	 pove) who received more t	han \$100,000 in	
reportable compensation fro	m the organizati	ion 🕨	•0							Yes No
<ul><li>3 Did the organization list any employee on line 1a? If "Yes</li><li>4 For any individual listed on I</li></ul>	s," complete Sch	nedul	le J f	for su	ıch	indiv	idua	al		3 Х
organization and related org individual	anizations great	er th	an \$	S150,	000	? If "	'Yes	s," complete Schedule J fo	r such	4 X
5 Did any person listed on line for services rendered to the										5 X
Section B. Independent Contra 1 Complete this table for your	five highest con									
compensation from the orga	nization. Report (A) d business address	com	pen	satio	n fo	r the	cal		within the organization's (B) (tion of services	tax year. (C) Compensation
- Name of	a basiness daaress							2000.p		- Componication
Total number of independent received more than \$100.00			-							

	-,		,	.,		1 ,		, J	1 - 7	/			
(A) Name and title	(B) Average hours per week (describe hours for	box	k, unle	Posi check i ess pei nd a di	ition more rson	is both	an	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	C	Estima amour othe compens	ated nt of er sation	
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1. 2.000 11.00)		organiz and rel organiza	ation ated	
(15)Betty Pierce Director	8.00	х						0	0				0
(16)Lila Sandschult Director	e 8.00	х						0	0				0
(17)Gloria Seelye	C 00	3,5											^
Director (18) Vivian Steere	6.00	Х						0	0				0
Director	11.00	x						0	0				0
(19) Virginia Stephe Director	6.00	x						0	0				0
(20)Linda Van Buski													
Director	4.00	X						0	0				0
(21) <b>Fran White</b> Director	6.00	x						0	o				0
(22)Dee Yetter	4 00	37							0				^
Director (23)Bonnie Bell	4.00	X						0	0				0
Director	0.00	x						0	0				0
(24)		7											
(25)									7				
1b Sub-total							<b></b>						
c Total from continuation she													
d Total (add lines 1b and 1c)  Total number of individuals (i							<b>P</b>	ove) who received more	than \$100,000 in				
reportable compensation from	_			to tri	036	liste	u ab	ove) who received more	man \$100,000 m				
3 Did the organization list any	<b>former</b> officer. o	direc	tor. (	or tru	ıste	e. ke	v en	nplovee, or highest comp	ensated			Yes	No
employee on line 1a? If "Yes  4 For any individual listed on li	," complete Sch	edul	le Ĵ f	or su	ıch	indiv	idua	ıl			3		
organization and related orga	anizations great	er th	an \$	150,	000	? If "	Yes	," complete Schedule J fo	or such		4		
individual  5 Did any person listed on line	1a receive or a		 e co	 mpei	 nsat	ion f	 rom	any unrelated organization	on or individual		4		
for services rendered to the o	organization? If										5		
Section B. Independent Contract				اممنالم	lana	. مام							
Complete this table for your factoring the organization from the organization.	nization. Report	com	pen	a mo satio	n fo	r the	cale	endar year ending with or	within the organization's	tax year			
Name and	(A) I business address							Descri	(B) otion of services		Co	(C) empensa	ition
2 Total number of independent	contractors (in	cludi	ng b	ut no	ot lin	nited	to t	hose listed above) who					
received more than \$100,000			-										

Pa	rt V	III Statement of Rev	enue	)					
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
nts ts	12	Federated campaigns	1a				revenue		512, 513, or 514
S a	h	Membership dues	1b		25,565				
Ę,	0	Fundraising events	1c		23,303				
att.	ا	Polated organizations	1d						
a,e	a	Related organizations							
Sign	e	Government grants (contributions)	1e						
Program Service Revenue Contributions, Gifts, Grant	t	All other contributions, gifts, grants, and similar amounts not included above	1f		12,469				
age of	g	Noncash contributions included in lines 1	a-1f:	\$					
<u>ರ್</u> ಜ	h	Total. Add lines 1a-1f				38,034			
Ĭ					Busn. Code				
eVe	2a								
8 <b>8</b>	b								
Š	С								
Ser	d								
E	-								
gra	f	All other program service rev							
Pro	,	<b>Total.</b> Add lines 2a–2f			•				
	3	Investment income (including							
	3					473			473
	4					1/3			173
	4	Income from investment of ta							
	5	Royalties							
		(i) Real		(ii) P	ersonal				
	6a	Gross rents							
	b	Less: rental exps.							
	С	Rental inc. or (loss)							
	d	Net rental income or (loss)			▶				
	/a	Gross amount from sales of assets (i) Securities		(ii)	Other				
		other than inventory							
	b	Less: cost or other							
		basis & sales exps.							
	С	Gain or (loss)							
		Net gain or (loss)			<b>•</b>				
4		Gross income from fundraising ev							
nue	Ju	(not including \$							
Ş		of contributions reported on line 1							
æ									
Other Reven		See Part IV, line 18							
ᅙ		Less: direct expenses							
		Net income or (loss) from fun	ſ	ng events					
	9a	Gross income from gaming activiti							
		See Part IV, line 19							
		Less: direct expenses							
	С	Net income or (loss) from gain	ming a	ctivities					
	10a	Gross sales of inventory, less	3						
		returns and allowances	а		231,212				
	b	Less: cost of goods sold			145,033				
		Net income or (loss) from sal				86,179	86,179		
		Miscellaneous Revenue		- <b>,</b> .	Busn. Code	-	-		
	11a								
	b	• • • • • • • • • • • • • • • • • • • •							
	~	• • • • • • • • • • • • • • • • • • • •							
	ں ہ	All other revenue							
		Total. Add lines 11a–11d				124,686	86,179	^	473
	12	Total revenue. See instruction	วทธ			124,000	00,1/9	0	4/3

