

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2002 8:00 am**  
**Secretary of State**

05-15-2002 90089 011 \*\*\*\*61.25

**DOCUMENT # N99000005455**

1. Entity Name

**CORAL REEF ELEMENTARY ACT, INC.**

Principal Place of Business

Mailing Address

**7955 S.W. 152ND STREET  
 MIAMI FL 33157**

**7955 S.W. 152ND STREET  
 MIAMI FL 33157**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0944462**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TAEGER, LAURA L  
 C/O CORAL REEF ELEMENTARY SCHOOL  
 7955 S.W. 152ND STREET  
 MIAMI FL 33157**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete  
 NAME **TAEGER, LAURA**  
 STREET ADDRESS **7955 SW 152ND STREET**  
 CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VPD** ☐ Delete  
 NAME **LEWIS, DONNA**  
 STREET ADDRESS **7955 SW 152ND STREET**  
 CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **TD** ☐ Delete  
 NAME **BARBATO, ANITA**  
 STREET ADDRESS **7955 SW 152ND STREET**  
 CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **SD** ☐ Delete  
 NAME **SLATKO, LORI**  
 STREET ADDRESS **7955 SW 152ND STREET**  
 CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**ANITA BARBATO REQUIRED**

**4/20/02**

**305-232-4447**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Cash Flow Report  
7/1/00 Through 6/30/01

Attachment #A

N99000006455  
660489

9/2/01

Page 1

Category Description	7/1/00- 6/30/01
<b>INFLOWS</b>	
ACT Hoedown Fundraiser	2,692.00
Bank Error Correction	11.50
Charitable Donations	36,864.14
Fundraisers	45.00
Office Reimbursement	317.00
Postage Reimbursement	67.15
Silent Auction Fundraiser	4,991.00
Walk-a-Thon	6,039.55
<b>TOTAL INFLOWS</b>	<b>51,027.34</b>
<b>OUTFLOWS</b>	
ACT Aide Salaries	30,000.00
ACT Hoedown	195.60
Incorporation Fees _ Nonprofit	500.00
Office	365.47
Postage and Delivery	148.75
Silent Auction	109.00
Walk-a-Thon Expenses	410.00
Uncategorized Outflows - Bank Error	11.50
<b>TOTAL OUTFLOWS</b>	<b>31,740.32</b>
<b>OVERALL TOTAL</b>	<b>19,287.02</b>

**Schedule B**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Supplementary Information for line 1d of Form 990 or  
line 1 of Form 990-EZ (see instructions)

OMB No. 1545-0047

**2000**

Name of organization

Employer identification number

Coral Reef Elementary ACT, Inc

6510944462

Organization type (check one)—Section: ☒ 501(c)( ) (enter number) ☐ 527 or ☐ 4947(a)(1) nonexempt charitable trust

**A Section 501(c)(7), (8), or (10) organizations—**

Check this box if the organization had **no** charitable contributors who contributed more than \$1,000 during the year. (But see **General rule** below.)

Enter here the total gifts received during the year for a religious, charitable, etc., purpose ▶ \$ 36,864 -

**Note:** This form is generally not open to public inspection except for section 527 organizations.

**General Instructions**

**Purpose of Form**

Schedule B (Form 990 or 990-EZ) is used by organizations required to file **Form 990**, Return of Organization Exempt From Income Tax, or **Form 990-EZ**, Short Form Return of Organization Exempt From Income Tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ).

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

**Who Must File Schedule B (Form 990 or 990-EZ)**

**All organizations** must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ.

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ.

**Caution:** Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).

**Public Inspection**

Schedule B (Form 990 or 990-EZ) is:

- Open to public inspection for a section 527 political organization.
- Generally not open to public inspection for the other organizations that must file this form.

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

**Contributors Required To Be Listed on Part I**

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.

**General rule.** Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who, during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year.

**Section 501(c)(3) organizations.** For an organization described in section 501(c)(3) that meets the 33⅓% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))—

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a)). 2% of 36,864 = \$737

**Example.** A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

**Section 501(c)(7), (8), or (10) organizations.** For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the **General rule** discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))—

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received **any** charitable contributions and listed **any** charitable contributors on Part I must also complete Part III.

