Form 1024

(Rev. September 1998) Department of the Treasury Internal Revenue Service

Application for Recognition of Exemption Under Section 501(a)

OMB No. 1545-0057

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

(Date)

Read the instructions for each Part carefully. A User Fee must be attached to this application. If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to the organization. Complete the Procedural Checklist on page 6 of the instructions. Part I. Identification of Applicant (Must be completed by all applicants; also complete appropriate schedule.) Submit only the schedule that applies to your organization. Do not submit blank schedules. Check the appropriate box below to indicate the section under which the organization is applying: Section 501(c)(2)—Title holding corporations (Schedule A, page 7) a Section 501(c)(4)-Civic leagues, social welfare organizations (including certain war veterans' organizations), or local associations of b employees (Schedule B, page 8) Section 501(c)(5)-Labor, agricultural, or horticultural organizations (Schedule C, page 9) C Section 501(c)(6)-Business leagues, chambers of commerce, etc. (Schedule C, page 9) d Section 501(c)(7)-Social clubs (Schedule D, page 11) e Section 501(c)(8)-Fratemal beneficiary societies, etc., providing life, sick, accident, or other benefits to members (Schedule E, page 13) 4 Section 501(c)(9)-Voluntary employees' beneficiary associations (Parts I through IV and Schedule F, page 14) q Section 501(c)(10)-Domestic fraternal societies, orders, etc., not providing life, sick, accident, or other benefits (Schedule E, page 13) h Section 501(c)(12)-Benevolent life insurance associations, mutual ditch or irrigation companies, mutual or cooperative telephone companies, or like organizations (Schedule G, page 15) Section 501(c)(13)—Cemeteries, crematoria, and like corporations (Schedule H, page 16) Section 501(c)(15)-Mutual insurance companies or associations, other than life or marine (Schedule I, page 17) k Section 501(c)(17)-Trusts providing for the payment of supplemental unemployment compensation benefits (Parts I through IV and Schedule J, page 18) 1 Section 501(c)(19)—A post, organization, auxiliary unit, etc., of past or present members of the Armed Forces of the United States (Schedule K, page 19) m Section 501(c)(25)-Title holding corporations or trusts (Schedule A, page 7) n Full name of organization (as shown in organizing document) 2 Employer identification number (EIN) (if 1a none, see Specific Instructions on page 2) 270 UIATIA Name and telephone number of person to be 1b c/o Name (if applicable) 3 contacted if additional information is needed OSEPH C TURNE 10 Address (number and street) Room/Suite 20 im City, town or post office, state, and ZIP + 4 If you have a foreign address, see Specific 1d Instructions for Part I, page 2. 08004 60 Web site address Date incorporated or formed 1e Month the annual accounting period ends 5 WWW a IOLAUN No Did the organization previously apply for recognition of exemption under this Code section or under any other section of the Code? 6 If "Yes," attach an explanation. RINO 7 Has the organization filed Federal income tax returns or exempt organization information returns? Yes If "Yes," state the form numbers, years filed, and Internal Revenue office where filed. Check the box for the type of organization. ATTACH A CONFORMED COPY OF THE CORRESPONDING ORGANIZING DOCUMENTS TO 8 THE APPLICATION BEFORE MAILING. Corporation— Attach a copy of the Articles of Incorporation (including amendments and restatements) showing approval by the а appropriate state official; also attach a copy of the bylaws. Trust-Attach a copy of the Trust Indenture or Agreement, including all appropriate signatures and dates. b C Association-Attach a copy of the Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence that the organization was formed by adoption of the document by more than one person. Also include a copy of the bylaws. If this is a corporation or an unincorporated association that has not yet adopted bylaws, check here 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 IREASU SEPH 12/7/04 lann

(Type or print name and title or authority of signer)

For Paperwork Reduction Act Notice, see page 5 of the instructions.

(Signature)

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Form 1024 (Rev. 9-98) Page 3 Part II. Activities and Operational Information (continued) 3 Give the following information about the organization's governing body: Names, addresses, and titles of officers, directors, trustees, etc. b Annual compensation · MRRICHAND BITTLE - PANEL MEMBER IWEBMASTER POBOX67 13391 ROADE, NIW EPHRATA WA. 98823-0067 \$ 0 · MR ROBERT CARR = PANEL MEMBER P. O. Box 461 FORT Mc Loy FL 321343 · MR DON KENNEDY - PANEL MEMBER 28 ROYAL OAK COURT OTTAWA ONTANIO CENTRAL KITSNA · MRCHUCK SIEZAK - PANEL MEMBER 413 1/2 E. GRAND AVE. El SEGUNDO, CA. 90245-4102 MR JOSEPH C TURNER - TREASURER 2304 LORKIM LANE ATCO N.J. 08004 MR. JERRY WOFFORD - PANEL MEMBER 1107 E 10TH ST. CASA GRANDE, AZ. 85222-3605 If the organization is the outgrowth or continuation of any form of predecessor, state the name of each predecessor, the period during which it was in existence, and the reasons for its termination. Submit copies of all papers by which any transfer of assets was effected. NO If the applicant organization is now, or plans to be, connected in any way with any other organization, describe the other organization and 5 WE WANT TO BE A STAND ALONG TONS TO ANOTHER ONGIANT ATTIONS. EXAMPLE: MANYOFOUR MEMBERS ARE ALSO MEMBERS OF THE LOIST AIRBORNE DIVISION ASSOCIATION. If the organization has capital stock issued and outstanding, state: (1) class or classes of the stock; (2) number and par value of the 6 shares; (3) consideration for which they were issued; and (4) if any dividends have been paid or whether your organization's creating instrument authorizes dividend payments on any class of capital stock. NIA 7 State the qualifications necessary for membership in the organization; the classes of membership (with the number of members in each class); and the voting rights and privileges received. If any group or class of persons is required to join, describe the requirement and explain the relationship between those members and members who join voluntarily. Submit copies of any membership solicitation material. Attach sample copies of all types of membership certificates issued. MUST BE FORMER ALIOIVETERANS, OR WIFES OF ALIOIVETERANS. All MEMBERS CAN VOTE WE HAVE NOT SSUED CENTIFICATES, THE ROSTER iS A MEMBER'S PROOF 8 Explain how your organization's assets will be distributed on dissolution. THE ONLY ASSETS ANE THE WEBSITE COMPUTER EQUIPMENT WHICH iS A USED PC. THE WEBMASTER WILL RETAINIF WE EVER DISSOLVE. NET WONTH OF AUSED CONPUTER HANDLY WONTH DISCUSSING

