

Form 1023 Checklist**(Revised June 2006)****Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code**

Note. Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

Check each box to finish your application (Form 1023). Send this completed Checklist with your filled-in application. If you have not answered all the items below, your application may be returned to you as incomplete.

- Assemble the application and materials in this order:
- Form 1023 Checklist
 - Form 2848, *Power of Attorney and Declaration of Representative* (if filing)
 - ~~Form 8821, *Tax Information Authorization* (if filing)~~
 - ~~Expedite request (if requesting)~~
 - Application (Form 1023 and Schedules A through H, as required)
 - Articles of organization
 - Amendments to articles of organization in chronological order
 - Bylaws or other rules of operation and amendments
 - ~~Documentation of nondiscriminatory policy for schools, as required by Schedule B~~
 - ~~Form 5768, *Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation* (if filing)~~
 - All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN.
- User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.
- Employer Identification Number (EIN)
- Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
- You must provide specific details about your past, present, and planned activities.
 - Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
 - Describe your purposes and proposed activities in specific easily understood terms.
 - Financial information should correspond with proposed activities.
- Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.
- | | | | |
|------------|--|------------|--|
| Schedule A | Yes ___ No <input checked="" type="checkbox"/> | Schedule E | Yes ___ No <input checked="" type="checkbox"/> |
| Schedule B | Yes ___ No <input checked="" type="checkbox"/> | Schedule F | Yes ___ No <input checked="" type="checkbox"/> |
| Schedule C | Yes ___ No <input checked="" type="checkbox"/> | Schedule G | Yes ___ No <input checked="" type="checkbox"/> |
| Schedule D | Yes ___ No <input checked="" type="checkbox"/> | Schedule H | Yes <input checked="" type="checkbox"/> No ___ |

- An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
 - Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) Pg. 1, Art. II, Par.
 - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law Pg. 2, Art. V.
- Signature of an officer, director, trustee, or other official who is authorized to sign the application.
 - Signature at Part XI of Form 1023.
- Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service
P.O. Box 192
Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service
201 West Rivercenter Blvd.
Attn: Extracting Stop 312
Covington, KY 41011

Power of Attorney and Declaration of Representative

OMB No. 1545-0150
 For IRS Use Only
 Received by: _____
 Name _____
 Telephone _____
 Function _____
 Date / /

▶ Type or print. ▶ See the separate instructions.

Part I Power of Attorney

Caution: Form 2848 will not be honored for any purpose other than representation before the IRS.

1 Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address Sadasarana Children's Education Fund c/o St. Philip the Apostle Church 7100 Stockdale Highway Bakersfield, CA 93309	Social security number(s) _____ _____ _____ Daytime telephone number (661) 328-9954	Employer identification number 71 : 0979332 Plan number (if applicable)
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hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

2 Representative(s) must sign and date this form on page 2, Part II.

Name and address Errol G. Shaw, Esq. 330 H Street, Suite 3 Bakersfield, CA 93304	CAF No. _____ Telephone No. 661-327-9127 Fax No. 661-327-9120 Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ Telephone No. _____ Fax No. _____ Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ Telephone No. _____ Fax No. _____ Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

3 Tax matters

Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)
501(c)(3) status	1023	

4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for **Line 4. Specific uses not recorded on CAF.**

5 Acts authorized. The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative, the power to sign certain returns, or the power to execute a request for disclosure of tax returns or return information to a third party. See the line 5 instructions for more information.

Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See **Unenrolled Return Preparer** on page 2 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Circular 230. See the line 5 instructions for restrictions on tax matters partners.

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: _____

6 Receipt of refund checks. If you want to authorize a representative named on line 2 to receive, **BUT NOT TO ENDORSE OR CASH**, refund checks, initial here _____ and list the name of that representative below.

Name of representative to receive refund check(s) ▶ _____

7 Notices and communications. Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.

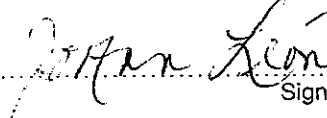
- a If you also want the second representative listed to receive a copy of notices and communications, check this box
- b If you do not want any notices or communications sent to your representative(s), check this box

8 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here.

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

9 Signature of taxpayer(s). If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

▶ IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.


3/27/07
Treasurer

Signature
Date
Title (if applicable)

Jo Ann Leon

Print name of taxpayer from line 1 if other than individual

Print Name
PIN Number

Signature
Date
Title (if applicable)

Print Name

PIN Number

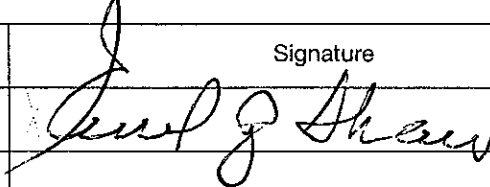
Part II Declaration of Representative

Caution: Students with a special order to represent taxpayers in Qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program, see the instructions for Part II.

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Treasury Department Circular No. 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
 - a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c Enrolled Agent—enrolled as an agent under the requirements of Treasury Department Circular No. 230.
 - d Officer—a bona fide officer of the taxpayer's organization.
 - e Full-Time Employee—a full-time employee of the taxpayer.
 - f Family Member—a member of the taxpayer's immediate family (i.e., spouse, parent, child, brother, or sister).
 - g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Service is limited by section 10.3(d) of Treasury Department Circular No. 230).
 - h Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Treasury Department Circular No. 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See **Unenrolled Return Preparer** on page 2 of the instructions.

▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions.

Designation—Insert above letter (a-h)	Jurisdiction (state) or identification	Signature	Date
a	ca		3/27/07

**Application for Recognition of Exemption
 Under Section 501(c)(3) of the Internal Revenue Code**

Note: If exempt status is approved, this application will be open for public inspection.

Use the instructions to complete this application and for a definition of all **bold** items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at www.irs.gov for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts I - XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

Part I Identification of Applicant

1 Full name of organization (exactly as it appears in your organizing document)		2 c/o Name (if applicable)	
Sadasarana Children's Education Fund		St. Philip the Apostle Church	
3 Mailing address (Number and street) (see instructions)	Room/Suite	4 Employer Identification Number (EIN)	
7100 Stockdale Highway		71-0979332	
City or town, state or country, and ZIP + 4		5 Month the annual accounting period ends (01 - 12)	
Bakersfield, CA 93309		12	
6 Primary contact (officer, director, trustee, or authorized representative)		b Phone: (661) 328-9954	
a Name: Father Titus Rodrigo OSB		c Fax: (optional) (661) 834-2214	
7 Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, <i>Power of Attorney and Declaration of Representative</i> , with your application if you would like us to communicate with your representative.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8 Was a person who is not one of your officers, directors, trustees, employees, or an authorized representative listed in line 7, paid, or promised payment, to help plan, manage, or advise you about the structure or activities of your organization, or about your financial or tax matters? If "Yes," provide the person's name, the name and address of the person's firm, the amounts paid or promised to be paid, and describe that person's role.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9a Organization's website: www.sceflanka.org			
b Organization's email: (optional) bk542003@yahoo.com			
10 Certain organizations are not required to file an information return (Form 990 or Form 990-EZ). If you are granted tax-exemption, are you claiming to be excused from filing Form 990 or Form 990-EZ? If "Yes," explain. See the instructions for a description of organizations not required to file Form 990 or Form 990-EZ.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11 Date incorporated if a corporation, or formed, if other than a corporation. (MM/DD/YYYY)		02 / 24 / 2005	
12 Were you formed under the laws of a foreign country ? If "Yes," state the country.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part II Organizational Structure