If a section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list **any** charitable contributors on Part I, check the box on line **A** at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

## Specific Instructions

**Note:** You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

**Part I.** In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year; and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

**Part II.** In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

**Part III.** Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

Name of organization

Coral Reef Elementary ACT, Inc

Employer identification number

65 0944462

**Part I Contributors**

(a) No.	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
1	Aetna Foundation, Inc PO Box 7337 Princeton NJ 08543	\$ 1935	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution.)
	Albert H Kahn 3350 S. Dixie Hwy Miami FL 33145	\$ 2500	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution.)
	IBM (Accounts Payable) 1701 North Street Endicott, NY 13760	\$ 2,000	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution.)
	Kimberly & Stanley VanGundy 8315 SW 157 Street Miami FL 33157	\$ 1000	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution.)
		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution.)
		\$	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution.)



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

September 14, 1999

JANE THOMAS  
C/O CORAL REEF ELEMENTARY SCHOOL  
7955 S.W. 152ND STREET  
MIAMI, FL 33157

The Articles of Incorporation for CORAL REEF ELEMENTARY ACT, INC. were filed on September 7, 1999 and assigned document number N99000005455. Please refer to this number whenever corresponding with this office regarding the above corporation.

PLEASE NOTE: COMPLIANCE WITH THE FOLLOWING PROCEDURES IS ESSENTIAL TO MAINTAINING YOUR CORPORATE STATUS. FAILURE TO DO SO MAY RESULT IN DISSOLUTION OF YOUR CORPORATION.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THIS OFFICE BETWEEN JANUARY 1 AND MAY 1 OF EACH YEAR BEGINNING WITH THE CALENDAR YEAR FOLLOWING THE YEAR OF THE FILING DATE NOTED ABOVE AND EACH YEAR THEREAFTER. FAILURE TO FILE THE ANNUAL REPORT ON TIME MAY RESULT IN ADMINISTRATIVE DISSOLUTION OF YOUR CORPORATION.

A FEDERAL EMPLOYER IDENTIFICATION (FEI) NUMBER MUST BE SHOWN ON THE ANNUAL REPORT FORM PRIOR TO ITS FILING WITH THIS OFFICE. CONTACT THE INTERNAL REVENUE SERVICE TO INSURE THAT YOU RECEIVE THE FEI NUMBER IN TIME TO FILE THE ANNUAL REPORT. TO OBTAIN A FEI NUMBER, CONTACT THE IRS AT 1-800-829-3676 AND REQUEST FORM SS-4.

SHOULD YOUR CORPORATE MAILING ADDRESS CHANGE, YOU MUST NOTIFY THIS OFFICE IN WRITING, TO INSURE IMPORTANT MAILINGS SUCH AS THE ANNUAL REPORT NOTICES REACH YOU.

Should you have any questions regarding corporations, please contact this office at the address given below.

Doris Brown, Document Specialist  
New Filings Section

Letter Number: 899A00045268

Attachment # 1199000005455/660489

**ARTICLES OF INCORPORATION OF  
CORAL REEF ELEMENTARY ACT, INC.**

FILED  
99 SEP -7 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator signs and delivers these Articles of Incorporation in order to form a corporation not for profit under the laws of the State of Florida.

**ARTICLE I. NAME**

The name of this corporation is CORAL REEF ELEMENTARY ACT, INC. ("Corporation").

**ARTICLE II. PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS**

The principal place of business and the mailing address of the Corporation shall be 7955 S.W. 152 Street, Miami, Florida 33157.

**ARTICLE III. PURPOSES**

This Corporation is organized and shall operate exclusively for charitable, educational and scientific purposes and may otherwise transact business to the fullest extent and subject to the limitations and provisions of the law as of the State of Florida and the laws of the United States described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended ("Code"). In furtherance of such purposes, it may promote, establish, conduct and maintain activities on its own behalf and it may contribute to or otherwise assist other corporations, organizations and institutions carrying on exempt activities.