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, Tout incurrence Programme (and the part vital incurrence) Programme (and part vital incurrence) Progr		Check if Schedule O contains a respon	se to any question in this	Part IX		
Total Section   Total Sectio	Do	not include amounts reported on lines 6b,				
organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to poverments organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustess, and key employees Compensation on include above, to dispallifice person (se defined under section 498(01)) and person described in section 498(3)(3)(8) Cother sensities and wages Provision described in section 498(3)(3)(8) Pother sensities and wages Provision and contributions (include section 4010) and 4030) employee contributions) Cother employee benefits Payrol taxes Payrol taxes Payrol taxes 1 Foes for services (non-employees): Amanagement Legal Accounting Cother employees Accounting Cother and transparent fees Cother of the tra	7b	, 8b, 9b, and 10b of Part VIII.	Total expenses			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 2 Canals and other assistance to governments organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation included above, to disqualited persons (as stellined under section 4950(1)) and persons described in section 4950(1) and 4930(1) and 4930(1) employe contributions 9 Dehre salaries and wages 8 Pension plan acrousles and contributions (include section 40(0) and 4930(1) employe contributions 9 Other employees benefits 9 Payroll taxes 11 Feas for services (non-employees): 12 Advortising and promotion 12 Advortising and promotion 13 Office expenses for the promotion of the prom	1	Grants and other assistance to governments and				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 2 Canals and other assistance to governments organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation included above, to disqualited persons (as stellined under section 4950(1)) and persons described in section 4950(1) and 4930(1) and 4930(1) employe contributions 9 Dehre salaries and wages 8 Pension plan acrousles and contributions (include section 40(0) and 4930(1) employe contributions 9 Other employees benefits 9 Payroll taxes 11 Feas for services (non-employees): 12 Advortising and promotion 12 Advortising and promotion 13 Office expenses for the promotion of the prom		g .	122,725	122,725		
the U.S. See Part IV, line 22  Grants and other assistance to governments organizations, and individuals outside the U.S. See Part IV, lines 15 and 16  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation roll included above, to disqualified persons (est differed under section 4950)((1)) and persons described in section 4950((3))(8)  Portion and accrusis and contributions (notice) section 4016(and 4005(and 400	2	• • • • • • • • • • • • • • • • • • • •	,	, -		
3 Grants and other assistance to governments organizations, and individuals outside the U.S. See Part IV, lines 15 and 16  4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of included above, to disqualified persons (as defined under section 4958)(17) and persons described in section 4958(3)(18)  7 Other salaries and wages Pension plan accruits and contributions (include section 4010) and visible in the section 4010) and 4030 implications (include section 4010) and 4030 implication 4030	_					
organizations, and individuals outside the U. S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of uncluded above, to disqualified parsons (see folded under section 4980(10)) and persons described in section 4980(10) and degle section 4980(10) and degle employee contributions Payroll taxes Payroll taxes I Fees for services (non-employees) I Legal I C. Accounting I Professional fundinality services, See Part IV, line IV I Investment management fees I Defort services (non-employees) I Revention and promotion I C. See Part IV, line IV I Investment management fees I Defort services (non-employees) I Revention and promotion I C. See Part IV, line IV I Investment management fees I Revention and promotion I C. See Part IV, line IV I Investment management fees I Revention and promotion and promo	2					
U.S. See Part IV, lines 15 and 16  4 Benefits paid to or for members  5 Compensation of current officers, directors, trustees, and key employees  6 Compensation not included above, to disqualified persons (as defined under section 4958(01)(1)) and persons (as defined under section 4958(01)(1)) and persons described in section 4958(01)(1) and 405(0) employer contributions;  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees):  11 Management  12 Legal  13 Canounting  1 1,590  1 1,590  1 1,590  1 1,590  1 1,590  1 1,590  1 1,590  1 Investment management fees  9 Other  2 Advertising and promotion  13 Office expenses  2 258  2 258  1 Information technology  15 Royalties  10 Occupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payroments to affiliates  12 Payments to affiliates  13 Depreciation, depletion, and amortization  13 Insurance  24 Other expenses Illentize expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, is line 24e expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, is line 24e expenses on Schedule O)  2 Annual Lunch  2 Management  2 All other expenses Pality Payroments of line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, is line 24e expenses on Schedule O)  3 Annual Lunch  4 Management  5 Company  2 4 Other expenses Pality Payroments of line (B) and for line (B) an	3	<u> </u>				
4 Benefits paid to of for members 5 Compensation of current of filtors, directors, trustees, and key employees 6 Compensation not included above, to dispatified persons (as defined under section 498(0(1))) and persons described in section 498(0(1)) and 498(0) employer contributions (section 491(1)) and 498(1) and 498(1) employees (section 491(1)) and 491(1) employees (section 491(1)						
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation in included above, to disqualified persons (as defined under section 4958(11)1) and porsons described in section 4958(10)110 and porsons described in section 4958(10) employer contributions) 7 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): 11 Amangement 12 Legal 13 Amangement 14 Lobying 15 Investment management fees 16 Other 17 Advertising and promotion 17 Advertising and promotion 18 Payments of travel or entertainment expenses for any federal, state, or local public officials for any federal	_					
trustees, and key employees Compensation not included above, to disqualified persons discribed in section 4950((1)) and persons described in section 4950((1)) and persons described in section 4950((2)(8)) 7 Other sension plan accruais and contributions (include section 401) and 403(b) employee contributions	4					
6 Campensation not included above, to disputalifed persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(3)(8)  7 Other salaries and wages 8 Pension plan acruals and contributions (include section 401(k) and 43(β)) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fises for services (non-employees): 12 Management 13 Legal 14 Lobbying 15 Personal fundraising services See Part IV, line (7) 16 Investment management flees 17 Investment management flees 18 Office expenses 19 Other 10 Advertising and promotion 10 Office expenses 10 Cocupancy 11 Travel 18 Payments of travel or enfertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings Insurance 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization Insurance 23 Insurance 24 Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e. amont 24e. 27, 128. 27	5	•				
persons (as defined under section 4986(f)(1) and persons described in section 4986(c)(3)(8)  7 Other selaries and wages  8 Persian plan accruals and contributions (include section 4016), and 403(9) employer contributions)  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees):  a Management  b Legal  c Accounting  d Lobbying  Professional fundaising services See Part IV. line  f Investment management fees  g Other  22 Advertising and promotion  13 Office expenses  13 Office expenses  258  258  258  15 Royalties  16 Occupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  1 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  10 Hort expenses in line 24e. If line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses in line 24e. If line 24e. amount exceets 10% of line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses in line 24e. If line 24e. amount exceets 10% of line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses in line 24e. If line 24e. amount exceets 10% of line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses in line 24e. If line 25e. amount exceets 10% of line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses in line 24e. If line 25e. amount exceets 10% of line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses in line 24e. If line 25e. amount exceets 10% of line 25e. Column  (A) amount, list line 24e expenses on 1 covered above. (List miscellaneous expenses for any officials to 1 covered above. (List miscellaneous expenses 1 line 25e. Interest to 1 covered above. (List miscellaneous expenses 1 line 25e. Interest to 1 covered above. (List miscellaneous						
persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Persion plan accruels and contributions (include section 401(k) and 403(b) employer contributions 9 Other employee benefits 10 Payroll taxes 11 Fase for services (non-employees):	6	Compensation not included above, to disqualified				
7 Other salaries and wages  8 Persion plan accusals and contributions (include section 40 (i)) and 403(b) emptoyer contributions)  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees):  a Management  b Legal  c Accounting  d Lobbying  e Professional fundraising services, See Part IV, line 17  f Investment management fees  g Other  22 Advertising and promotion  3 Office expenses  11 Internation technology  8 Royalties  Royalties  Royalties  Royalties  10 Occupancy  11 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  40 Other expenses limitize expenses not covered above. (LS Imiscallenous sepenses in line 24e. If line 24e amount exceeds 10% of line 25, column  (A) amount, list line 24e expenses on the construction of the public officials  10 Payroalties and travel or entertainment expenses on the construction of the public officials of the expenses of the construction of the expenses on the construction of the expenses of the construction		persons (as defined under section 4958(f)(1)) and				
7 Other salaries and wages  8 Persion plan accusals and contributions (include section 40 (i)) and 403(b) emptoyer contributions)  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees):  a Management  b Legal  c Accounting  d Lobbying  e Professional fundraising services, See Part IV, line 17  f Investment management fees  g Other  22 Advertising and promotion  3 Office expenses  11 Internation technology  8 Royalties  Royalties  Royalties  Royalties  10 Occupancy  11 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  40 Other expenses limitize expenses not covered above. (LS Imiscallenous sepenses in line 24e. If line 24e amount exceeds 10% of line 25, column  (A) amount, list line 24e expenses on the construction of the public officials  10 Payroalties and travel or entertainment expenses on the construction of the public officials of the expenses of the construction of the expenses on the construction of the expenses of the construction		persons described in section 4958(c)(3)(B)				
8 Persion plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  9 Other employee benefits  10 Payroll taxes  11 Fees for services (non-employees):  12 Advantagement  13 Logal  14 Lobbying  15 Processional fundraising services See Part IV, line  15 Investment management fees  9 Other  17 Advertising and promotion  18 Office expenses  19 Cocupancy  10 Cocupancy  10 Travel  10 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  10 Interest  11 Payments to affiliates  12 Payments to affiliates  13 Office expenses not covered above. (its miscellanous expenses in ine 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  18 Annual Lunch  19 Agents (A) amount exceeds 10% of line 25, column (A) amount causeds 10% of line 25, column (A) amount exceeds 10% of line 25, column	7					
section 401(k) and 403(b) employer contributions)  10 Payroll taxes  11 Fees for services (non-employees):  a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line f Investment management fees g Other  12 Advertising and promotion 31 Office expenses 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 11 Interest 11 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses not covered above. (List inscellances expenses not covered above. (List inscellances expenses on toxered above. (List inscellances expenses in line 24e. If line 24e amount exceeds 10% of line 25c, column (A) amount, list line 24e expenses on Schedule O.)  Annual Lunch 5 Member ship & Dues 7 1,288 7 249 8 All other expenses 10 Interest 11 Paysenses. Itemize expenses not covered above. (List inscellances expenses in line 24e. If line 24e amount exceeds 10% of line 25c, column (A) amount, list line 24e expenses on Schedule O.)  Annual Lunch 5 Member ship & Dues 7 1,288 7 1,128 7 1,128 7 1,1381	8					