You must be a corporation (including a limited liability company), an unincorporated association, or a trust to be tax exempt. (See instructions.) **DO NOT file this form unless you can check "Yes" on lines 1, 2, 3, or 4.**

- 1 Are you a **corporation**? If "Yes," attach a copy of your articles of incorporation showing **certification of filing** with the appropriate state agency. Include copies of any amendments to your articles and be sure they also show state filing certification. Yes No
- 2 Are you a **limited liability company (LLC)**? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application. Yes No
- 3 Are you an **unincorporated association**? If "Yes," attach a copy of your articles of association, constitution, or other similar organizing document that is dated and includes at least two signatures. Include signed and dated copies of any amendments. Yes No
- 4a Are you a **trust**? If "Yes," attach a signed and dated copy of your trust agreement. Include signed and dated copies of any amendments. Yes No
- b Have you been funded? If "No," explain how you are formed without anything of value placed in trust. Yes No
- 5 Have you adopted **bylaws**? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected. Yes No

Part III Required Provisions in Your Organizing Document

The following questions are designed to ensure that when you file this application, your organizing document contains the required provisions to meet the organizational test under section 501(c)(3). Unless you can check the boxes in both lines 1 and 2, your organizing document does not meet the organizational test. **DO NOT file this application until you have amended your organizing document.** Submit your original and amended organizing documents (showing state filing certification if you are a corporation or an LLC) with your application.

- 1 Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph): **Page 1, Article II, Paragraph B.**
- 2a Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c.
- 2b If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. **Page 2, Article V.**
- 2c See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state: **CA**

Part IV Narrative Description of Your Activities

Using an attachment, describe your *past, present, and planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors

- 1a List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
Father Titus Rodrigo	President	7100 Stockdale Highway Bakersfield, CA 93309	none
Alex Padilla, Jr.	Vice-President/Director		none
Melissa Gaeta	Secretary/Director	P.O. Box 10754 Bakersfield, CA 93389	none
Joann Leon	Treasurer/Director		none
Begonia de Leon	Assistant V.P./Director		none

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

b List the names, titles, and mailing addresses of each of your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation. Do not include officers, directors, or trustees listed in line 1a.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
N/A			

c List the names, names of businesses, and mailing addresses of your five highest compensated independent contractors that receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
N/A			

The following "Yes" or "No" questions relate to *past, present, or planned* relationships, transactions, or agreements with your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, and 1c.

2a Are any of your officers, directors, or trustees **related** to each other through **family or business relationships**? If "Yes," identify the individuals and explain the relationship. Yes No

b Do you have a business relationship with any of your officers, directors, or trustees other than through their position as an officer, director, or trustee? If "Yes," identify the individuals and describe the business relationship with each of your officers, directors, or trustees. Yes No

c Are any of your officers, directors, or trustees related to your highest compensated employees or highest compensated independent contractors listed on lines 1b or 1c through family or business relationships? If "Yes," identify the individuals and explain the relationship. Yes No

3a For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties.

b Do any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c receive compensation from any other organizations, whether tax exempt or taxable, that are related to you through **common control**? If "Yes," identify the individuals, explain the relationship between you and the other organization, and describe the compensation arrangement. Yes No

4 In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption. Answer "Yes" to all the practices you use.

a Do you or will the individuals that approve compensation arrangements follow a conflict of interest policy? Yes No

b Do you or will you approve compensation arrangements in advance of paying compensation? Yes No

c Do you or will you document in writing the date and terms of approved compensation arrangements? Yes No

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- d Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements? Yes No
- e Do you or will you approve compensation arrangements based on information about compensation paid by **similarly situated** taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. Yes No
- f Do you or will you record in writing both the information on which you relied to base your decision and its source? Yes No
- g If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is **reasonable** for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.

- 5a Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c. Yes No
- b What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation?
- c What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves?

Note: A conflict of interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.

- 6a Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through **non-fixed payments**, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. Yes No
- b Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation. Yes No

- 7a Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine that you pay no more than **fair market value**. Attach copies of any written contracts or other agreements relating to such purchases. Yes No
- b Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales. Yes No

- 8a Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f. Yes No
- b Describe any written or oral arrangements that you made or intend to make.
- c Identify with whom you have or will have such arrangements.
- d Explain how the terms are or will be negotiated at arm's length.
- e Explain how you determine you pay no more than fair market value or you are paid at least fair market value.
- f Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.

- 9a Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f. Yes No

Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)

- b Describe any written or oral arrangements you made or intend to make.
- c Identify with whom you have or will have such arrangements.
- d Explain how the terms are or will be negotiated at arm's length.
- e Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You

The following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and organizations as part of your activities. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1a In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals. Yes No
- b In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations. Yes No
- 2 Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program. Yes No
- 3 Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds. Yes No

Part VII Your History

The following "Yes" or "No" questions relate to your history. (See instructions.)

- 1 Are you a **successor** to another organization? Answer "Yes," if you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to non-profit status. If "Yes," complete Schedule G. Yes No
- 2 Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E. Yes No

Part VIII Your Specific Activities

The following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropriate box. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1 Do you support or oppose candidates in **political campaigns** in any way? If "Yes," explain. Yes No
- 2a Do you attempt to **influence legislation**? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a. Yes No
- b Have you made or are you making an **election** to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities. Yes No
- 3a Do you or will you operate bingo or **gaming** activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. **Revenue and expenses** should be provided for the time periods specified in Part IX, Financial Data. Yes No
- b Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies or any written contracts or other agreements relating to such arrangements. Yes No
- c List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo.

Part VIII Your Specific Activities (Continued)

- 4a** Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct. (See instructions.) **Yes** **No**
- | | |
|---|---|
| <input type="checkbox"/> mail solicitations | <input type="checkbox"/> phone solicitations |
| <input type="checkbox"/> email solicitations | <input checked="" type="checkbox"/> accept donations on your website |
| <input checked="" type="checkbox"/> personal solicitations | <input checked="" type="checkbox"/> receive donations from another organization's website |
| <input type="checkbox"/> vehicle, boat, plane, or similar donations | <input type="checkbox"/> government grant solicitations |
| <input type="checkbox"/> foundation grant solicitations | <input checked="" type="checkbox"/> Other Donations for religious artifacts |

Attach a description of each fundraising program.

- b** Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements. **Yes** **No**
- c** Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements. **Yes** **No**
- d** List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you.
- e** Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes" if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors. **Yes** **No**

5 Are you **affiliated** with a governmental unit? If "Yes," explain. **Yes** **No**

6a Do you or will you engage in **economic development**? If "Yes," describe your program. **Yes** **No**

b Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.

7a Do or will persons other than your employees or volunteers **develop** your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees. **Yes** **No**

b Do or will persons other than your employees or volunteers **manage** your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees. **Yes** **No**

c If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements.

