Form 990-E7

Short Form Return of Organization Exempt From Income Tax

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

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

OMB No. 1545-1150

2007

Open to Public Department of the Treasury Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 1/1/2007 A For the 2007 calendar year, or tax year beginning , and ending 12/31/2007 **B** Check if applicable: D Employer identification number Please C Name of organization use IRS Address change **PAY IT FORWARD PROJECT** 4810720 label or Name change print or E Telephone number Number and street (or P.O. box, if mail is not delivered to street address) Initial return type. (703) PO Box 903 405-5795 See Final return Specific Amended return City or town, state or country, and ZIP + 4 F Group Exemption Instruc-Application pending Ashburn, VA 20146 Number . . tions. Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach **G** Accounting method: a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶ **H** Check ▶ ☐ if the organization

Website: ▶ http://www.payitforwardproject.org is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF). **Organization type** (check only one)— \checkmark 501(c) (3) \triangleleft (insert no.) \bigcirc 4947(a)(1) or \bigcirc 527 Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return. 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 57,009 Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 47 of the instructions.) Part I 57,009 Contributions, gifts, grants, and similar amounts received. 0 2 2 Program service revenue including government fees and contracts 3 0 3 Membership dues and assessments . . . 0 4 5a **5a** Gross amount from sale of assets other than inventory 0 5b Less: cost or other basis and sales expenses 5с 0 Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule). Revenue Special events and activities (attach schedule). If any amount is from gaming, check here of contributions a Gross revenue (not including \$ _____ 0 6a 0 Less: direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (line 6a less line 6b) 6c 7a Gross sales of inventory, less returns and allowances 0 0 7с Gross profit or (loss) from sales of inventory (line 7a less line 7b). 0 8 8 Other revenue (describe ▶ **Total revenue** (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8). 9 9 57,009 10 10 Grants and similar amounts paid (attach schedule) 11 11 Benefits paid to or for members 0 12 12 Salaries, other compensation, and employee benefits 13 430 13 Professional fees and other payments to independent contractors 0 14 Occupancy, rent, utilities, and maintenance. 1,105 15 15 Printing, publications, postage, and shipping. Other expenses (describe > See Statement 1 24,752 16 16 17 17 26,287 30,722 18 Excess or (deficit) for the year (line 9 less line 17) 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 3,445 Net 20 20 Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year (combine lines 18 through 20) . 21 34.167 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. (A) Beginning of year (B) End of year (See page 51 of the instructions.)

3,019 22 31,877 22 Cash, savings, and investments 3.095 23 2,290 23 Land and buildings 0 24 0 Other assets (describe ▶ 6,114 25 34,167 Total assets 25 2,669 26 0

Total liabilities (describe ► See Statement 3 Net assets or fund balances (line 27 of column (B) must agree with line 21) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

