

Extended to November 15, 2022

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
BONIAD AYENEH, INC.
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. BOX 16490
 City or town, state or province, country, and ZIP or foreign postal code
ENCINO, CA 91416-6490

D Employer identification number
20-2597950

E Telephone number
818-435-2240

G Gross receipts \$ **353103.**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

F Name and address of principal officer: **DARIUSH EGHBALI**
18780 PASADERO DRIVE, TARZANA, CA 91356

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **www.ayeneh.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **2005** **M State of legal domicile:** **CA**

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE REALISTIC AND ORGANIZED SERVICES TO THE IRANIAN COMMUNITY IN NEED AND TO PROVIDE A		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	2
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	2
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	1.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	325420.	353102.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	1.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	325420.	353103.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	117341.	123043.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	198700.	265076.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	316041.	388119.	
19 Revenue less expenses. Subtract line 18 from line 12	9379.	-35016.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	185827.	171471.
	22 Net assets or fund balances. Subtract line 21 from line 20	20660.	41321.
		165167.	130150.

Part II Signature Block

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.

Sign Here ▶ Signature of officer **DARIUSH EGHBALI, PRESIDENT/ FOUNDER** Date

Paid Preparer Use Only

Print/Type preparer's name **VIOLETA CRISTOBAL, CPA,** Preparer's signature Date Check if self-employed PTIN **P00170723**

Firm's name ▶ **CRISTOBAL & COMPANY, CPAS** Firm's EIN ▶ **59-3800236**

Firm's address ▶ **10530 VENICE BLVD** Phone no. **424-361-5252**
CULVER CITY, CA 90232

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission: TO PROVIDE REALISTIC AND ORGANIZED SERVICES TO THE IRANIAN COMMUNITY IN NEED. TO PROVIDE A BETTER AND HEALTHIER LIVING CONDITIONS FOR THEM.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 206182. including grants of \$) (Revenue \$ 353102.) MAINTENANCE OF THREE INTERNET SITES THAT PROVIDE INFORMATION AND AWARENESS OF MAJOR SOCIAL ISSUES AND ASSIST IN DIRECTING THOSE IN NEED TO HELP AND ASSISTANCE

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) PRODUCTION OF A WEEKLY 3-HOUR TELEVISION PROGRAM BROADCAST WORLDWIDE, BRINGING AWARENESS, PROVIDING EDUCATIONAL AND PREVENTATIVE INFORMATION AND SOLUTIONS REGARDING SOCIAL MALADIES

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 206182.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefits, and other IRS filings.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official		X
15b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **DARIUSH EGHBALI - 818-827-3002**
18780 PASADERO DRIVE, TARZANA, CA 91356

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f						
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f							
Program Service Revenue	2 a DIRECT PUBLIC SUPPORT	Business Code	515100	352910.	352910.			
	b							
	c							
	d							
	e							
	f All other program service revenue	561000		192.	192.			
	g Total. Add lines 2a-2f				353102.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1.		1.		
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses	7b						
	c Gain or (loss)	7c						
	d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a							
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events								
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a	Business Code						
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d							
12 Total revenue. See instructions				353103.	353102.	1.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	110541.		110541.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	12502.		12502.	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	15401.		15401.	
13 Office expenses	2826.		2826.	
14 Information technology				
15 Royalties				
16 Occupancy	34410.		34410.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	54319.	54319.		
23 Insurance	2189.		2189.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a OUTSIDE SERVICES	89100.	89100.		
b FILMING & EDITING	22296.	22296.		
c FILMING PUBLIC SERVICE	19348.	19348.		
d SOFTWARE EXPENSE	9531.	9531.		
e All other expenses	15656.	11588.	4068.	
25 Total functional expenses. Add lines 1 through 24e	388119.	206182.	181937.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	184347.	1	169991.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net		4		
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 139465.			
	b Less: accumulated depreciation	10b 137985.	1480.	10c 1480.	
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 33)		185827.	16	171471.	
Liabilities	17 Accounts payable and accrued expenses		17		
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		20660.	25	41321.
	26 Total liabilities. Add lines 17 through 25		20660.	26	41321.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions		165167.	27	130150.
	28 Net assets with donor restrictions			28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds			29	
	30 Paid-in or capital surplus, or land, building, or equipment fund			30	
	31 Retained earnings, endowment, accumulated income, or other funds			31	
	32 Total net assets or fund balances		165167.	32	130150.
33 Total liabilities and net assets/fund balances		185827.	33	171471.	