8 Do you or will you enter into **joint ventures**, including partnerships or **limited liability companies** treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate. **Yes** **No**

9a Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10. **Yes** **No**

b Do you provide child care so that parents or caretakers of children you care for can be **gainfully employed** (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). **Yes** **No**

c Of the children for whom you provide child care, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). **Yes** **No**

d Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k). **Yes** **No**

10 Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other **intellectual property**? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed. **Yes** **No**

Part VIII Your Specific Activities (Continued)

- 11** Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution. Yes No
-
- 12a** Do you or will you operate in a **foreign country or countries**? If "Yes," answer lines 12b through 12d. If "No," go to line 13a. Yes No
- b** Name the foreign countries and regions within the countries in which you operate.
- c** Describe your operations in each country and region in which you operate.
- d** Describe how your operations in each country and region further your exempt purposes.
-
- 13a** Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a. Yes No
- b** Describe how your grants, loans, or other distributions to organizations further your exempt purposes.
- c** Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract. Yes No
- d** Identify each recipient organization and any **relationship** between you and the recipient organization.
- e** Describe the records you keep with respect to the grants, loans, or other distributions you make.
- f** Describe your selection process, including whether you do any of the following:
- (i)** Do you require an application form? If "Yes," attach a copy of the form. Yes No
- (ii)** Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused. Yes No
- g** Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.
-
- 14a** Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15. Yes No
- b** Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.
- c** Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries. Yes No
- d** Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors. Yes No
- e** Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information. Yes No
- f** Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately. Yes No

Part VIII Your Specific Activities (Continued)

- | | | | |
|----|--|---|--|
| 15 | Do you have a close connection with any organizations? If "Yes," explain. | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16 | Are you applying for exemption as a cooperative hospital service organization under section 501(e)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 17 | Are you applying for exemption as a cooperative service organization of operating educational organizations under section 501(f)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 18 | Are you applying for exemption as a charitable risk pool under section 501(n)? If "Yes," explain. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 19 | Do you or will you operate a school ? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 20 | Is your main function to provide hospital or medical care ? If "Yes," complete Schedule C. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 21 | Do you or will you provide low-income housing or housing for the elderly or handicapped ? If "Yes," complete Schedule F. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 22 | Do you or will you provide scholarships, fellowships, educational loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H. | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Note: Private foundations may use Schedule H to request advance approval of individual grant procedures.

Part IX Financial Data

For purposes of this schedule, years in existence refer to completed tax years. If in existence 4 or more years, complete the schedule for the most recent 4 tax years. If in existence more than 1 year but less than 4 years, complete the statements for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. If in existence less than 1 year, provide projections of your likely revenues and expenses for the current year and the 2 following years, based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. (See instructions.)

A. Statement of Revenues and Expenses

Type of revenue or expense	Current tax year	3 prior tax years or 2 succeeding tax years			(e) Provide Total for (a) through (d)
	(a) From <u>01/01/07</u> To <u>01/31/07</u>	(b) From <u>01/01/06</u> To <u>12/31/06</u>	(c) From <u>02/24/05</u> To <u>12/31/05</u>	(d) From To	
Revenues					
1 Gifts, grants, and contributions received (do not include unusual grants)	1,970.	9,391.	16,816.		28,177.
2 Membership fees received					0.
3 Gross investment income					0.
4 Net unrelated business income					0.
5 Taxes levied for your benefit					0.
6 Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)					0.
7 Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)					0.
8 Total of lines 1 through 7	1,970.	9,391.	16,816.	0.	28,177.
9 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)					0.
10 Total of lines 8 and 9	1,970.	9,391.	16,816.	0.	28,177.
11 Net gain or loss on sale of capital assets (attach schedule and see instructions)					0.
12 Unusual grants					0.
13 Total Revenue Add lines 10 through 12	1,970.	9,391.	16,816.	0.	28,177.
Expenses					
14 Fundraising expenses		1,418.	635.		
15 Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)	770.	7,191.	3,259.		
16 Disbursements to or for the benefit of members (attach an itemized list)					
17 Compensation of officers, directors, and trustees					
18 Other salaries and wages					
19 Interest expense					
20 Occupancy (rent, utilities, etc.)	35.	318.	268.		
21 Depreciation and depletion					
22 Professional fees					
23 Any expense not otherwise classified, such as program services (attach itemized list)	20.	775.	415.		
24 Total Expenses Add lines 14 through 23	825.	9,702.	4,576.	0.	

Part IX Financial Data (Continued)

B. Balance Sheet (for your most recently completed tax year)

Year End:

(Whole dollars)

Assets			
1	Cash	1	14,603.
2	Accounts receivable, net	2	
3	Inventories	3	2,340.
4	Bonds and notes receivable (attach an itemized list)	4	
5	Corporate stocks (attach an itemized list)	5	
6	Loans receivable (attach an itemized list)	6	
7	Other investments (attach an itemized list)	7	
8	Depreciable and depletable assets (attach an itemized list)	8	
9	Land	9	
10	Other assets (attach an itemized list)	10	
11	Total Assets (add lines 1 through 10)	11	16,943.
Liabilities			
12	Accounts payable	12	5,013.
13	Contributions, gifts, grants, etc. payable	13	
14	Mortgages and notes payable (attach an itemized list)	14	
15	Other liabilities (attach an itemized list)	15	
16	Total Liabilities (add lines 12 through 15)	16	5,013.
Fund Balances or Net Assets			
17	Total fund balances or net assets	17	11,930.
18	Total Liabilities and Fund Balances or Net Assets (add lines 16 and 17)	18	16,943.
19	Have there been any substantial changes in your assets or liabilities since the end of the period shown above? If "Yes," explain.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Part X Public Charity Status

Part X is designed to classify you as an organization that is either a **private foundation** or a **public charity**. Public charity status is a more favorable tax status than private foundation status. If you are a private foundation, Part X is designed to further determine whether you are a **private operating foundation**. (See instructions.)

- 1a Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed. If you are unsure, see the instructions. Yes No
- b As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law. Attach a statement that describes specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document or by operation of state law. See the instructions, including Appendix B, for information about the special provisions that need to be contained in your organizing document. Go to line 2.
- 2 Are you a private operating foundation? To be a private operating foundation you must engage directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. If "Yes," go to line 3. If "No," go to the signature section of Part XI. Yes No
- 3 Have you existed for one or more years? If "Yes," attach financial information showing that you are a private operating foundation; go to the signature section of Part XI. If "No," continue to line 4. Yes No
- 4 Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation? Yes No
- 5 If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box.
The organization is not a private foundation because it is:
 - a 509(a)(1) and 170(b)(1)(A)(i)—a church or a convention or association of churches. Complete and attach Schedule A.
 - b 509(a)(1) and 170(b)(1)(A)(ii)—a school. Complete and attach Schedule B.
 - c 509(a)(1) and 170(b)(1)(A)(iii)—a hospital, a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C.
 - d 509(a)(3)—an organization supporting either one or more organizations described in line 5a through c, f, g, or h or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.

Part X Public Charity Status (Continued)

- e 509(a)(4)—an organization organized and operated exclusively for testing for public safety.
- f 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.
- g 509(a)(1) and 170(b)(1)(A)(vi)—an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.
- h 509(a)(2)—an organization that normally receives not more than one-third of its financial support from gross investment income and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).
- i A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.

6 If you checked box g, h, or i in question 5 above, you must request either an **advance** or a **definitive ruling** by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.

- a **Request for Advance Ruling:** By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, *Extending the Tax Assessment Period*, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at www.irs.gov or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.

Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

For Organization


(Signature of Officer, Director, Trustee, or other authorized official)

Jo Ann Leon
(Type or print name of signer)

3/27/07
(Date)

Treasurer
(Type or print title or authority of signer)

For IRS Use Only

IRS Director, Exempt Organizations

(Date)

- b **Request for Definitive Ruling:** Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6b(i) and (ii).
- (i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses. _____
- (b) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," check this box.
- (ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each **disqualified person**. If the answer is "None," check this box.
- (b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.