Notwithstanding anything herein to the contrary herein: (i) the Corporation may exercise any and all, but no other, powers as are in furtherance of the exempt purposes of organizations set forth in Section 501(c)(3) of the Code and its Regulations as the same now exist, or as they may be hereafter amended from time to time; and (ii) pursuant to Code Section 508(e), the Corporation (1) shall distribute income at such time and in such manner as not to subject the Corporation to tax under Code Section 4942 and (2) the Corporation shall not engage in any act of self-dealing [as defined in Code Section 4941(d)] from retaining any excess business holdings [as defined in Code Section 4943(c)], from making any investments in such manner as to subject the Corporation to tax under Code Section 4944, or from making any taxable expenditures [as defined in Code Section 4945(d)].

No part of the income or principal of this Corporation shall inure to the benefit of or be distributed to any member, director or officer of the corporation or any other private individual in such a fashion as to constitute an application of fund not within the purposes of exempt organizations described in Section 501(c)(3) of the Code. However, reimbursement for expenditures or the payment of reasonable compensation for services rendered shall not be deemed to be a distribution of income or principal.

**ARTICLE IV. TERM OF EXISTENCE**

The period of the duration of this Corporation is perpetual, unless dissolved according to law.

**ARTICLE V. NAME AND ADDRESS OF INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

Jane Thomas  
C/o Coral Reef Elementary School  
7955 SW 152 Street  
Miami, Florida 33157

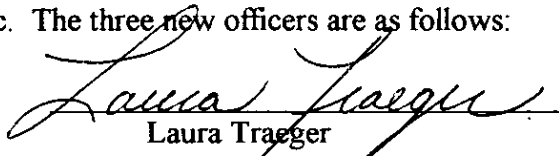
~~Attachment~~ # 199000005455/660489

Internal Revenue Service  
Atlanta, GA 39901-0102

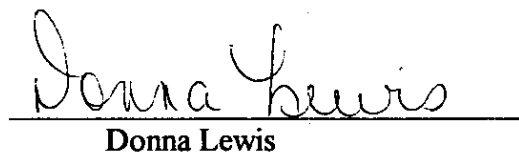
Coral Reef Elementary ACT, Inc.  
EIN 65 0944462  
C/O Coral Reef Elementary School  
7955 SW 152nd Street  
Miami, FL 33157

Effective July 1, 2000 new officers were elected and now serve as the governing body for Coral Reef Elementary ACT, Inc. The three new officers are as follows:

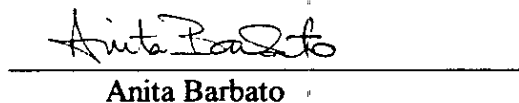
Laura Traeger  
President  
14400 SW 81 Avenue  
Miami, FL 33158

  
Laura Traeger

Donna Lewis  
Vice-President  
15820 SW 83 Avenue  
Miami, FL 33157


  
Donna Lewis

Anita Barbato  
Treasurer  
7815 SW 165 Street  
Miami, FL 33157

  
Anita Barbato

The old officers, Jane Thomas, Tracy Kealy and Renee Rodriguez, now longer serve on the board.

Sincerely,

  
Jane Thomas  
Past President  
Coral Reef Elementary ACT, Inc.



INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date:

OCT 30 2000

CORAL REEF ELEMENTARY ACT INC  
C/O ANITA BARBATO CORAL REEF ELEM SCH  
7955 SW 152ND ST  
MIAMI, FL 33157

Employer Identification Number:  
65-0944462

DLN:

17053284024040

Contact Person:

ZENIA LUK

ID# 31522

Contact Telephone Number:

(877) 829-5500

Accounting Period Ending:

June 30

Foundation Status Classification:

509(a)(1)

Advance Ruling Period Begins:

September 7, 1999

Advance Ruling Period Ends:

June 30, 2004

Addendum Applies:

No

Dear Applicant:

Based on information you supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably expect to be a publicly supported organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Accordingly, during an advance ruling period you will be treated as a publicly supported organization, and not as a private foundation. This advance ruling period begins and ends on the dates shown above.

Within 90 days after the end of your advance ruling period, you must send us the information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, we will classify you as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, we will classify you as a private foundation for future periods. Also, if we classify you as a private foundation, we will treat you as a private foundation from your beginning date for purposes of section 507(d) and 4940.