34,167

3,445 27

Form 990-EZ (2007) Page **2**

								~go _	
Pa	rt III Statement of Program Service Accom	plishments (See page 51	of the instruction	ns.)		Expen	ses		
Des	What is the organization's primary exempt purpose? Assist individuals and organizations who are living in properties what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, escribe the services provided, the number of persons benefited, or other relevant information for each program title.						(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)		
28	See Statement 2								
	Grants \$) If this amount inclu	udes foreign grants, check	here	. ▶ □	28a		20	,407	
29									
	(O				00-				
	(Grants \$) If this amount inclu				29a				
30									
	(Grants \$) If this amount inclu	udes foreign grants, check			30a				
	Other program services (attach schedule)								
	(Grants \$) If this amount inclu	udes foreign grants, check	here	. ▶ 🗆	31a				
32	Total program service expenses (add lines 28a th	rough 31a)		<u> ▶</u>	32			,407	
Pa	rt IV List of Officers, Directors, Trustees, and Key	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·						
	(A) Name and address	(B) Title and average hours per week	(C) Compensation (If not paid,	(D) Contributi employee benefi	ons to t plans &	(E) l	Expense ount an	e d	
		devoted to position	enter -0)	deferred compe	ensation	other a	allowan	ces	
Sec	Statement 4								
Pa	rt V Other Information (Note the statemen	nt requirement in Genera	I Instruction V.)				Yes	No	
33	Did the organization engage in any activity not pro-	eviously reported to the IR	S? If "Yes," attac	h a detailed					
	description of each activity					33			
34	Were any changes made to the organizing or gov	9	•						
	.,					34		_	
35	If the organization had income from business activities, a reported on Form 990-T, attach a statement explaining y				not				
_		, ,							
а	Did the organization have unrelated business gros proxy tax requirements?	s income or \$1,000 or more				35a		~	
b	If "Yes," has it filed a tax return on Form 990-T for					35b			
36	Was there a liquidation, dissolution, termination, of								
	statement.)					36		~	
37a	Enter amount of political expenditures, direct or ind	lirect, as described in the in	structions. ▶ 37	a	0				
b	Did the organization file Form 1120-POL for this	year?				37b		~	
38a	Did the organization borrow from, or make any loa					00			
	any such loans made in a prior year and still unpa	·	- 1	return? .		38a			
b	If "Yes," attach the schedule specified in the line		20	h	0				
00	involved			D	U				
39	501(c)(7) organizations. Enter: Initiation fees and capital contributions included o	n line 9	39	а					
	Gross receipts, included on line 9, for public use		—						

Page 3 Form 990-EZ (2007)

Par	t V	Other Information (Note the statement requirement in G	eneral Instruc	ction V.) (Conti	nued)				
40a		c)(3) organizations. Enter amount of tax imposed on the organization 4911 ►				0	_			
b	. ,	0(3) and (4) organizations. Did the organization engage in any section or did it become aware of an excess benefit transaction from a prior				_		40b	Yes	No ✓
	the ye	amount of tax imposed on organization managers or disqualified ear under sections 4912, 4955, and 4958		. ▶ _			0			
d	Enter	amount of tax on line 40c reimbursed by the organization		. ▶ _						
е	-	ganizations. At any time during the tax year, was the organization action?					. [40e		~
41	List th	ne states with which a copy of this return is filed. ▶ None								
42a	The b	oooks are in care of ▶ Denise Bobba		Tele	phone n	o. >	70	3-405	-5795	<u>;</u>
	Locat	ted at ▶ PO Box 903, Ashburn, VA						2014	16	
	over a account "Ye See the At any of "Ye Section Secti	y time during the calendar year, did the organization have an int a financial account in a foreign country (such as a bank account unt)? es," enter the name of the foreign country: ▶ the instructions for exceptions and filing requirements for Form T by time during the calendar year, did the organization maintain ares," enter the name of the foreign country: ▶ the day of the foreign country: ▶	TD F 90-22.1. office outside	of the U	J.S.?	r financ	ial . [42b 42c	Yes	No V
Plea Sigr Here	ı	Under penalties of perjury, I declare that I have examined this return, including a and belief, it is true, correct, and complete. Declaration of preparer (other than Signature of officer Denise Bobba, President Type or print name and title.								
Paid	arer's	Preparer's signature	Date	Check if self-employee		Preparer's	SSN or	PTIN (Se	ee Gen.	Inst. X)
Use (Firm's name (or yours if self-employed),			EIN	•				
U3C 1	Cilly	address, and ZIP + 4 749 Innsbruck Drive, Orlando, FL 3282	5		Phone no	. ▶ (32	1)	297	'-3048	8

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

2007

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

PAY IT FORWARD PROJECT			20	4810720
Part I Compensation of the Five High (See page 2 of the instructions. I				and Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 .	0			
Part II-A Compensation of the Five High (See page 2 of the instructions. Lis				
(a) Name and address of each independent contracto	r paid more than \$50,000	(b) Type	of service	(c) Compensation
None				
Total number of others receiving over \$50,000 for professional services	0			
Part II-B Compensation of the Five High (List each contractor who perform firms. If there are none, enter "No	ned services other than p	orofessional serv		dividuals or
(a) Name and address of each independent contracto	r paid more than \$50,000	(b) Type	of service	(c) Compensation
None				
Total number of other contractors receiving over \$50,000 for other services	0			