7 Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual. Yes No

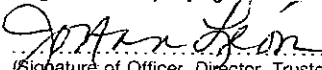
Part XI User Fee Information

You must include a user fee payment with this application. It will not be processed without your paid user fee. If your average annual gross receipts have exceeded or will exceed \$10,000 annually over a 4-year period, you must submit payment of \$750. If your gross receipts have not exceeded or will not exceed \$10,000 annually over a 4-year period, the required user fee payment is \$300. See instructions for Part XI, for a definition of **gross receipts** over a 4-year period. Your check or money order must be made payable to the United States Treasury. *User fees are subject to change. Check our website at www.irs.gov and type "User Fee" in the keyword box, or call Customer Account Services at 1-877-829-5500 for current information.*

- 1 Have your annual gross receipts averaged or are they expected to average not more than \$10,000? Yes No
 If "Yes," check the box on line 2 and enclose a user fee payment of \$300 (Subject to change—see above).
 If "No," check the box on line 3 and enclose a user fee payment of \$750 (Subject to change—see above).
- 2 Check the box if you have enclosed the reduced user fee payment of \$300 (Subject to change).
- 3 Check the box if you have enclosed the user fee payment of \$750 (Subject to change).

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please Sign Here


 (Signature of Officer, Director, Trustee, or other authorized official)

Jo Ann Leon
 (Type or print name of signer)

3/27/07
 (Date)

Treasurer
 (Type or print title or authority of signer)

Reminder: Send the completed Form 1023 Checklist with your filled-in-application.

Schedule H. Organizations Providing Scholarships, Fellowships, Educational Loans, or Other Educational Grants to Individuals and Private Foundations Requesting Advance Approval of Individual Grant Procedures

Section I *Names of individual recipients are not required to be listed in Schedule H. Public charities and private foundations complete lines 1a through 7 of this section. See the instructions to Part X if you are not sure whether you are a public charity or a private foundation.*

- 1a Describe the types of educational grants you provide to individuals, such as scholarships, fellowships, loans, etc.
 - b Describe the purpose and amount of your scholarships, fellowships, and other educational grants and loans that you award.
 - c If you award educational loans, explain the terms of the loans (interest rate, length, forgiveness, etc.). *N/A*
 - d Specify how your program is publicized. *Word of Mouth/Request*
 - e Provide copies of any solicitation or announcement materials. *N/A*
 - f Provide a sample copy of the application used.
-
- 2 Do you maintain case histories showing recipients of your scholarships, fellowships, educational loans, or other educational grants, including names, addresses, purposes of awards, amount of each grant, manner of selection, and relationship (if any) to officers, trustees, or donors of funds to you? If "No," refer to the instructions. Yes No
-
- 3 Describe the specific criteria you use to determine who is eligible for your program. (For example, eligibility selection criteria could consist of graduating high school students from a particular high school who will attend college, writers of scholarly works about American history, etc.)
-
- 4a Describe the specific criteria you use to select recipients. (For example, specific selection criteria could consist of prior academic performance, financial need, etc.)
- b Describe how you determine the number of grants that will be made annually.
- c Describe how you determine the amount of each of your grants.
- d Describe any requirement or condition that you impose on recipients to obtain, maintain, or qualify for renewal of a grant. (For example, specific requirements or conditions could consist of attendance at a four-year college, maintaining a certain grade point average, teaching in public school after graduation from college, etc.)
-
- 5 Describe your procedures for supervising the scholarships, fellowships, educational loans, or other educational grants. Describe whether you obtain reports and grade transcripts from recipients, or you pay grants directly to a school under an arrangement whereby the school will apply the grant funds only for enrolled students who are in good standing. Also, describe your procedures for taking action if the terms of the award are violated.
-
- 6 Who is on the selection committee for the awards made under your program, including names of current committee members, criteria for committee membership, and the method of replacing committee members?
-
- 7 Are relatives of members of the selection committee, or of your officers, directors, or **substantial contributors** eligible for awards made under your program? If "Yes," what measures are taken to ensure unbiased selections? Yes No

Note. If you are a private foundation, you are not permitted to provide educational grants to **disqualified persons**. Disqualified persons include your substantial contributors and foundation managers and certain family members of disqualified persons.

Section II *Private foundations complete lines 1a through 4f of this section. Public charities do not complete this section.*

- 1a If we determine that you are a private foundation, do you want this application to be considered as a request for advance approval of grant making procedures? Yes No *N/A*
- b For which section(s) do you wish to be considered?
- 4945(g)(1)—Scholarship or fellowship grant to an individual for study at an educational institution
 - 4945(g)(3)—Other grants, including loans, to an individual for travel, study, or other similar purposes, to enhance a particular skill of the grantee or to produce a specific product
-
- 2 Do you represent that you will (1) arrange to receive and review grantee reports annually and upon completion of the purpose for which the grant was awarded, (2) investigate diversions of funds from their intended purposes, and (3) take all reasonable and appropriate steps to recover diverted funds, ensure other grant funds held by a grantee are used for their intended purposes, and withhold further payments to grantees until you obtain grantees' assurances that future diversions will not occur and that grantees will take extraordinary precautions to prevent future diversions from occurring? Yes No
-
- 3 Do you represent that you will maintain all records relating to individual grants, including information obtained to evaluate grantees, identify whether a grantee is a disqualified person, establish the amount and purpose of each grant, and establish that you undertook the supervision and investigation of grants described in line 2? Yes No

Schedule H. Organizations Providing Scholarships, Fellowships, Educational Loans, or Other Educational Grants to Individuals and Private Foundations Requesting Advance Approval of Individual Grant Procedures (Continued)

Section II Private foundations complete lines 1a through 4f of this section. Public charities do not complete this section. (Continued) N/A

- 4a** Do you or will you award scholarships, fellowships, and educational loans to attend an educational institution based on the status of an individual being an *employee of a particular employer*? If "Yes," complete lines 4b through 4f. Yes No
- b** Will you comply with the seven conditions and either the percentage tests or facts and circumstances test for scholarships, fellowships, and educational loans to attend an educational institution as set forth in Revenue Procedures 76-47, 1976-2 C.B. 670, and 80-39, 1980-2 C.B. 772, which apply to inducement, selection committee, eligibility requirements, objective basis of selection, employment, course of study, and other objectives? (See lines 4c, 4d, and 4e, regarding the percentage tests.) Yes No
- c** Do you or will you provide scholarships, fellowships, or educational loans to attend an educational institution to employees of a particular employer? Yes No N/A

If "Yes," will you award grants to 10% or fewer of the eligible applicants who were actually considered by the selection committee in selecting recipients of grants in that year as provided by Revenue Procedures 76-47 and 80-39? Yes No
- d** Do you provide scholarships, fellowships, or educational loans to attend an educational institution to children of employees of a particular employer? Yes No N/A

If "Yes," will you award grants to 25% or fewer of the eligible applicants who were actually considered by the selection committee in selecting recipients of grants in that year as provided by Revenue Procedures 76-47 and 80-39? If "No," go to line 4e. Yes No
- e** If you provide scholarships, fellowships, or educational loans to attend an educational institution to children of employees of a particular employer, will you award grants to 10% or fewer of the number of employees' children who can be shown to be eligible for grants (whether or not they submitted an application) in that year, as provided by Revenue Procedures 76-47 and 80-39? Yes No N/A

If "Yes," describe how you will determine who can be shown to be eligible for grants without submitting an application, such as by obtaining written statements or other information about the expectations of employees' children to attend an educational institution. If "No," go to line 4f.