9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management b Legal c Accounting 1,590 1,590 1,590 d Lobbying Professional fundraising services, See Part IV, line f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 20 Experiences, conventions, and amortization 21 Insurance 24 Other expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Annual Lunch 6,805 6,805 6,805 6,805 6,805 6,805 6,805 7 Stort and the services of the servi	_	'				
10 Payroll taxes 11 Fees for services (non-employees):	a					
11 Fees for services (non-employees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line (7) f Investment management fees g Other 2 Advertising and promotion 3 Office expenses 12 Advertising and promotion 13 Office expenses 258 258 258 14 Information technology 15 Royalties 6 Occupancy 17 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses i line 24e. If line 24e expenses on Schedule O) a Annual Lunch (A) amount, list line 24e expenses on Schedule O) a Annual Lunch (B) Miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. Column (A) amount, list line 24e expenses on Schedule O) a Annual Lunch (B) Miscellaneous (B) Joint costs from a combined educational campaign and fundratising solicitation. Check here   If	_	Devirell toyen				
a Management b Legal c Accounting 1,590 1,590 d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 258 258 14 Information technology 15 Royalties 6 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization 13 Insurance 14 Other expenses it line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Annual Lunch 6,805 b Membership & Dues 2,128 2,128 c Postage & Delivery 351 d Miscellaneous 249 e All other expenses 5 Total functional expenses Add lines 1 through 24e. If long and 11 and 11 and 12 and 12 and 12 and 12 and 13 and 12						
b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other 2 Advertising and promotion 3 Office expenses 1 Sex						
c Accounting d Lobbying e Professional fundralsing services. See Part IV, line 17 f Investment management fees g Other 2 Advertising and promotion 3 Office expenses 2 58 2 58 4 Information technology 15 Royalties 6 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a Annual Lunch b Membership & Dues 2 7,128 c Postage & Delivery 3 51 d Miscellaneous 2 49 e All other expenses. Add lines 1 through 24e 5 Total functional expenses. Add lines 1 through 24e 5 Total functional expenses. Add lines 1 through 24e 5 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundralish golicitation. Check here ▶ if	_					
d Lobbying e Professional fundraising services, See Part IV, line f Investment management fees g Other  2 Advertising and promotion 3 Office expenses 4 Information technology 5 Royalties 6 Occupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Payments to affiliates 12 Depreciation, depletion, and amortization 13 Insurance 14 Other expenses, llemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Annual Lunch 6, 805 b Membership & Dues 7 Conferences, conventions, and meetings 16 Conferences, conventions, and meetings 17 Expenses on Schedule O.) 18 Insurance 19 Other expenses on Schedule O.) 19 Annual Lunch 10 Annual Lunch 10 Annual Lunch 11 Annual Lunch 12 Annual Lunch 13 Annual Lunch 14 Annual Lunch 15 Annual Lunch 16 A 805 17 Annual Lunch 18 Annual Lunch 19 Annual Lunch 19 Annual Lunch 19 Annual Lunch 10 Annual Lunch 10 Annual Lunch 11 Annual Lunch 11 Annual Lunch 12 Annual Lunch 13 Annual Lunch 14 Annual Lunch 15 Annual Lunch 16 A 805 17 Annual Lunch 18 Payments of travel or entertainment expenses 19 Annual Lunch 10 Annual Lunch 10 Annual Lunch 11 Annual Lunch 11 Annual Lunch 12 Annual Lunch 13 Annual Lunch 14 Annual Lunch 15 Annual Lunch 16 Annual Lunch 17 Annual Lunch 18 Annual Lunch 18 Annual Lunch 19 Annual Lunch 19 Annual Lunch 19 Annual Lunch 19 Annual Lunch 10 Annual			1 500		1 500	
e Professional fundraising services. See Part IV. line f Investment management fees g Other  2 Advertising and promotion 3 Office expenses 2 58 4 Information technology 5 Royalties 6 Occupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings Interest 1 Payments to affiliates 2 Depreciation, depletion, and amortization 1 Insurance 2 Ofther expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule O.) a Annual Lunch b Membership & Dues 2 ,128 c Postage & Delivery 3 51 d Miscellaneous 2 49 e All other expenses. 5 Total functional expenses. Add lines 1 through 24e			1,590		1,590	
f Investment management fees g Other 2 Advertising and promotion 3 Office expenses 258 258 4 Information technology 5 Royalties 6 Occupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 11 Interest 12 Payments to affiliates 12 Pegreciation, depletion, and amortization 13 Insurance 14 Other expenses. Itemize expenses not covered above, (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Annual Lunch b Membership & Dues 2,128 c Postage & Delivery 351 d Miscellaneous 249 249 249 2All other expenses 25 Total functional expenses. Add lines 1 through 24e 10 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	d	, , , , , , , , , , , , , , , , , , , ,				
g Other 12 Advertising and promotion 13 Office expenses 258 258 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization Insurance 13 Insurance 14 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Annual Lunch 6, 805 b Membership & Dues 2, 128 c Postage & Delivery 351 d Miscellaneous e All other expenses 15 Total functional expenses. Add lines 1 through 24e. 10 Joint costs. Complete this line only if the organization reported in column ((B) joint costs from a combined educational campalgn and fundraising solicitation. Check here	е		7			
Advertising and promotion  3 Office expenses  258  258  258  14 Information technology  5 Royalties  6 Occupancy  7 Travel  8 Payments of travel or entertainment expenses for any federal, state, or local public officials  9 Conferences, conventions, and meetings  10 Interest  11 Payments to affiliates  12 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses. Itemize expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)  a Annual Lunch  b Membership & Dues  c Postage & Delivery  d Miscellaneous  249  All other expenses  25 Total functional expenses. Add lines 1 through 24e  a or both of the properties of the program of the progra	f	Investment management fees				
Advertising and promotion  Office expenses  258  258  258  Information technology  Social and an advertising and promotion  Occupancy  Travel  Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings interest  Payments to affiliates  Pepreciation, depletion, and amortization  Insurance  Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  Annual Lunch  Annual Lunch  Annual Lunch  Miscellaneous  249  All other expenses  Total functional expenses. Add lines 1 through 24e.  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campalgn and fundraising solicitation. Check here	g					
13 Office expenses 258 258 258 14 Information technology 58	12	Advertising and promotion				
14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2 Annual Lunch 6,805 6,805 2 Destage & Delivery 351 351 3 Miscellaneous 249 249 249 249 249 249 351 11,381 0 25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0 3 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundrásing solicitation. Check here in fire	13	0#:	258		258	
15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings Interest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Annual Lunch b Membership & Dues 2,128 2,128 c Postage & Delivery 351 351 d Miscellaneous 249 249 e All other expenses 25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  Occupancy 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  In if	14					
17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Interest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2 Annual Lunch 3 Annual Lunch 4 Membership & Dues 5 Destage & Delivery 7 351 7 Miscellaneous 8 All other expenses 9 All other expenses. Add lines 1 through 24e 9 All other expenses 10 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if if	15					
Travel  Repayments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings Interest  Payments to affiliates  Depreciation, depletion, and amortization Insurance  Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)  Annual Lunch  6,805  Membership & Dues  7,128  Postage & Delivery  351  Miscellaneous  All other expenses  All other expenses  All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here bill if	16	Occupancy				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a Annual Lunch  b Membership & Dues  c Postage & Delivery  d Miscellaneous  e All other expenses  5 Total functional expenses. Add lines 1 through 24e  134,106  122,725  11,381  0  0  0  10  11  124  134,106  122,725  11,381  0  10  10  10  10  10  10  10  10  1		T				
for any federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)  a Annual Lunch  b Membership & Dues  c Postage & Delivery  d Miscellaneous  e All other expenses  25 Total functional expenses. Add lines 1 through 24e.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campanign and fundraising solicitation. Check here   If			9			
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a Annual Lunch (A) amount, list line 24e expenses on Schedule O.)  b Membership & Dues 2,128 2,128 2,128 c Postage & Delivery 351 351 d Miscellaneous 249 249 e All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if		• •				
Interest   Payments to affiliates	10					
Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  Annual Lunch  Beautiful Schedule O.)  Annual Lunch  Comparison of the properties of the propertie		Internal				
Depreciation, depletion, and amortization Insurance  Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  Annual Lunch 6,805  Membership & Dues 2,128  C Postage & Delivery 351  d Miscellaneous 249  e All other expenses  Total functional expenses. Add lines 1 through 24e 134,106  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   If						
District   Continue						
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a Annual Lunch 6,805 6,805  b Membership & Dues 2,128 2,128  c Postage & Delivery 351 351  d Miscellaneous 249 249  e All other expenses  25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if						
above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a Annual Lunch 6,805  b Membership & Dues 2,128  c Postage & Delivery 351  d Miscellaneous 249  e All other expenses  25 Total functional expenses. Add lines 1 through 24e.  25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here in if	-	insurance				
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a Annual Lunch b Membership & Dues c Postage & Delivery d Miscellaneous e All other expenses  2 Total functional expenses. Add lines 1 through 24e  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  if	24	· · · · · · · · · · · · · · · · · · ·				
(A) amount, list line 24e expenses on Schedule O.)  a Annual Lunch 6,805 6,805  b Membership & Dues 2,128 2,128  c Postage & Delivery 351 351  d Miscellaneous 249 249  e All other expenses  25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if						
a Annual Lunch b Membership & Dues c Postage & Delivery d Miscellaneous e All other expenses  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if						
b Membership & Dues 2,128 c Postage & Delivery 351 351 d Miscellaneous 249 249 e All other expenses  25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if						
c Postage & Delivery 351 351 d Miscellaneous 249 e All other expenses  25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	а	······································	6,805			
d Miscellaneous e All other expenses  Total functional expenses. Add lines 1 through 24e  134,106  122,725  11,381  0  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	b					
e All other expenses  25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	С					
25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	d	Miscellaneous	249		249	
25 Total functional expenses. Add lines 1 through 24e 134,106 122,725 11,381 0  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if	е	All other expenses				
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here			134,106	122,725	11,381	0
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if		Joint costs. Complete this line only if the	• • •	,	, = = =	
fundraising solicitation. Check here 🕨 if		organization reported in column (B) joint costs				
iunidialsing solicitation. Check here 🚩 📗 II						
tollowing SOP 98-2 (ASC 958-720)		following SOP 98-2 (ASC 958-720)				