Pa	Statements About Activities (See page 2 of the instructions.)	Ye	s No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities • • • • • • • • •	1	~
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
а	Sale, exchange, or leasing of property?	2a	
b	Lending of money or other extension of credit?	2b	·
С	Furnishing of goods, services, or facilities?	2c	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	
е	Transfer of any part of its income or assets?	?e	
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	Ba	,
b	Did the organization have a section 403(b) annuity plan for its employees?	Bb	
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	BC	
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	Bd	
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	a	V
b	Did the organization make any taxable distributions under section 4966?	b	
С	Did the organization make a distribution to a donor, donor advisor, or related person?	lc	'
d	Enter the total number of donor advised funds owned at the end of the tax year		
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year •		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		0

Pa	rt IV	Reason for Non-Private	Foundation S	Status (See pages 4	through 7 of	the instructi	ons.)
I ce	tify th	hat the organization is not a privat	e foundation bec	ause it is: (Please check	c only ONE app	olicable box.)	
5		A church, convention of churches	, or association o	of churches. Section 170	0(b)(1)(A)(i).		
6		A school. Section 170(b)(1)(A)(ii). (Also complete Pa	art V.)			
7		A hospital or a cooperative hospit	al service organiz	zation. Section 170(b)(1)((A)(iii).		
8		A federal, state, or local governme	ent or governmer	ntal unit. Section 170(b)(1)(A)(v).		
9		A medical research organization o					
10		An organization operated for the be (Also complete the Support Sched		or university owned or op	perated by a go	vernmental unit	. Section 170(b)(1)(A)(iv)
11a	_	An organization that normally receit 170(b)(1)(A)(vi). (Also complete the			a governmental	unit or from the	general public. Section
11b		A community trust. Section 170(b))(1)(A)(vi). (Also co	omplete the Support Sc	hedule in Part	IV-A.)	
12	f f	An organization that normally receifrom activities related to its charitation gross investment income an organization after June 30, 1975.	able, etc., function d unrelated busin	ns—subject to certain ex ness taxable income (les	cceptions, and ss section 511	(2) no more that tax) from busi	an 331/3% of its support nesses acquired by the
13		An organization that is not control requirements of section 509(a)(3).					nd otherwise meets the
		☐ Type I ☐ Type II	☐Type I	II-Functionally Integrate	ed	Type III-Other	
		Provide the following infor	rmation about th	e supported organizat	ions. (See pag	e 7 of the instri	uctions.)
Na	ame(s	(a) s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organizatio the sup organiz governing d	pported on listed in porting ation's	(e) Amount of support
					Yes	No	
Tota	il		<u> </u>			•	0
14		An organization organized and on	erated to test for	nublic safety. Section 5	509(a)(4) (See r	nage 7 of the in	etructions)