Note. Statistical or sampling techniques are not acceptable. See Revenue Procedure 85-51, 1985-2 C.B. 717, for additional information.
- f** If you provide scholarships, fellowships, or educational loans to attend an educational institution to *children of employees of a particular employer* without regard to either the 25% limitation described in line 4d, or the 10% limitation described in line 4e, will you award grants based on facts and circumstances that demonstrate that the grants will not be considered compensation for past, present, or future services or otherwise provide a significant benefit to the particular employer? If "Yes," describe the facts and circumstances that you believe will demonstrate that the grants are neither compensatory nor a significant benefit to the particular employer. In your explanation, describe why you cannot satisfy either the 25% test described in line 4d or the 10% test described in line 4e. Yes No

Sadasarana Children's Education Fund, EIN: 71-0979332
Attachment to Exemption Application form 1023

Part I

7. Authorized Representative: Errol G. Shaw, 330 H Street, Suite 3, Bakersfield, CA 93304. Form 2848 attached.
8. Errol G. Shaw was paid \$1,000 to obtain 501(c)(3) status. His address is referenced above.

Part II

1. Articles of Incorporation attached.
5. Bylaws attached.

Part IV

The Sadasarana Children's Education Fund Mission is attached hereto along with information concerning its leadership.

The organization was founded under the Biblical admonition in words of the Lord Jesus Christ who stated "I was hungry, you fed me. I was naked, you clothed me. I was a stranger, you welcomed me." The organization or project started in 1986 to help needy children to continue their studies. The handy crafts section began as a project to help teach the children how to produce sellable items out of waste materials. The children during this process learn a craft and are able to sell products and obtain income for their expenses. During the last two decades the project has been used to help children to continue their education, to identify their talents and to approve them.

Each child is helped with a minimum of ten dollars per month and increases as the child goes towards a higher level of education. Sponsors are solicited and a sponsorship form is attached to this application for qualification from exemption. Sponsors are provided information on a regular basis. The organization presently sponsors 36 children who attend school. Some are orphans and others are from poor families around Sri Lanka. The organization has a nursery and the children are taught how to love and improve nature and their environment. The need is for approximately 1,506 children.

The organization will not pay any compensation to any officer, director or employee. Father Titus Rodrigo has taken a vow of poverty. There is no registration or requirements for application for scholarship, merely Father Rodrigo being faced with a need of the orphan or poor child.

Part V

- 1b. N/A. No compensation will be provided to any officer, director or employee.
- 1c. N/A. There will be no compensated independent contractors.
- 4a-g. N/A. No one is or will be compensated.
- 5a. N/A
- 9b-f. N/A

Part VI

1a-b. See Narrative in Part IV above.

Part VIII

4d. California only.

7c. N/A

12a. This organization operates in a foreign country. The foreign country is Sri Lanka and is the only country in which this organization operates. Monies obtained through sponsorships to this organization will be used solely for the purpose of providing educational funds and training for the orphans and poor children in Sri Lanka.

15. This organization has a close connection through Father Titus Rodrigo's years of service with the Catholic dioceses of Fresno, California and a number of Catholic churches in Bakersfield, California. Each of these organizations are providing some financial aid although the majority of the income comes from individual sponsors. The organization holds an account in the Hatton National Bank. Last year the organization sponsored 33 children, improved the herbal garden and began a new compost unit to provide fertilizer for various planting projects. The children were involved in the herbal garden and in the new compost unit. The organization provides wood cutting classes for about 40 children. They receive their training making articles from scrap wood that is collected from wood chops and saw mills. The organization provides plants to the indigenous people of Sri Lanka at no cost or expense.

The needy children population continues to grow rapidly due to the Tsunami, violence, religious discrimination and unavailability of schools. It is becoming more important for an organization to provide classes to teach basic skills of reading and writing and to develop vocational skills such as wood cutting and husbandry to assist the children in developing skills for finding jobs.

The process of selecting the children to whom financial aid will be provided consists of obtaining information from schools. The organization selects the children based on their application and their poor financial situation being affirmed by the government agent in their residential area. The government agent in the immediate vicinity is Grama Sevaka. All of the local adults who help with the projects are voluntary workers and can work without payment. Those helpers consist of school teachers and the parents themselves.

Sadasarana Children's Education Fund, EIN No. 71-0979332
Response to questions in part 1V

Sadasarana Children's Education Fund

EIN No. 71-0979332

Response to questions in part 1V

Mission Statement

To assist each child to discover their God-given talents. To empower them to develop their talents so that with humility they can use them to improve their lives and the lives of others. Understanding that they are the custodians and stewards of the God-given gifts in this universe.

Our Goals...

1. To assist the children to discover their talents and to help them improve for their own benefit and for the benefit of the world community.
2. To help them develop a greater sense of love and respect for nature.
3. To help them improve, preserve and use nature's gifts sparingly with maximum care, knowing that we human beings are not the owners but the caretakers and the stewards of nature.
4. In view of the above goals, we strongly recommend and encourage the children to use mainly wood and other materials for their handicrafts that is waste from other projects or simply collected from the environment.

Children will engage in planting trees and herbs that are valuable for medicine, exotic purposes and for timber.

Past Present and future Sadasarana Children's Education Fund

This project was inaugurated in 1986 by Fr. Titus H. Rodrigo O.S.B., a Catholic priest, with the vision of helping needy children obtain and/or continue their education. As a newly ordained priest he was assigned to a very remote area as associate pastor. There he saw the needy children and their struggle to continue their education without having much help from the parents who had to struggle hard around the clock just to place food on the family table, many of these parents never having had an opportunity to earn an education for themselves.

Sadasarana Children's Handicrafts is one of the projects which served to fund this program and also to teach children to produce things out of waste materials. Students are taught to use scrap wood and other materials that could be found in their own environment and recycle them into reuseable items, and, in the process, contribute to protecting nature. With the help of a few who were interested, who were students themselves, this project was started.

We began as little gift shop on St. Anthony's church premises to sell our products, together with other materials for school, to the children for little more than cost. Hyacinth Fernando who worked in this little gift shop in the evenings, was a school girl then. She also learned the wood craft quite well and later became a public school teacher as she was one of the first to receive our help.

This project helps children to learn a craft and, at the same time, earn some money for their own expenses. During the last two decades it has aided many children to continue their education, and also to identify and improve their talents.

Fr. Titus came to the United States of America (USA), in July 2000, for five years. During this time he worked for the Diocese of Fresno and was able to continue his education, earning a Masters Degree at Cal-State University Bakersfield. It was during this time he was presented the opportunity to develop this project further. With assistance from Leticia Jimenez of Bakersfield, he received his first scroll saw and sander to work in his free time. He later extended his work to the students of Our Lady of Perpetual Help School, in Bakersfield, where he was able to give an orientation about his type of wood work which was very well received.

Fr. Titus is also thankful to Joann Leon and Melissa Gaeta and many others who helped with his fundraising efforts. Time to time we had our wood craft sales, and with donations, we had the opportunity to help the children of Sri Lanka further their education and proceed with various projects at home which worked to develop and preserve God-given nature.