	X Balance Sheet			(A)		(B)
				Beginning of year		End of year
1	Cash—non-interest bearing			7,818	1	17,588
2				37,438	2	32,122
3	Pledges and grants receivable, net			_	3	
4	Accounts receivable, net				4	
5	Receivables from current and former officers, director					
	employees, and highest compensated employees. Co	mplete P	art II of			
	Schedule L	-			5	
6		ed under	section			
	4958(f)(1)), persons described in section 4958(c)(3)(E					
	employers and sponsoring organizations of section 50		_			
ō.	employees' beneficiary organizations (see instructions				6	
7					7	
8 3					8	
9	Dronaid avanage and deferred shares				9	
10	<b>a</b> Land, buildings, and equipment: cost or	1				
		10a	1,289,495			
	other basis. Complete Part VI of Schedule D  Less: accumulated depreciation	10b	1,289,495 201,880	1,121,565	10c	1,087,615
11	las contra anto accididate tra da da a accidida a			, , , , , , , , ,	11	,
					12	
13	• •				13	
_	Intangible assets			8,602	14	7,672
	Other seeds Cos Dort IV line 44			1,500		1,500
	Total assets. Add lines 1 through 15 (must equal line			1,176,923	16	1,146,497
	Accounts payable and accrued expenses			=/=====	17	
18				18		
19				19		
20					20	
21		/ of Sche	dule D	-	21	
	Payables to current and former officers, directors, trus					
=   =	employees, highest compensated employees, and dis	-				
	Onwellate Dant II of Oak adula I				22	
ة   <sub>23</sub>	Secured mortgages and notes payable to unrelated the				23	
	Unsecured notes and loans payable to unrelated third	-		665,229	24	634,449
25						
	parties, and other liabilities not included on lines 17-2					
	of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			665,229	26	634,449
	Organizations that follow SFAS 117, check here	and co	omplete			
<u> </u>	lines 27 through 29, and lines 33 and 34.		•			
27			650	511,694	27	512,048
5 28				-	28	-
29					29	
ב	Organizations that do not follow SFAS 117, check	here	and			
27 28 29 30 31 32 32	complete lines 30 through 34.					
ğ   30	Capital stock or trust principal, or current funds				30	
2 31					31	
32					32	
33				511,694	33	512,048
34				1,176,923	34	1,146,497