Grantors and contributors may rely on our determination that you are not a private foundation until 90 days after the end of your advance ruling period. If you send us the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until we make

Letter 1045 (DO/CG)

Form **990-EZ**Department of the Treasury  
Internal Revenue Service

STATE COPY

Short Form

**Return of Organization Exempt From Income Tax**

OMB No. 1545-1150

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

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

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

**Open to Public Inspection****A** For the 2000 calendar year, or tax year beginning**B** Check if applicable:

- ☐ Change of address  
☐ Change of name  
☐ Initial return  
☐ Final return  
☐ Amended return

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization

Coral Reef Elementary ACT, Inc.

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

7955 SW 152nd Street

City or town, state or country, and ZIP + 4

Miami FL 33157

**D** Employer identification number

6510944462

**E** Telephone no.

(305) 235-1464

**F** Check ☐ if application pending**G** Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) ►**H** Enter 4-digit group exemption no. (GEN) ►**I** Organization type (check only one) ☒ 501(c) ( ) ◀ (insert no.) ☐ 527 or ☐ 4947(a)(1)

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**J** Check ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.**K** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ► \$**L** Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ) ► ☐**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See Specific Instructions on page 34.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	36,864
	2	Program service revenue including government fees and contracts	2	-
	3	Membership dues and assessments	3	-
	4	Investment income	4	-
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	
	6	Special events and activities (attach schedule): ATTACHMENT A		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	14,152
6b	Less: direct expenses other than fundraising expenses	6b	1,729	
6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	12,423	
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c		
8	Other revenue (describe ► )	8		
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	49,287	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping (Purpose of organization)	15	
	16	Other expenses (describe ► Paid to Dade County Public Schools to pay Assistant Classroom Teachers)	16	30,000
17	Total expenses (add lines 10 through 16)	17	30,000	
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	19,287
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	5,427
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	24,716

**Part II Balance Sheets**—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See Specific Instructions on page 37.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	5,427	24,716
23 Land and buildings		
24 Other assets (describe ► )		
25 Total assets		
26 Total liabilities (describe ► )		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	5,427	24,716

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Cat. No. 106421

Form **990-EZ** (2000)

**Part III Statement of Program Service Accomplishments** (See Specific Instructions on page 38.)

What is the organization's primary exempt purpose? Providing Classroom Assistants for Teachers  
 Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

**Expenses**  
 (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

28	<u>— Paid three checks of \$10,000 to Dade County Public Schools so they could hire classroom assistants for Grades kindergarten through fifth grade at Coral Reef Elementary School.</u>	28a	
29	<u>One assistant teacher was hired for each grade level at 25 hours per week by the end of the year.</u>	29a	30,000
30			
31	Other program services (attach schedule)	31a	
32	<b>Total program service expenses</b> (add lines 28a through 31a)	32	30,000

**Part IV List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See Specific Instructions on page 38.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Laura Traeger (FL) 14400 SW 81 Ave, Miami 33158	President 2-3 hours/week	-0-	-0-	-0-
Donna Lewis (FL) 15820 SW 83 Ave, Miami 33157	Vice President 1 hour/week	-0-	-0-	-0-
Anita Barbato 7815 SW 165th St, Miami FL 33157	Treasurer 3 hours/week	-0-	-0-	-0-

**Part V Other Information** (See Specific Instructions on page 38 and General Instruction V on page 14.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.		X
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		X
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		X
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		X
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved.	38b	
39 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9.	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation.		X
c Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ▶		
d Enter: Amount of tax on line 40c. above, reimbursed by the organization ▶		
41 List the states with which a copy of this return is filed. ▶ FL, RI, IA		
42 The books are in care of ▶ Anita K Barbato Telephone no. ▶ (305) 232-4447 Located at ▶ 7815 SW 165th St Miami FL 33157 ZIP + 4 ▶ 33157		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		

<b>Please Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer ▶ <u>Anita K Barbato</u>		Date ▶ <u>1/21/01</u>	
<b>Paid Preparer's Use Only</b>	Preparer's signature ▶		Date ▶	Check if self-employed ▶ <input type="checkbox"/>
	Firm's name (or yours if self-employed) and address, and ZIP code ▶		EIN ▶	Preparer's SSN or PTIN ▶
			Phone no. ▶ ( )	