

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

REVENUE	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
	FUND RAISING D (event type)	MAGIC SHOW FUN (event type)	(total number)	(Add col. (a) through col. (c))	
1	Gross receipts.....	32,653.	7,491.	40,144.	
2	Less: Charitable contributions.....	31,911.		31,911.	
3	Gross income (line 1 minus line 2).....	742.	7,491.	8,233.	
DIRECT EXPENSES	4	Cash prizes.....			
	5	Noncash prizes.....			
	6	Rent/facility costs.....		550.	
	7	Food and beverages.....			
	8	Entertainment.....		1,550.	
	9	Other direct expenses.....	742.	963.	1,705.
	10	Direct expense summary. Add lines 4- through 9 in column (d).....			3,805.
11	Net income summary. Combine lines 3, column (d) and line 10.....			4,428.	

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
	(Add col. (a) through col. (c))			
1	Gross revenue.....			
DIRECT EXPENSES	2	Cash prizes.....		
	3	Non-cash prizes.....		
	4	Rent/facility costs.....		
	5	Other direct expenses.....		
	6	Volunteer labor.....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d).....			
8	Net gaming income summary. Combine lines 1, column (d) and line 7.....			

	YES	NO
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states?.....	9a	
b If 'No,' explain: ----- -----		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?.....	10a	
b If 'Yes,' explain: ----- -----		
11 Does the organization operate gaming activities with nonmembers?.....	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?.....	12	

			YES	NO
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	13a	%		
b An outside facility	13b	%		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
Name: ▶ -----				
Address: ▶ -----				
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?		15a		
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____.				
c If 'Yes,' enter name and address of the third party:				
Name: ▶ -----				
Address: ▶ -----				
16 Gaming manager information				
Name: ▶ -----				
Gaming manager compensation ▶ \$ _____				
Description of services provided: ▶ -----				
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor				
17 Mandatory distributions				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: ▶ \$ _____				