Form **990** (2011)

orn	n 990 (2011) Angel Society of Fallbrook 95-3258567			Pag	ge <b>12</b>
	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			<u></u>	X
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1			686
2	Total expenses (must equal Part IX, column (A), line 25)	. 2			106
3	Revenue less expenses. Subtract line 2 from line 1	. 3			420
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	51		694
5	Other changes in net assets or fund balances (explain in Schedule O)	. 5		9,	<u>774</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	. 6	51	.2,0	048
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2011)

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# **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

Name of the organization

Employer identification number 95-3258567

			Angel Societ	y of Fallbrook	•				95-	325	856	7		
Pa	ırt I	Reas	on for Public Charity	/ Status (All organizatio	ns mus	t compl	ete thi	s part	.) See	instru	uction	ns.		
The	orga	nization is no	t a private foundation beca	use it is: (For lines 1 through 1	11, check	only one	box.)							
1		A church, co	nvention of churches, or as	sociation of churches describe	ed in <b>sec</b>	tion 170	(b)(1)(A	)(i).						
2		A school des	scribed in section 170(b)(1	)(A)(ii). (Attach Schedule E.)										
3		A hospital or	a cooperative hospital serv	vice organization described in	section	170(b)(1)	(A)(iii).							
4		A medical re	search organization operat	ed in conjunction with a hospi	tal describ	oed in <b>se</b>	ction 1	70(b)(1	)(A)(iii)	. Enter	the ho	spital's	s name	Э,
		city, and stat	te:											
5		=	tion operated for the benefit (b)(1)(A)(iv). (Complete Pa	t of a college or university own	ned or ope	erated by	a gove	rnmenta	al unit d	lescribe	ed in			
6				governmental unit described i	n <b>sectio</b> i	170(b)(	1)(A)(v)	)_						
7	П		=	a substantial part of its suppor					n the ge	eneral p	oublic			
		•	section 170(b)(1)(A)(vi). (	·					Ū					
8				170(b)(1)(A)(vi). (Complete F	Part II.)									
9	X	-		(1) more than 33 1/3% of its s		m contri	butions,	membe	ership f	ees, an	nd gros	SS		
		=		mpt functions—subject to cert							_			
		-		and unrelated business taxable	-									
		acquired by	the organization after June	30, 1975. See section 509(a)	)(2). (Con	nplete Pa	rt III.)							
10		An organizat	tion organized and operated	d exclusively to test for public	safety. Se	e sectio	n 509(a	1)(4).						
11		An organizat	tion organized and operated	d exclusively for the benefit of,	to perfor	m the fur	nctions o	of, or to	carry o	ut the				
		purposes of	one or more publicly suppo	rted organizations described i	n section	509(a)(1	) or sec	tion 509	9(a)(2).	See se	ection			
		<b>509(a)(3).</b> C	heck the box that describes	the type of supporting organi	zation an	d comple	te lines	11e thr	ough 1	1h.				
		a Type	e I <b>b</b> Type II	c Type III-Function	nally integ	rated	d	Тур	e III–O	ther				
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons													
		other than fo	oundation managers and oth	ner than one or more publicly	supported	l organiza	ations d	escribe	d in sec	ction 50	)9(a)(1	)		
		or section 50						7						
f		If the organiz	zation received a written de	termination from the IRS that	it is a Typ	e I, Type	II, or T	/pe III s	upporti	ng				
		•	, check this box											. Ш
g		Since Augus	st 17, 2006, has the organiz	ation accepted any gift or con	tribution f	rom any	of the							
		following pe												
				controls, either alone or togeth	-								Yes	No
				e supported organization?								11g(i)		
		. ,	member of a person descr	***								11g(ii		
				described in (i) or (ii) above?								11g(ii	)	
<u>h</u>		Provide the	following information about	the supported organization(s)			l		T					
(i)		e of supported janization	(ii) EIN	(iii) Type of organization (described on lines 1-9	` '	organization sted in your		ou notify nization in		Is the		(vii) Am sup		
	Oig	jainzation		above or IRC section		document?	col. (i)	of your	(i) organi	ized in the	9	Зир	Joil	
				(see instructions))		l		oort?		S.?				
<u></u>					Yes	No	Yes	No	Yes	No				
(A)														
(D)														
(B)														
(C)														
(C)														
(D)					+				+		-			
(D)														
<u>/E\</u>					+				+					
(E)														
							l							