Part III. Financial Data (Must be completed by all applicants)

Complete the financial statements for the current year and for each of the 3 years immediately before it. If in existence less than 4 years, complete the statements for each year in existence. If in existence less than 1 year, also provide proposed budgets for the 2 years following the current year. A. Statement of Revenue and Expenses

	A. Otato	none of never	ide dila Exper	1000		
		(a) Current Tax Year	3 Prior Tax Years	or Proposed Budge	t for Mext 2 Years	A large and
	Revenue	From 9/16/04			STATE PROFESSION AND A	
		To12/31/04	(b) 2005	(c) 2006	(d)	(e) Total
1	Gross dues and assessments of members			\$1700,00	with the face worth on	No and the St
2	Gross contributions, gifts, etc.	0	0			
3	Gross amounts derived from activities related to	2	6131.43	\$ 1000.00	S notrepen nove	a fatter te
3	the organization's exempt purpose (attach		1000.00	100.00		
	schedule) (Include related cost of sales on line 9.)	0	200.00	200.00	and the second second	
4	Gross amounts from unrelated business activities (attach schedule)	0	0	0	n tradaction according	Section Contraction
5	Gain from sale of assets, excluding inventory items					
	(attach schedule)	0	3	0		
6	Investment income (see page 3 of the instructions)	0	0	0	Sector Call Composition	12.001.00
7	Other revenue (attach schedule).	0	0	0		
8	Total revenue (add lines 1 through 7)	1512.00	\$9031.43	\$3.000.00	E allow a saw	1. T. M. C. M.
	Expenses					
9	Expenses attributable to activities related to the			nero and leboh S. M		S Kyntu ana
	organization's exempt purposes	411,64	\$3060.00	\$980,00	ness frittet boots	
0	Expenses attributable to unrelated business activities	0	0	0		0532,159
1	Contributions, gifts, grants, and similar amounts					
	paid (attach schedule)	0	0	O		
2	Disbursements to or for the benefit of members (attach schedule)	0	0	Ð	E. PORT IV. DOM	Distance of
3	Compensation of officers, directors, and trustees (attach schedule)	Ð	0	0		
4	Other salaries and wages	0	0	0	A HOLDERY MAD	B DON'T M
5	Interest	0	0	0		
6	Occupancy	0	0	0		
7	Depreciation and depletion	0	0	0		
8	Other expenses (attach schedule)	0	0	0		
9	Total expenses (add lines 9 through 18)	\$ 411,64	88060,00 N	\$ 980		
0	Excess of revenue over expenses (line 8 minus	and the second second second second second	-			
	line 19)	1163.32		2020.00		
	B. Balance Sh	eet (at the end	d of the period	d shown)		
						rrent Tax Year
		Assets			the second se	of 12 131/0
1	Cash				1	\$1163.32

	Assets		1
1	Cash	1	\$1163.32
2	Accounts receivable, net		д
3		3	0
4	Bonds and notes receivable (attach schedule)	4	0
5	Corporate stocks (attach schedule).	5	P
6	Mortgage loans (attach schedule)	6	e
7	Other investments (attach schedule)	7	0
8	Depreciable and depletable assets (attach schedule)	8	0
9	Land	9	Q
10	Other assets (attach schedule)	10	0
11	Total assets	11	1163.32
	Liabilities		
12	Accounts payable	12	Q
13	Contributions, gifts, grants, etc., payable	13	0
14	Mortgages and notes payable (attach schedule)	14	Q
15	Other liabilities (attach schedule)	15	0
16	Total liabilities	16	0
	Fund Balances or Net Assets	1.000	
17	Total fund balances or net assets	17	1163.32
18	Total liabilities and fund balances or net assets (add line 16 and line 17)	18	1163.32
	If there has been any substantial change in any aspect of the organization's financial activities since the end of the periodeck the box and attach a detailed explanation.		