When Fr. Titus moved to St. Philip the Apostle Catholic Church in July, 2003, to serve as parochial vicar, Begonia De Leon a parishioner volunteered to establish his project as a non-profitable organization in the USA. Thanks to her tireless work, along with the cooperation from various people in the parish and elsewhere, we have taken long strides on the path of improvement in the service for God in the children.

With the courtesy of Msgr. Ronald Swett, pastor at St. Philip Church, we are able to use the facility for our office. Ron and Julie Black are hosting the web for us. We and the people of Sri Lanka are very thankful to God for this and all the other blessing that we are blessed with.

At present we sponsor 36 children to go to school. Some of them are orphans and others from the poor people around the country. We, the Sadasarana have wood working classes for the children. And we have a nursery of plants to be distributed among the children so that we can create a sense of love and belonging for the nature among the students and the adults. These plants are looked after by the students themselves.

Sadasarana Children's Education Fund, EIN No. 71-0979332

Response to questions in part 1V

We too have a medicinal garden at St. Anthony's college premises in Kandy , where we have about fifty valuable and rare plants together with plants that can be used for timber and exotic purposes.

As war, violence and political corruption continue to strike the country, making people more and more poorer, the government authorities desperately seek a plan for the children who do not go to school at all. And as we have 1506 of them around St. Anthony's college, Kandy (according to a survey), we are planning to have two classes for 80 students after school to begin with, with the idea of expanding later to accommodate more students. Further more we also will teach them some craft, according to their talents other than imparting basic talents of reading and writing.



SADASARANA CHILDREN'S EDUCATION FUND

Everything in this universe has a purpose, for God created them all with a specific mission

- ABOUT US
- NEWS & EVENTS
- EDUCATIONAL PROGRAMS
- DONATIONS
- SUCCESS STORIES
- CONTACT

Our Leadership



Fr. Titus Rodrigo, OSB
President

Fr. Titus Rodrigo O.S.B. is a Catholic priest from Sri Lanka in the Order of St. Benedict. At present he is working as Deputy Principal at St. Anthony's College, Kandy, Sri Lanka. He also works as Resource Personnel for the National Institute of Education in his home land.

He began Sadasarana Children's Handicraft Project in 1987 to raise funds to help the poor children continue their education, and to help the students to discover their God-given talents on the line of handicrafts, while on the process directing the children to develop, preserve and to use the gifts of nature sparingly.

While ministering in the Diocese of Fresno, U.S.A., from 2000 to 2005, he completed his Master's Degree on Education Administration at California State University Bakersfield. During this time he became familiar with new technology which served to improve Sadasarana projects.

At this time he changed the name of his project to Sadasarana Children's Education Fund which was approved as a non profit organization in U.S.A., with the help and guidance of the "Beautiful People" whom he refers to as his "second family" and "spiritual family". This family consists of individuals he met in the areas that he ministered in U.S.A., especially Bakersfield.

email: bk542003@yahoo.com



Alex Padilla
Vice President & Director

Alex Padilla was born in 1961 in Tijuana, Mexico. Six months after his birth, he and his family moved to Bakersfield, California. Alex was raised there with his father (Alejandro Padilla), mother (Carmen Padilla), and five sisters.

Alex has been married for seventeen years to Elizabeth Padilla. They have two girls together, Kristen (sixteen-years-old) and Jennifer (twelve-years-old). They attend Sacred Heart Parish in Greenfield, CA. Alex is a fourth degree Knight of the Knights of Columbus and teaches the fourth grade Religion Education class.

Alex works as a Purchasing Assistant at Memorial Hospital. He has been employed by the hospital for twenty-five years.

"I would like to have your support with the 'Sadasarana Children's Education Fund'"

email: caabaybeth12@netscape.com

Begonia De Leon was born and raised in a traditional Catholic family in Los Angeles, California. She moved to Bakersfield in the summer of 1989. She is a single parent with two grown sons and a young daughter.



Begonia DeLeon
Assistant Vice President
& Director

Begonia works for a local accounting firm, has earned her Associate in Business from Bakersfield College and continues her studies at Cal State Bakersfield.

She believes that we all can help our community in some way giving what we can. Communities are not built by a single individual but by many individuals giving what they can of their time but most of all, their heart. Begonia is involved with Crown Ministries, House of Mercy, Pro Life and the Sadasarana Children's Education Fund.

email: bg@fkrcpa.com



Melissa Gaeta
Secretary & Director

Melissa Gaeta was born and raised in Wasco, California. Her parents are Cipriano and Carmen Gaeta. She is the youngest of six children, unmarried and has no children.

She began lecturing in 1980 at St. John the Evangelist Catholic Church. In 1981-83 she taught Catechism, or Religious Education as it is called now. In 1985 she moved to Bakersfield, where she became both a lector and Eucharistic Minister at St. Francis Church. She also became involved with a young adults/singles group, a 12-Step program, and taught Religious Education for several years.

In 2001, she began attending St. Joseph the Worker Parish. Here as well she became a lector and Eucharistic Minister. Melissa also teaches Religious Education and became a member of the Legion of Mary and now serves as President of the Legion of Mary at her parish since February of 2005.

May the peace, grace, love and joy of our Blessed Mother be with you and may the angels guide and protect your steps as we journey to our everlasting and eternal joy in Heaven.

email: mylissag2002@yahoo.com



Joann Leon
Treasurer & Director

Joann Leon is a native of Delano, California, raised in the Apostolic Faith most of her early life, and later studied the Jehovah Witness Faith. In March 2002, she converted and was baptized Roman Catholic.

Joann now lives in Bakersfield, CA, and works as office manager for a local dental office. In her free time, she is very active at her parish, St. Joseph's Catholic Church where she volunteers on a weekly basis. She is also involved in the St. Vincent de Paul Conference, acting as President, and the Legion of Mary, Our Lady of Lourdes Presidium, serving as vice president. In addition, Joann is acting treasurer of the Sadasarana Children's Education Fund. Joann has been accepted to the Spiritual Direction School of the Risen Christ OSB, where she will receive training to become a Spiritual Advisor.

Joann believes our works of charity is love and this is key to our spiritual growth. As we experience Christ's love, we return His love by finding Him in those we encounter. As we experience Christ's love, we let those in need look for and find the face of Christ in us. As we experience Christ's love, we evangelize to the poor by witnessing our faith by both word and action. And as we experience Christ's love, we are evangelized by the poor by witnessing their faith and hope in God.



Ralph Russell
Director

email: johortigoza@yahoo.com

Ralph and his wife, Maria, have six children and seven grandchildren. His hobbies include astronomy, camping, fishing and computers.

Ralph is a member at St. Joseph's parish and a third degree member of the Knights of Columbus. He is, also, the photographer for SCEF and maintains a database of photographs taken at local events held by the organization and photographs taken by Father Titus in Sri Lanka.

email: rrus150249@sbcglobal.net



Guadalupe Stark
Director

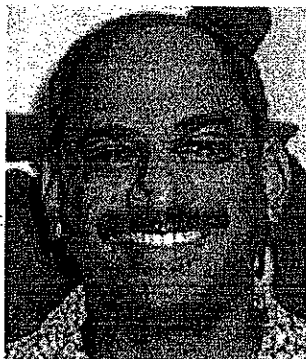
Maria Guadalupe Stark was born in Jacona Michuacan, Mexico, and the fourth child of six girls. She entered into the United States in 1962, and lived in Santa Monica, California for four years, later moving to Ventura, California. After graduating from Ventura High, she married Ronald Stark, at the San Buena Ventura Mission. They moved to Chico, California, where Guadalupe worked while her husband completed his education and received his Civil Engineering Title.