	t IV-A Support Schedule (Complete : You may use the worksheet in the instructi					accounting.
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do)				
	not include unusual grants. See line 28.)	13,973	0	0	0	13,973
16	Membership fees received	0	0	0	0	0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing o	f				
	facilities in any activity that is related to the organization's charitable, etc., purpose	0	0	0	0	0
18	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	s d	0	0	0	0
19	Net income from unrelated business activities not included in line 18		0	0	0	0
			U	U	U	<u> </u>
20	Tax revenues levied for the organization's benefit and either paid to it or expended or its behalf.		0	0	0	0
21	The value of services or facilities furnished to the organization by a governmental uni without charge. Do not include the value o services or facilities generally furnished to the	t f		U	<u> </u>	0
	public without charge	0	0	0	0	0
22	Other income. Attach a schedule. Do no					
	include gain or (loss) from sale of capital assets		0	0	0	0
23	Total of lines 15 through 22			0	0	13,973
24	Line 23 minus line 17		0	0	0	13,973
25	Enter 1% of line 23	140	0	0	0	
26	Organizations described on lines 10 or 1	1: a Enter 2% of	amount in colum	n (e), line 24	▶ 26a	279
b	Prepare a list for your records to show the governmental unit or publicly supported org	anization) whose tota	al gifts for 2003 th	rough 2006 exce	eded the	
	amount shown in line 26a. Do not file this lis	-				13,973
C .	Total support for section 509(a)(1) test: Ente				• 200	13,373
d	Add: Amounts from column (e) for lines: 1	22 0	19		▶ 26d	0
•	Public support (line 26c minus line 26d total					13,973
	Public support percentage (line 26e (num					100 %
27	Organizations described on line 12: a person," prepare a list for your records to sh Do not file this list with your return. Enter	For amounts included the name of, and	ded in lines 15, 1 total amounts rec	6, and 17 that we	vere received fro	m a "disqualified
b	(2006)	eceived from each per ach year, that was mo les 5 through 11b, as wand the larger amount	rson (other than "d re than the larger well as individuals.) t described in (1)	isqualified persons of (1) the amount of Do not file this list or (2), enter the so	s"), prepare a list on line 25 for the st with your retur um of these differ	for your records to year or (2) \$5,000. n. After computing rences (the excess
		_				
С	Add: Amounts from column (e) for lines: 1				> 27c	
d	Add: Line 27a total	and line 27b tota	ıl			
е	Public support (line 27c total minus line 27c					
f	Total support for section 509(a)(2) test: Enter					
g	Public support percentage (line 27e (num					%
_ <u>h</u>	Investment income percentage (line 18, o			•		%
28	Unusual Grants: For an organization desc prepare a list for your records to show, for description of the nature of the grant. Do n	each year, the nam	e of the contribu	tor, the date and	amount of the	grant, and a brief

Part V

Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	(** ** ** *** *** *** *** *** *** *** *			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
32 a b	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32a 32b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32c 32d		
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Pa	rt VI-A Lobbying Expenditures by El (To be completed ONLY by an					e instr	uctions.)	
Che	ck > a if the organization belongs to an affilia	ated group. Che	eck ▶ b ☐ if	you checked	"a" ar	nd "limite	ed control"	provisions apply.
	Limits on Lobbyii (The term "expenditures" meal	-				Affiliat	(a) ed group otals	(b) To be completed for all electing organizations
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			36			Organizations
36	7 0 1							
37	3 3,7 3,7 4,7 4,7				37 38			
38					39			
39	Other exempt purpose expenditures				40			
40 41	Total exempt purpose expenditures (add lines Lobbying nontaxable amount. Enter the amount				70			
41		obbying nontaxa						
	Not over \$500,000 20% (_				
	Over \$500,000 but not over \$1,000,000 . \$100,0							
	Over \$1,000,000 but not over \$1,500,000 . \$175,0				41			
	Over \$1,500,000 but not over \$17,000,000. \$225,0	•						
		0,000						
42	Grassroots nontaxable amount (enter 25% of li	ne 41)			42			
43	Subtract line 42 from line 36. Enter -0- if line 4	2 is more than lir	ne 36		43			
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lir	ne 38		44			
	Caution: If there is an amount on either line 43	or line 44. vou r	must file Form 47	20.				
		eraging Perio						
	(Some organizations that made a section See the instructions for	n 501(h) election	do not have to	complete all			olumns be	elow.
			bying Expenditu			-	aging Pe	riod
	Calendar year (or	(a)	(b)	(c)			(d)	(e)
	fiscal year beginning in) ▶	2007	2006	2005			004	Total
45	Lobbying nontaxable amount							
46	Labbring spiling approach (1500/ of line 45(a))							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
	0							
49	Grassroots ceiling amount (150% of line 48(e))							
50	Grassroots lobbying expenditures							
	rt VI-B Lobbying Activity by Nonelec	ting Public C	harities					
га	(For reporting only by organiza			Part VI-A)	(See	page	13 of the	e instructions.)
Duri	ng the year, did the organization attempt to influ		· · · · · · · · · · · · · · · · · · ·	,	•			<u> </u>
		icrioc riational, st			anig a	Y Y	res No	Amount
auer			um. through the	use of:				
	mpt to influence public opinion on a legislative n	natter or referend		use of:		. ['	
		natter or referend			 .)		\(\sqrt{\sqrt{\sqrt{\chi}}} \sqrt{\sqrt{\chi}}	
a	mpt to influence public opinion on a legislative n Volunteers	natter or referend on in expenses re	eported on lines	 c through h			V	
a b	mpt to influence public opinion on a legislative n Volunteers	natter or referend	eported on lines	 c through h			\(\times \)	
a b c	mpt to influence public opinion on a legislative n Volunteers	natter or referend on in expenses re	eported on lines			. -	\(\times \) \(\t	
a b c d	npt to influence public opinion on a legislative movernment of the volunteers of the public of the volunteers of the vol	natter or referend on in expenses re ents	eported on lines	c through h			\(\times \)	
a b c d	Note to influence public opinion on a legislative of Volunteers	natter or referend on in expenses re ents ernment officials,	eported on lines	c through h			\(\times \) \(\t	
a b c d e f	Note to influence public opinion on a legislative of Volunteers	natter or referend on in expenses re ents ernment officials, , speeches, lectu	eported on lines	c through h			\(\times \)	
a b c d e f	Note to influence public opinion on a legislative of Volunteers	natter or referend on in expenses re ents eoses ernment officials, , speeches, lectu	eported on lines	c through h			\(\times \) \(\t	0