Page 2

Pa	Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)							
	(Complete only if you che						ualify under	
	Part III. If the organizatio	n fails to quali	fy under the t	ests listed belo	w, please con	nplete Part III.)		
	tion A. Public Support		T	T	T	T		
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(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							
	tion B. Total Support		T	1	1	ı		
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(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	<b>Total support.</b> Add lines 7 through 10							
12	Gross receipts from related activities, etc.	c. (see instructions	s)			12		
13	First five years. If the Form 990 is for th	e organization's f	irst, second, third	, fourth, or fifth tax	k year as a section	n 501(c)(3)		
	organization, check this box and stop he	ere					▶	
Sec	tion C. Computation of Public S							
14	Public support percentage for 2011 (line	6, column (f) divid	ded by line 11, co	olumn (f))		14	%	
15	Public support percentage from 2010 Sc						%	
16a								
	box and <b>stop here.</b> The organization qua	·					▶ ∟	
b	33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,							
	check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							
17a	a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is							
	10% or more, and if the organization me				-	•		
	Part IV how the organization meets the "	facts-and-circums	stances" test. The	organization qua	lifies as a publicly	supported		
	organization						▶ □	
b	10%-facts-and-circumstances test—2	•						
	15 is 10% or more, and if the organization							
	Explain in Part IV how the organization n	neets the "facts-a	nd-circumstances	s" test. The organi	zation qualifies as	a publicly	. —	
4.5							▶ ∟	
18	<b>Private foundation.</b> If the organization of instructions	and not check a bo	ox on line 13, 16a	, 16b, 17a, or 17b	, check this box a	nd see		

# 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.) If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization fails to	qualify under	the tests listed	d below, pleas	e complete Pa	art II.)	
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	67,937	42,515	33,610	8,243	38,034	190,339
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	211,089	201,939	225,264	186,140	231,212	1,055,644
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	279,026	244,454	258,874	194,383	269,246	1,245,983
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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.)						1,245,983
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	279,026	244,454	258,874	194,383	269,246	1,245,983
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,989	1,270	649	122	473	11,503
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	8,989	1,270	649	122	473	11,503
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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,						
	and 12.)	288,015	245,724	259,523	194,505	269,719	1,257,486
14	First five years. If the Form 990 is for the	_	st, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	. $\square$
<u> </u>	organization, check this box and stop he						▶
	tion C. Computation of Public S			(0)		11	
15	Public support percentage for 2011 (line 8						99.09%
16 Soc	Public support percentage from 2010 Sch					16	97.56%
	tion D. Computation of Investm			42 column (f))		47	1.0/
17 10	Investment income percentage for 2011 (					10	1%
18 19a	Investment income percentage from 2010 33 1/3% support tests—2011. If the organization in the support tests in the support test in the support test in the support tests in the support test in the support t				5 is more than 33	<del></del>	2 %
134	17 is not more than 33 1/3%, check this b	oox and stop here	. The organization	n qualifies as a p	ublicly supported	organization	<b>&gt;</b> X
b	33 1/3% support tests—2010. If the organization						nd
	line 18 is not more than 33 1/3%, check t	his box and stop	here. The organize	zation qualifies as	a publicly suppor	rted organization	▶

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (F	orm 990 or 990-EZ) 201	1 Angel Soc	iety of Fa	allbrook	95-32585 nations required by Pa	67 Page 4
1 art iv	Part II, line 17a or instructions).	17b; and Part III	, line 12. Also co	omplete this part t	for any additional infor	mation. (See
	mondonon.					
					W	

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

INAIIIE	or the organization		Employer identification number
A	ngel Society of Fallbrook		95-3258567
	art I Organizations Maintaining Donor Advised F	unds or Other Similar Funds	
	organization answered "Yes" to Form 990, Part		•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing t		
	funds are the organization's property, subject to the organization's e	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used	i
	only for charitable purposes and not for the benefit of the donor or do		
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org		orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (che		
	Preservation of land for public use (e.g., recreation or education)		-
	Protection of natural habitat	Preservation of a certified histo	oric structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified con	servation contribution in the form of a	conservation
	easement on the last day of the tax year.		I ald at the Find of the Tay Vo
	Total much so for some of some		Held at the End of the Tax Yea
	Total number of conservation easements		2a
	Total acreage restricted by conservation easements	eduded in (a)	2b
	Number of conservation easements on a certified historic structure in		2c
u	Number of conservation easements included in (c) acquired after 8/1 historic structure listed in the National Register		2d
2	Number of conservation easements modified, transferred, released,	extinguished or terminated by the organic	
3	tax year	extinguished, or terminated by the orga	anization during the
4	Number of states where property subject to conservation easement	is located ▶	
5	Does the organization have a written policy regarding the periodic m		
Ŭ	violations, and enforcement of the conservation easements it holds?		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enf		
	<b>&gt;</b>	3	•
7	Amount of expenses incurred in monitoring, inspecting, and enforcin	g conservation easements during the	/ear
	<b>&gt;</b> \$	-	
8	Does each conservation easement reported on line 2(d) above satis	fy the requirements of section 170(h)(4	4)(B)
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation ease		
	balance sheet, and include, if applicable, the text of the footnote to the	ne organization's financial statements t	that describes the
	organization's accounting for conservation easements.		
Pa	organizations Maintaining Collections of Ar	t, Historical Treasures, or Otl	her Similar Assets.
	Complete if the organization answered "Yes" to		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958)		
	works of art, historical treasures, or other similar assets held for pub		
	public service, provide, in Part XIV, the text of the footnote to its fina		
a	If the organization elected, as permitted under SFAS 116 (ASC 958)	-	
	works of art, historical treasures, or other similar assets held for pub		Turmerance of
	public service, provide the following amounts relating to these items:		<b>▶</b> ¢
	(i) Revenues included in Form 990, Part VIII, line 1		\$
2	(ii) Assets included in Form 990, Part X	or other similar assets for financial asi	n, provide the
2	If the organization received or held works of art, historical treasures, following amounts required to be reported under SFAS 116 (ASC 95)	_	n, provide the
а			<b>▶</b> \$
	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		• \$
N			F Ψ