In 1974, they moved to Bakersfield, California, where Ronald accepted a job with the City of Bakersfield and Guadalupe worked as a bookkeeper for an oil related company. In 1976, they had their first child, Christina, and, a couple of years later, welcomed their second daughter, Sandra. At this point, Guadalupe became a full time "Mom".

Guadalupe obtained her real estate license in 1980 and worked part-time for Century 21. It was after her daughters graduated from college, that she became a full time realtor. Not totally satisfied with her career; Guadalupe felt something was missing: God! As a result, she joined the Marian Movement of Priest, the Mater Dei Rosary Prayer Group, the Nuestra Senora del Rosario, and the Bakersfield OCDS, Maria, Mater et Regina Carmeli Group.

She is now hoping to be useful to this wonderful non-profit Sadasarana Children's Education Organization, founded by Fr. Titus. She knows that her desire is to love and to serve God above all.

email: mgpita@yahoo.com



Lauro Braganza
Director

email: lbraganza@att.net

SADASARANA CHILDREN'S EDUCATION FUND

"I WAS HUNGRY YOU FED ME. I WAS NAKED YOU CLOTHED ME. I WAS A STRANGER, YOU WELCOME ME."

Dear Sponsor

This project was inaugurated in 1986 with the view of helping the needy children to continue their studies. "SADASARANA CHILDRENS' HANDICRAFTS" is one of the projects started with this to fund this program and also to teach children to produce things out of waste materials. This also helps children to learn a craft and to earn some thing for their own expenses. During the last two decades this project has helped many children to continue their education, and also to identify their talents and to improve them.

Each child will be helped with the minimum of \$10.00 per month. It will be increased as the child goes higher in the level of education. Additional help will be given for especial occasions (especial tuitions, educational tours, educational projects etc.) when needed.

Sponsors will be provided with information about the sponsored child (children) at a regular basis. Thank you very much for undertaking to help Jesus in the poor and the needy.

Yours fraternally in the service of Jesus,

B.K.Titus H. Rodrigo OSB

Send the form and checks to... Fr.Titus Rodrigo OSB; 7100, Stockdale Highway; Bakersfield; CA.93309. (Phone. 661.833.2218 extension 114 OR- 661.328.9954) email: bk542003@yahoo.com

.....Cut here and mail the following form please the address given.....

SPONSORSHIP FORM

(Please print)

Name of the sponsor: -

Date of birth: - Month Date

Address: -

City Zip code Country
Phone no. E-mail Fax

I will pay

\$15	\$20	\$25	\$...
------	------	------	-------

 Per month. It will be paid once in

1	3	6	12
---	---	---	----

 Month(s). / I like to pay foryears at once.

I am unable to undertake any sponsorship, but I will send a donation of \$...

DATE: - Year... month... Day... Signature: -

Send the form and checks to... Fr.Titus Rodrigo OSB; 7100, Stockdale Highway; Bakersfield; CA.93309. (Phone. 661.833.2218 extension 114 OR- 661.328.9954; Email: bk542003@yahoo.com

8:09 AM
03/26/07
Accrual Basis

Sadasarana Children's Education Fund
Profit & Loss
January 2007

EIN: 71-0979332

DRAFT

	<u>Jan 07</u>
Ordinary Income/Expense	
Income	
5107 · Collection Box	29.60
5000 · Contributions for the Children	1,575.00
5100 · Fundraising	<u>365.00</u>
Total Income	<u>1,969.60</u>
Gross Profit	1,969.60
Expense	
8623 · Tax & licence	20.00
8001 · Charities	770.00
8100 · Sri Lanka Expenses	<u>35.00</u>
Total Expense	<u>825.00</u>
Net Ordinary Income	<u>1,144.60</u>
Net Income	<u><u>1,144.60</u></u>

7:57 AM
03/26/07
Accrual Basis

Sadasarana Children's Education Fund
Balance Sheet
As of January 31, 2007

EIN: 71-0979332

DRAFT

	<u>Jan 31, 07</u>
ASSETS	
Current Assets	
Checking/Savings	
1020 · Petty Cash	65.00
1000 · CitiBank - General-826	1,208.50
1010 · CitiBank - Operating Ckg-834	13,384.87
Total Checking/Savings	<u>14,658.37</u>
Other Current Assets	
1299 · Undeposited Funds	1,894.60
1410 · Inventories	2,340.20
Total Other Current Assets	<u>4,234.80</u>
Total Current Assets	<u>18,893.17</u>
TOTAL ASSETS	<u><u>18,893.17</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2010 · Accounts payable	5,012.84
Total Accounts Payable	<u>5,012.84</u>
Total Current Liabilities	5,012.84
Long Term Liabilities	
3300 · Fr Titus -Reimbursements	805.00
Total Long Term Liabilities	<u>805.00</u>
Total Liabilities	5,817.84
Equity	
3010 · Unrestrict (retained earnings)	11,930.73
Net Income	1,144.60
Total Equity	<u>13,075.33</u>
TOTAL LIABILITIES & EQUITY	<u><u>18,893.17</u></u>

9:27 AM

03/26/07

Accrual Basis

Sadasarana Children's Education Fund EIN: 71-0979332

Transaction Detail By Account

January 2007

Type	Date	Num	Adj	Name	Memo	Split	Debit	Credit	Balance
.01 - Charities									
8015 - Charities - Project Expenses									
General Journal	1/31/2007	Sponsorship	*		To record spo...	8009 - Charities - Sponsorship	470.00		470.00
Total 8015 - Charities - Project Expenses							470.00	0.00	470.00
8009 - Charities - Sponsorship									
General Journal	1/31/2007	Sponsorship	*		To record spo...	-SPLIT-	300.00		300.00
Total 8009 - Charities - Sponsorship							300.00	0.00	300.00
Total 8001 - Charities							770.00	0.00	770.00
TOTAL							770.00	0.00	770.00

7:55 AM
03/26/07
Accrual Basis

Sadasarana Children's Education Fund
Profit & Loss
January through December 2006

EIN: 71-0979332
DRAFT

	<u>Jan - Dec 06</u>
Ordinary Income/Expense	
Income	
4700 · cash over/short	-0.45
5200 · SriLanka Telephone Expense	120.00
5107 · Collection Box	1,391.75
5000 · Contributions for the Children	2,961.75
5100 · Fundraising	4,918.42
Total Income	<u>9,391.47</u>
Cost of Goods Sold	
7300 · Cost of Goods	1,417.51
Total COGS	<u>1,417.51</u>
Gross Profit	7,973.96
Expense	
8623 · Tax & licence	775.00
8001 · Charities	7,190.75
9000 · Void Check	0.00
8100 · Sri Lanka Expenses	317.50
Total Expense	<u>8,283.25</u>
Net Ordinary Income	<u>-309.29</u>
Net Income	<u><u>-309.29</u></u>

