

Support Schedule For Advance Ruling Period

Name of Organization

Employer Identification Number

For information on completing this support schedule, please see the instructions for Part IV of Schedule A (Form 990), Organization Exempt under 501(c)(3).

	*Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Total
	(a)	(b)	(c)	(d)	(e)	(f)	(g)
	19__	19__	19__	19__	19__	19__	19__
1. Gifts, grants, and contributions received. (Do not include unusual grants. See line 14)							
2. Membership fees received							
3. Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose							
4. Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975							
5. Net income from unrelated business activities not included in line 4							
6. Tax revenues levied for your benefit and either paid to you or expended on your behalf							
7. The value of services or facilities furnished to you by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge							
8. Other income. Attach schedule. Do not include gain (or loss) from sale of capital assets							
9. Total of lines 1 through 8							
10. Line 9 minus line 3							
11. Enter 1% of line 9							
12. Organizations described in section 170(b)(1)(A)(vi):							
a. Enter 2% of amount in column g, line 10.....							
b. Attach a list showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for all years exceeded the amount shown in 12a. Enter the sum of all excess amounts here							

13. Organizations described in section 509(a)(2):

a. Attach a list, for amounts shown on lines 1, 2, and 3 showing the name of, and total amounts received in each year from each "disqualified person", and enter the sum of such amounts for each year:

Year 1 _____ Year 2 _____ Year 3 _____ Year 4 _____ Year 5 _____ Year 6 _____

b. Attach a list showing, for each year, the name and amount included in line 3 for each person (other than "disqualified persons") from whom the organization received more, during that year, than the larger of; the amount on line 11 for the year or \$5,000. Include organizations as well as individuals. Enter the sum of these excess amounts for each year:

Year 1 _____ Year 2 _____ Year 3 _____ Year 4 _____ Year 5 _____ Year 6 _____

14. If you received any unusual grants during your advance ruling period, attach a list for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these in line 1 above.

Under penalties of perjury, I declare that I am authorized to sign this schedule on behalf of this organization and that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief it is true, correct, and complete.

(Signature)

(Title or authority of signer)

(Date)

(Telephone No.)