	edule D (Form 990) 2011 Angel Sc					5-3258567		Page 2
Pa	rt III Organizations Maintaini							ntinued)
3	Using the organization's acquisition, accelection items (check all that apply):	ssion, and oth	ner reco	ords, check any of the	following that a	re a significant us	e of its	
а	Public exhibition		d 🗌 I	Loan or exchange pr	ograms			
b	Scholarly research			Other				
С	Preservation for future generations						•	
4	Provide a description of the organization's	s collections a	ind expl	ain how they further	the organization	's exempt purpose	in Part	
	XIV.							
5	During the year, did the organization solid	cit or receive d	lonation	s of art, historical tre	asures, or other	similar		
	assets to be sold to raise funds rather that	n to be maint	ained as	s part of the organiza	tion's collection	?	Yes	
Pa	rt IV Escrow and Custodial A					nswered "Yes"	to Form 990, Pa	art IV,
	line 9, or reported an amo	ount on For	m 990	), Part X, line 21.				
1a	Is the organization an agent, trustee, cust	todian or othe	r interm	ediary for contribution	ns or other asse	ts not		
	included on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part 2	XIV and comp	lete the	following table:				
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	F Ending balance  a Did the organization include an amount on Form 990, Part X, line 21?  Yes No							
	b If "Yes," explain the arrangement in Part XIV.							
Pa	rt V Endowment Funds. Con	nplete if the	e orgai	nization answere	d "Yes" to Fo	orm 990, Part I	√, line 10.	
		(a) Current y	/ear	(b) Prior year	(c) Two years be	ack (d) Three ye	ars back (e) Four ye	ears back
1a	Beginning of year balance							
b	Contributions							
	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
	End of year balance							
2		current year e	nd balar	nce (line 1g, column	(a)) held as:			
а	Board designated or quasi-endowment	. 9	6					
	Permanent endowment ▶ %							
	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c s	hould equal 1	00%.					
3a	Are there endowment funds not in the pos	ssession of th	e organi	ization that are held a	and administere	d for the	_	
	organization by:						Υ	es No
	(i) unrelated organizations						3a(i)	
	/!!\ valatad avaanimatiana						0 - (::)	
b	If "Yes" to 3a(ii), are the related organizat	ions listed as	required	d on Schedule R?				
4	Describe in Part XIV the intended uses of							
Pa	rt VI Land, Buildings, and Ec				line 10.			
	Description of property	(a) Cost	or other b	pasis (b) Cost or o	other basis	(c) Accumulated	(d) Book val	lue
		(inv	vestment)	(oth	*	depreciation		<u></u>
1a	Land			3'	73,000		373	3,000
	Buildings							
С	Leasehold improvements							
	Equipment							
	Other			9:	16,495	201,88	30 71 <i>4</i>	,615
r <sub>a4a</sub>	Add lines to through to (Column (d) mu		, 000 D			-	1 097	615

Schedule D (Form 990) 2011 Angel Society of F	Tallbrook	95-3258567	Page <b>3</b>
Part VII Investments—Other Securities. See For (a) Description of security or category	(b) Book value	(c) Method of valuation:	
(including name of security)	(b) Book value	Cost or end-of-year market va	ilue
(1) Financial derivatives		, , , , , , , , , , , , , , , , , , , ,	
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>		
Part VIII Investments—Program Related. See Fo			
(a) Description of investment type	(b) Book value	(c) Method of valuation:	
		Cost or end-of-year market va	ilue
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
<u>(7)</u> (8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line	15.		
(a) Description		(b)	) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		<b>&gt;</b>	
Part X Other Liabilities. See Form 990, Part X, I	ine 25.		
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the fo	notnote to the organization's fina	project statements that reports the	

**2.** FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Sche	dule D (Form 990) 2011 Angel Society of Fallbrook	95-325856		Page <b>4</b>
Pa	rt XI Reconciliation of Change in Net Assets from Form 990	to Audited Financial St	atemo	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 ar	nd 9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial State	ments With Revenue pe	r Retu	urn
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV.)			
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial State	ements With Expenses	per R	eturn
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
	rt XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I			
	$\emph{V}$ , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2	2d and 4b. Also complete this pa	art to p	rovide
any a	dditional information.			
• • • • •				
• • • • •				
• • • • • •				

Schedule D (F	orm 990) 2011 Supplemen	Angel	Society	of	Fallbr	ook	95-3	258567	Page <b>5</b>
Part XIV	Supplemen	ntal Inform	nation (conti	nued)					
• • • • • • • • • • • • • • • • • • • •									
		/							
								7	
•									

# SCHEDULE I (Form 990)

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

OMB No. 1545-0047
2011

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Open to

Name of the organization  Angel Society of E						dentification number		
Part I General Information on Grants ar  1 Does the organization maintain records to substantiate the selection criteria used to award the grants or assis  2 Describe in Part IV the organization's procedures for records.	e the amount of the tance?	e grants or	inds in the United Stat	es.			X Yes No	
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed								
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance	
(1) Boys & Girls Club of North County P.O. Box 476 Fallbrook CA 92028	95-2470435	501-c3	10,000				General Purpose	
(2) Fallbrook land Conservancy P.O. Box 170 Fallbrook CA 92028	33-0301237	501-c3	12,000	71			General Purpose	
(3) North County Solutions for Change 890 East Vista Way Vista CA 92084	33-0902617	501-c3	7,500				General Purpose	
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
<ul> <li>Enter total number of section 501(c)(3) and governme</li> <li>Enter total number of other organizations listed in the</li> </ul>	_	sted in the	line 1 table				<b>&gt;</b>	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.		(Form 990) (2011) Angel Societ	ty of Fallbro	ok 9	5-3258567		Page <b>2</b>
(a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (e) Method of valuation (book. (f) Description of non-cash assistance FMV, appraisal, other)  1 2 3 4 5 6 7 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	Part III				omplete if the organi:	zation answered "Yes" to	Form 990, Part IV, line 22.
recipients cash grant non-cash assistance FMV, appraisal, other)  1 2 3 4 5 6 7 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.							
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.		(a) Type of grant or assistance				(e) Method of valuation (book FMV, appraisal, other)	s, (f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	1						
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	2						
	3						
	4						
	5						
	6						
	7 Part IV	Supplemental Information, Co.	omplete this part to pr	rovide the informat	ion required in Part I	line 2, and any other add	ditional information
	· until	Cappionional information of	omplete the part to pr	Ovido tilo illionilat	ion roquilou in r unti,	, into 2, and any other day	ational information.
			7				

Schedule I (Form 990) (2011)