Sadasarana Children's Education Fund
Balance Sheet
As of December 31, 2006

EIN: 71-0979332

DRAFT

	<u>Dec 31, 06</u>
ASSETS	
Current Assets	
Checking/Savings	
1020 · Petty Cash	65.00
1000 · CitiBank - General-826	225.00
1010 · CitiBank - Operating Ckg-834	<u>13,259.87</u>
Total Checking/Savings	13,549.87
Other Current Assets	
1299 · Undeposited Funds	1,053.50
1410 · Inventories	<u>2,340.20</u>
Total Other Current Assets	<u>3,393.70</u>
Total Current Assets	<u>16,943.57</u>
TOTAL ASSETS	<u><u>16,943.57</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2010 · Accounts payable	5,012.84
Total Accounts Payable	<u>5,012.84</u>
Total Current Liabilities	<u>5,012.84</u>
Total Liabilities	5,012.84
Equity	
3010 · Unrestrict (retained earnings)	12,240.02
Net Income	<u>-309.29</u>
Total Equity	<u>11,930.73</u>
TOTAL LIABILITIES & EQUITY	<u><u>16,943.57</u></u>

Sadasarana Children's Education Fund
Transaction Detail By Account

EIN: 71-0979332

January through December 2006

Type	Date	Num	Adj	Name	Memo	Class	Clr	Split	Debit	Credit	Balance
Charities											
8015 - Charities - Project Expenses											
General Journal	12/31/2006	Spon...	*		To record children's project expenses for 2006			8009 - Chariti...	1,590.75		1,590.75
Total 8015 - Charities - Project Expenses									1,590.75	0.00	1,590.75
8009 - Charities - Sponsorship											
General Journal	1/1/2006	Reim...			Reimburse Fr Titus for additional sponsorship expenses 2005			3300 - Fr Titu...	2,000.00		2,000.00
General Journal	12/31/2006	Spon...	*		To record sponsored children for 2006			-SPLIT-	3,600.00		5,600.00
Total 8009 - Charities - Sponsorship									5,600.00	0.00	5,600.00
Total 8001 - Charities									7,190.75	0.00	7,190.75
TOTAL									7,190.75	0.00	7,190.75

Sadasarana Children's Education Fund
Profit & Loss
January through December 2005

EIN: 71-0979332

	Jan - Dec 05
Ordinary Income/Expense	
Income	
5107 · Collection Box	407.92
5000 · Contributions for the Children	
5005 · Projects - Restricted	200.00
5000 · Contributions for the Children - Other	8,803.00
Total 5000 · Contributions for the Children	9,003.00
5100 · Fundraising	
5101 · WoodWork	
7101 · Woodwork Expenses	-30.85 (1)
5101 · WoodWork - Other	820.45
Total 5101 · WoodWork	789.60
5103 · Book Sales	
7103 · Book Purchases	-306.00 (1)
5103 · Book Sales - Other	960.00
Total 5103 · Book Sales	654.00
5104 · Other Fundraising Activities	
5105 · Medals	10.00
5120 · Crosses	
5120 · Crosses - Other	30.00
Total 5120 · Crosses	30.00
5104 · Other Fundraising Activities - Other	5,585.11
Total 5104 · Other Fundraising Activities	5,625.11
Total 5100 · Fundraising	7,068.71
Total Income	16,479.63 + 336. ⁸⁵ = 16,816.74
Cost of Goods Sold	
7300 · Cost of Goods	
7315 · Inventory Adjustment	-2,103.31
7112 · SriLanka Items - Purchases	83.04
7111 · Religious Articles - SriLanka	483.75
7110 · Religious Articles Purchases	1,780.41
Total 7300 · Cost of Goods	243.89
Total COGS	243.89 + 336. ¹⁵ = 580. ⁷⁴
Gross Profit	16,235.74
Expense	
8001 · Charities	
8015 · Charities - Project Expenses <i>FR TITUS</i>	119.38
8010 · Charities - Fr Leonard	2,000.00
8009 · Charities - Sponsorship <i>FR TITUS</i>	1,259.00
Total 8001 · Charities	3,378.38
8570 · Returned Checks	110.00
9000 · Void Check	0.00
8019 · Bank Service Charges	20.00
8100 · Sri Lanka Expenses	
8130 · Telephone & telecommunications	202.47
8140 · Postage, shipping, delivery	238.60 (2)
Total 8100 · Sri Lanka Expenses	441.07
8170 · Printing & copying	46.27 (2)
Total Expense	3,995.72
Net Ordinary Income	12,240.02
Net Income	12,240.02

7:55 AM

03/26/07

Accrual Basis

Sadasarana Children's Education Fund

EIN: 71-0979332

Profit & Loss

January through December 2005

	<u>Jan - Dec 05</u>
Ordinary Income/Expense	
Income	
5107 · Collection Box	407.92
5000 · Contributions for the Children	9,003.00
5100 · Fundraising	7,068.71
Total Income	<u>16,479.63</u>
Cost of Goods Sold	
7300 · Cost of Goods	243.89
Total COGS	<u>243.89</u>
Gross Profit	16,235.74
Expense	
8001 · Charities	3,378.38
8570 · Returned Checks	110.00
9000 · Void Check	0.00
8019 · Bank Service Charges	20.00
8100 · Sri Lanka Expenses	441.07
8170 · Printing & copying	46.27
Total Expense	<u>3,995.72</u>
Net Ordinary Income	<u>12,240.02</u>
Net Income	<u><u>12,240.02</u></u>

7:57 AM
03/26/07
Accrual Basis

Sadasarana Children's Education Fund
Balance Sheet
As of December 31, 2005

EIN: 71-0979332

	<u>Dec 31, 05</u>
ASSETS	
Current Assets	
Checking/Savings	
1020 - Petty Cash	40.00
1000 - CitiBank - General-826	7,721.69
1010 - CitiBank - Operating Ckg-834	<u>3,439.00</u>
Total Checking/Savings	11,200.69 ✓
Other Current Assets	
1410 - Inventories	<u>2,103.31</u>
Total Other Current Assets	2,103.31 ①
Total Current Assets	13,304.00
Other Assets	
1700 - Prepays	<u>553.11</u>
Total Other Assets	553.11 ①
TOTAL ASSETS	<u><u>13,857.11</u></u> ✓
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2010 - Accounts payable	<u>1,617.09</u>
Total Accounts Payable	1,617.09
Total Current Liabilities	<u>1,617.09</u>
Total Liabilities	1,617.09 ✓
Equity	
Net Income	<u>12,240.02</u>
Total Equity	<u>12,240.02</u>
TOTAL LIABILITIES & EQUITY	<u><u>13,857.11</u></u>

① 2636

9:25 AM

03/26/07

Accrual Basis

Sadasarana Children's Education Fund
Transaction Detail By Account
 January through December 2005

EIN: 71-0979332

Type	Date	Num	Adj	Name	Memo	Split	Debit	Credit	Balance
8001 · Charities									
8015 · Charities - Project Expenses									
General Journal	12/31/2005	Pur 2005			-MULTIPLE-	8015 · Charities - Project Expenses	119.38		119.3
Total 8015 · Charities - Project Expenses							119.38	0.00	119.3
8010 · Charities - Fr Leonard									
Check	10/9/2005	2001		Fr Leonard		1012 · Restricted - For the Children	2,000.00		2,000.0
Total 8010 · Charities - Fr Leonard							2,000.00	0.00	2,000.0
8009 · Charities - Sponsorship									
General Journal	12/31/2005	Pur 2005			-MULTIPLE-	8009 · Charities - Sponsorship	1,259.00		1,259.0
Total 8009 · Charities - Sponsorship							1,259.00	0.00	1,259.0
Total 8001 · Charities							3,378.38	0.00	3,378.3
TOTAL							3,378.38	0.00	3,378.3