Form 990 (2021)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	353103.
2	Total expenses (must equal Part IX, column (A), line 25)	2	388119.
3	Revenue less expenses. Subtract line 2 from line 1	3	-35016.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	165167.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	130151.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2021)

Boniad Ayeneh, Inc.
Profit & Loss
 January through December 2021

	Jan - Dec 21	Jan - Dec 20
Ordinary Income/Expense		
Income		
Direct Public Support		
Corporate Contributions	260,000.00	55,000.00
Individ, Business Contributions	92,909.81	270,420.00
Total Direct Public Support	352,909.81	325,420.00
Interest Income	0.45	0.00
Program Income	191.90	0.00
Total Income	353,102.16	325,420.00
Expense		
Advertisement	15,400.61	6,137.33
Bank Service Charge	89.06	21.09
Computer Expense		
Software expense	9,530.65	4,172.94
Total Computer Expense	9,530.65	4,172.94
Contract Services		
Accounting Fees	5,100.00	4,900.00
Outside Contract Services	84,000.00	83,200.00
Total Contract Services	89,100.00	88,100.00
Depreciation Expense	54,319.00	21,065.00
Donation	0.00	800.00
Dues and Publications	0.00	52.99
Facilities and Equipment		
Other Supplies & Equipments	763.33	1,171.58
Rent, Parking, Utilities	34,410.06	33,821.80
Total Facilities and Equipment	35,173.39	34,993.38
filming and editing	22,296.00	3,350.32
filming public service announce	19,348.00	13,133.00
Insurance - General Insurance	2,188.70	2,188.70
Internet Expense - Chatroom	933.09	8,875.31
License and permits	8,693.02	5,958.15
Office Expense	2,826.48	5,546.15
Office Supplies	817.80	839.23
Operations		
Printing and Copying	9.00	279.21
Telephone, Telecommunications	868.15	0.00
Total Operations	877.15	279.21
PayPal Fees	334.31	110.78
Payroll Expenses		
Employee wages	110,541.20	108,495.02
Payroll Processing Fees	1,603.89	1,544.18
Total Payroll Expenses	112,145.09	110,039.20
Payroll Taxes	12,502.39	8,845.87
Security Expense	345.56	589.05
Travel and Meetings	478.71	223.13

12:09 PM

11/15/22

Accrual Basis

Boniad Ayeneh, Inc.
Profit & Loss
January through December 2021

	<u>Jan - Dec 21</u>	<u>Jan - Dec 20</u>
Website expense	720.00	720.00
Total Expense	388,119.01	316,040.83
Net Ordinary Income	-35,016.85	9,379.17
Net Income	<u><u>-35,016.85</u></u>	<u><u>9,379.17</u></u>

Boniad Ayeneh, Inc.
Balance Sheet
As of December 31, 2021

	Dec 31, 21	Dec 31, 20	\$ Change
ASSETS			
Current Assets			
Checking/Savings			
BOAF-0047	1,001.39	1,000.94	0.45
BOFA-2170	143,153.12	159,540.47	-16,387.35
Paypal	25,837.69	23,805.69	2,032.00
Total Checking/Savings	169,992.20	184,347.10	-14,354.90
Total Current Assets	169,992.20	184,347.10	-14,354.90
Fixed Assets			
Accumulated Depreciation	-137,985.00	-83,666.00	-54,319.00
Computer			
SOFTWARE EQUIPMENT	34,441.24	24,781.26	9,659.98
Computer - Other	13,307.41	13,307.41	0.00
Total Computer	47,748.65	38,088.67	9,659.98
Furniture and Equipment	24,581.44	24,581.44	0.00
Office Equipment	63,423.64	22,475.32	40,948.32
Office Improvement	3,709.75	0.00	3,709.75
Total Fixed Assets	1,478.48	1,479.43	-0.95
TOTAL ASSETS	171,470.68	185,826.53	-14,355.85
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Other Current Liabilities			
PPP LOAN	41,321.00	20,660.00	20,661.00
Total Other Current Liabilities	41,321.00	20,660.00	20,661.00
Total Current Liabilities	41,321.00	20,660.00	20,661.00
Total Liabilities	41,321.00	20,660.00	20,661.00
Equity			
Unrestricted Net Assets	165,166.53	155,787.36	9,379.17
Net Income	-35,016.85	9,379.17	-44,396.02
Total Equity	130,149.68	165,166.53	-35,016.85
TOTAL LIABILITIES & EQUITY	171,470.68	185,826.53	-14,355.85