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51					following with any other organization on 527, relating to political organization		d in s	ection
а	Trar	nsfers from the rep	orting organization	to a noncharitable exempt orga	nization of:		Yes	No
	(i)	Cash				51a(i)		~
	(ii)	Other assets				a(ii)		~
b	Oth	er transactions:						
	(i)	Sales or exchange	es of assets with a	noncharitable exempt organization	tion	b(i)		~
	(ii)	Purchases of asse	ets from a nonchar	itable exempt organization		b(ii)		~
	(iii)	Rental of facilities	, equipment, or oth	ner assets		b(iii)		~
	(iv)	Reimbursement a	rrangements			b(iv)		~
	(v)	Loans or loan gua	arantees			b(v)		~
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations		b(vi)		~
С	Sha	ring of facilities, eq	juipment, mailing li	sts, other assets, or paid emplo	yees	С		
d					. Column (b) should always show the fair			
	goo	ds, other assets, o	r services given by	the reporting organization. If the	ne organization received less than fair	market v	/alue i	n any
	tran	saction or sharing ai	rrangement, show in	o column (d) the value of the good	s, other assets, or services received:			
	a)	(b)		(c)	(d)			
Line	no.	Amount involved	Name of nonc	charitable exempt organization	Description of transfers, transactions, and s	haring arr	angeme	ents
	des	cribed in section 50 es," complete the	01(c) of the Code (other than section 501(c)(3)) or i :	e or more tax-exempt organizations n section 527?	☐ Yes] No
		(a) Name of organiz	ation	(b) Type of organization	(c) Description of relationshi	ip		

PAY IT FORWARD PROJECT 20-4810720

Statement 1 Form: 990 EZ Page: 1 Part: I Question: 16

Attachment listing other expenses for Part II

Description	Total:	Pgm Services	Mgt and General	Fundrasing
Program Expense: Peru	\$7,298.00			
Program Expense: Pakistan	\$4,501.00			
Program Expense: Argentina	\$3,027.00			
Program Expense: Travel	\$2,747.00			
Program Expense: Mexico	\$2,574.00			
Program Expense: Cambodia	\$2,177.00			
Depreciation Expense	\$805.00			
Program Expense: Homeless	\$429.00			
Program Expense: El Salvador	\$401.00			
Advertising	\$368.00			
Fundraising Expense	\$210.00			
Internet Expense	\$81.00			
Insurance	\$80.00			
Taxes & Licenses	\$25.00			
Program Expense: Other	\$10.00			
Commssions & Fees	\$10.00			
Bank Charges	\$9.00			
-	*** *** *** *** ***			

Total: \$24,752.00

PAY IT FORWARD PROJECT 20-4810720

Statement 2
Form: 990 EZ
Page: 2
Part: III
Question:

Program Services

Flogram Services	
Achievement	Pgm. Svc. Exp
Emergency Assistance Programs, General/Other: PIFP provided grants in Peru to assist individuals and families following the devastating earthquake which impacted the country in August of 2007 * \$4,750 was used to purchase and build 4 shelters and 3 tents for displaced families * \$1,983 was used to purchase rice, beans, powder milk, oatmeal, oil, soap and mattresses which were distributed to the families most in need * \$565 was used to establish a small sewing school where many women are learning a new skill and in turn will help them generate an income so they can become self-sufficient (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$7,298.00
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Emergency Assistance Programs, General/Other: PIFP provided grants in Cambodia to assist children living in immense poverty at a trash dump towards obtaining a home and an education at a NGO home for children. \$600 was provided with an ensuing \$700 a year commitment to sponsoring a child until the age of eighteen. *Coordination in obtaining a free wheelchair for a crippled fourteen year old boy * \$300 was provided to start a small library in this boy's hometown * \$1,277 was used to purchase additional necesssities for the most needy children and sponsored an event whereby 150 children were able to go to an amusement park and provided dinner and ice cream for them. (0 1)	\$2,177.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$4.504.00
Emergency Assistance Programs, General/Other: PIFP provided grants in Pakistan to assist families and individuals as they continue to rebuild their livelihoods following the earthquake of 2005. *\$3,480 in grants were provided to purchase 8 cows for fifteen families with the stipulation that their way of paying it forward, was to give one glass of milk to someone not related to them every day * 5 sewing machines awarded to five ladies who became professional seamstresses following training at the sewing school PIFP established in 2006 ~ as part of their way of paying it forward, these ladies will teach someone else to continue the legacy of paying it forward ~ 3 additional sewing machines were provided to entice future seamstresses. The selection process to determine which families and individuals are to receive assistance from PIFP involves the following: * Careful review of the economic situation of the family / individual to ascertain true needs * Study of what means of business could be feasible for sustainability and success * Personal interview session with the family / individual * (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$4,501.00
Children & Youth Services, General/Other: Provided food, blankets, toiletries and other necessities to an orphanage in Mexico. (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$2,574.00
Human Services Programs, General/Other: Purchased and distributed food to the homeless in Virginia on several occasions. (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$429.00
Children & Youth Services, General/Other: Sponsored a Christmas party and provided gifts for children and families in El Salvador who could not otherwise afford to have a decent meal and/or who could not afford to provide gifts to their children. (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$401.00
Emergency Assistance Programs, General/Other: PIFP set up a sewing school for a group of Indian Woman from The Toba Community in Argentina. The main purpose of the school was to teach the women how to make clothing and/or other goods that they could sell in order to provide them and their families with the funds to purchase much needed necessities that they would not be able to afford otherwise. PIFP also provided five (5) sewing machines, one (1) iron, and fabric or order to help the school get started. (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$3,027.00
Human Services Programs, General/Other: Our mission is to asist individuals and organizations who are living in poverty, are homeless, and/or affected by major disasters. (0 1) Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	\$0.00

Total: \$20,407.00

Statement 3

Form: 990 EZ Page: 1 Part: II Question: 26

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Other Liabilities

Liability Description	BOY Amount	EOY Amount
Loan Payable-Director	\$2,669.00	
Total:	\$2,669.00	

Statement 4

Form: 990 EZ Page: 2 Part: IV Question:

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Officers, Directors, Trustees, and Key Employees

Name and Address Denise Bobba		Ave. Hrs/week	Comp. \$0.00	Benefits \$0.00	Expenses \$0.00
Addr 1:	PO Box 903				
Addr 2:					
CSZ:	Ashburn, VA 20146				
Country:	United States				
Edna Salazar		10	\$0.00	\$0.00	\$0.00
Title:	Secretary				
Addr 1:	PO Box 903				
Addr 2:					
CSZ:	Ashburn, VA 20146				
Country:	United States				
Wendy Farrell		15	\$0.00	\$0.00	\$0.00
Title:	Treasurer				
Addr 1:	PO Box 903				
Addr 2:					
CSZ:	Ashburn, VA 20146				
Country:	United States				
TOTALS			\$0.00	\$0.00	\$0.00