### SCHEDULE O (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.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization  Angel Society of	Fallbrook	Employer identification number 95 – 3258567
Form 990, Part VI, Line 2 -	Related Party Informat	ion Among Officers
Billie Foli	Fran White	·
Treasurer	Director	
Mother - Daughter		
Bonnie Bell	Donna Bore	n
Director	Director	
Sisters		
Form 990, Part VI, Line 6 -	Classes of Members or	Stockholders
The Angel Society is governe	ed by 33 members of the	Board of Directors who
are responsible for the day-	-to-day operations of t	he Angel Shop. They are
supported by more than 300 a	associate members who a	ssist with the staffing
at the shop and other duties	s, as well as 200 addit	ional members who provid
financial contributions and	donations of merchandi	se.
Members in good standing may	y work in the Angel sho	op which is a thrift
store. The store is staffed	d entirely by volunteer	s and is stocked totally
with donated merchandise.		
Members may also assist in A	Angel Society projects	on invitation from the
Board of Directors in a limi	ited capacity only.	
Form 990, Part VI, Line 7a -	- Election of Members a	nd Their Rights
Consideration for membership	on the Board requries	Angel Society membersh

Name of the organization

### Angel Society of Fallbrook

Employer identification number 95-3258567

for at least one year, time worked in the shop, willingness to actively participate and sponsorship by a current Board Member.

The number of new members to be accepted shall be decided at the January board meeting. Membership Chairman will have nomination forms available. Nominations for new members are due at the February meeting. Sponsors may speak for their nominee. No names shall be submitted after this time. The membership committee shall present names of all candidates in random order on a ballot given to each board member at the March board meeting. Ballots will be mailed to Board members requesting to vote absentee. Ballots must be received by the membership chairman two weeks before the April meeting when the results will be announced. In the event of a tie, the name shall be chosen by lot.

New board members shall attend an orientation meeting held by the membership chairman prior to attending their first regular meeting as Board members in May. The purpose of the meeting is to aquaint new member with the by-laws, standing rules, and shop rules.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A select member of the board is assigned to review Form 990 for accuracy and comprehensiveness. The 990 is then presented to the Baord of Director for their approval before it is signed by an officer of the organization.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Parlimentarian (past president) implements conflict of interest policy.

She reviews conflict of interest forms signed by directors annually. She monitors the voting process.

Form **4562** 

## **Depreciation and Amortization**

### (Including Information on Listed Property)

OMB No. 1545-0172

Attachment Seguence No.

Department of the Treasury
Internal Revenue Service (99)

See separate instructions.

► Attach to your tax return.

Identifying number Name(s) shown on return Angel Society of Fallbrook 95-3258567 Business or activity to which this form relates Angel Society Shop Sales **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 500,000 1 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11. 12 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election ..... 15 941 16 Other depreciation (including ACRS) . MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 52,767MACRS deductions for assets placed in service in tax years beginning before 2011 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction placed in period only-see instructions) 19a 3-year property 9,866 5.0 200DB HY 5-year property 2,439 7.0 HY 200DB 7-year property d 10-year property e 15-year property 20-year property g 25-year property 25 yrs. h Residential rental S/L 27.5 yrs. MM property 27.5 yrs. MM S/L Nonresidential real MM 39 yrs. S/L property MM S/L Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs. S/L c 40-year 40 yrs. MM S/L **Summary** (See instructions.) Part IV Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 56,029 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

	ngel 4562 (2011)	Society	of Fallk	rook			95-3	2585	567							Page <b>2</b>
	art V	Listed Prop entertainme Note: For any	erty (Include nt, recreation vehicle for which a) through (c) of	i, or amus	semen	it.) standar	d milead	ie rate d	or deduc	ting lea	•			•		
			A—Depreciation								or limits	for pas	senger a	automo	biles.)	
24a	Do you ha	ve evidence to support					Yes	No				evidence			Yes	No
Туре	(a) (b) (c) Business/investment use percentage			(d) Cost or other basis			(e) Basis for depreciation (business/investment use only)			(f) (g) Recovery Method/ period Convention		(h) Depreciation deduction		tion	(i) Elected section 179 cost	
25	Special	depreciation allo	wance for qualifi	ed listed pr	operty p	laced ir	service	during								
		ear and used mo				s use (s	ee instru	uctions)			2	5				
26	Propert	used more than	50% in a qualifi	ed busines:	s use:				1							
			0,													
			%													
			%													
27	Propert	y used 50% or les	ss in a qualified l	business us	se:	l .			L			L				
		9/			, D						<u>L-</u>					
			%							S/I						
28		ounts in column (	• •	•							2			1		
29	Add am	ounts in column (	(i), line 26. Enter											29		
0									Vehicle				<b>.</b>			
		section for vehic			•						•				venicies	
to yo	our emplo	yees, first answe	r the questions i	n Section C	1	ir you m a)	1	exceptio o)		ipieting c)		d)		enicies. e)	(1	)
30	Total bu	einoss/invostmo	uring	icle 1							cle 4 Vehicle 5		Vehicle 6			
30																
31	the year <b>(do not</b> include commuting miles)  Total commuting miles driven during the year															
32	Total ot	Total other personal (noncommuting) miles														
33	driven Total m	les driven during	the year. Add lin	 nes												
	30 throu	ıgh 32						1	1			1		T		
34		vehicle available	e for personal us	e	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	_	off-duty hours?														
35		vehicle used pri		)												
		owner or related														
36	Is anoth	er vehicle availal														
			ection C—Ques							-						
		questions to deto				complet	ing Sec	ion B to	or venicie	es usea	by emp	oloyees v	wno <b>are</b>	not		
						norcono	l uco of	vohiolo	s includ	ina oom	muting	by			Voc	No
37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?														res	No
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your															
-	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners															
39		treat all use of ve			-											
40	-	provide more tha							your em							
	-	ne vehicles, and ı			-				- 							
41	Do you	meet the requirer	ments concernin	g qualified a	automol	oile dem										
	Note: If	your answer to 3	37, 38, 39, 40, or	41 is "Yes,	" do no	comple	te Secti	on B fo	the cov	ered ve	hicles.					
Pa	art VI	Amortizatio	on													
	(a) Description of costs			(b) Date amo begi		(c) Amortizable amount			(d) Code section			(e)  Amortization period or percentage  Amortiz			(f) zation for this year	
42	Amortiz	ation of costs tha	t begins durina v	our 2011 ta	ax year	(see ins	tructions	s):		1	I					

930 930 Form 4562 (2011)

43

44

43

Amortization of costs that began before your 2011 tax year

Total. Add amounts in column (f). See the instructions for where to report