

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 09, 2007, and ending 08, 2008

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <u>AMAT</u> <u>ACH SPARTAN</u>	D Employer identification number <u>51-0574575</u>
		Number and Street (or P.O. box, if mail is not delivered to street address) Room/suite <u>4433 Highgrove Ave</u>	E Telephone number <u>(310) 378-4571</u>
		City or town, state or country, and ZIP + 4 <u>10rrance, CA 90505</u>	F Group Exemption Number <u>1155</u>

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).
G Accounting method. Cash Accrual
 Other (specify) ▶

I Website: ▶ http://www.stepsforachild.org
 Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Organization type (check only one) — 501(c) 13 (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(2) 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.

L 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. ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21			
Revenue	1	Contributions, gifts, grants, and similar amounts received																													
	2	Program service revenue including government fees and contracts																													
	3	Membership dues and assessments			22,154																										
	4	Investment income																													
	5a	Gross amount from sale of assets other than inventory																													
	b	Less: cost or other basis and sales expenses																													
	c	Gain or (loss) from sale of assets other than inventory. Subtract line 5b from line 5a (attach schedule)							0																						
	6	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>																													
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)																													
	b	Less: direct expenses other than fundraising expenses																													
c	Net income or (loss) from special events and activities. Subtract line 6b from line 6a							0																							
7a	Gross sales of inventory, less returns and allowances																														
b	Less: cost of goods sold																														
c	Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a							0																							
8	Other revenue (describe ▶ _____)																														
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.																														
Expenses	10	Grants and similar amounts paid (attach schedule)																													
	11	Benefits paid to or for members																													
	12	Salaries, other compensation, and employee benefits																													
	13	Professional fees and other payments to independent contractors																													
	14	Occupancy, rent, utilities, and maintenance																													
	15	Printing, publications, postage, and shipping																													
	16	Other expenses (describe ▶ <u>Tournament Entry Fees/Uniforms/Insurance</u>)																													
17	Total expenses. Add lines 10 through 16.																														
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 9.																													
	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).																													
	20	Other changes in net assets or fund balances (attach explanation)																													
	21	Net assets or fund balances at end of year. Combine lines 18 through 20.																													

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
22	Cash, savings, and investments <u>utian</u>	10650	-
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)	-	3350

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Part III Statement of Program Service Accomplishments (See page 60 of the instructions.)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)
What is the organization's primary exempt purpose? <i>Community Social Skills, Skill</i>		
Describe what was achieved in carrying out the organization's exempt purposes. In a clear, concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.		
28 <i>Basic Skill Skill Training League Tournament to improve the skill level of girls and boys 3rd-8th & older. Approx 100-150 kids participate</i>	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a <i>29454</i>
29	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a <i>0</i>
30	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a <i>0</i>
31 Other program services (attach schedule)	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses. Add lines 28a through 31a		32 <i>29454</i>

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 61 of the instructions.)				
(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
<i>Benny Dertuch 4433 Highgate Avenue</i>	<i>Program Director 15-20 hours</i>	<i>1000</i>	<i>0</i>	<i>0</i>

Part V Other Information (Note the statement requirement in General Instruction V.)		Yes	No
33 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	33		<input checked="" type="checkbox"/>
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	34		<input checked="" type="checkbox"/>
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.			
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		<input checked="" type="checkbox"/>
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b		<input checked="" type="checkbox"/>
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement.	36		<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a	37a		
b Did the organization file Form 1120-POL for this year?	37b		<input checked="" type="checkbox"/>
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?	38a		<input checked="" type="checkbox"/>
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		