

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

2014

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning , 2014, and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PREVENT CHILD ABUSE GASTON, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 391 City or town, state or province, country, and ZIP or foreign postal code GASTONIA NC 28053		D Employer identification number 56-2097587
	F Name and address of principal officer: ROD SMALLWOOD 32 N MAIN ST. BELMONT NC 28012		E Telephone number (704) 689-2247
	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 120,161. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions) H(c) Group exemption number ▶
J Website: ▶ N/A			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1993	M State of legal domicile: NC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>REDUCE INSTANCES OF CHILD ABUSE AND NEGLECT THROUGH MEANS OF PUBLICATION TO TARGET DEMOGRAPHICS</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	12	
	4	12	
	5	0	
	6	25	
	7a	0.	
7b	0.		
Revenue	8	Prior Year	Current Year
	8		118,836.
	9		1,325.
	10		
	11		
12		120,161.	
Expenses	13		
	14		
	15		16,750.
	16a		
	b	358.	
	17		25,104.
18		41,854.	
19		78,307.	
Net Assets or Fund Balances	20	Beginning of Current Year	End of Year
	20		100,116.
	21		100,116.
22			100,116.

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	Date 04/29/15
	Type or print name and title ROD SMALLWOOD TREASURER	

Paid Preparer Use Only	Print/Type preparer's name ROD SMALLWOOD	Preparer's signature ROD SMALLWOOD	Date	Check <input type="checkbox"/> if self-employed	PTIN P00575828
	Firm's name ▶ RODNEY E. SMALLWOOD, CPA			Firm's EIN ▶ 26-1882806	
	Firm's address ▶ 32 N MAIN STREET, SUITE 303 BELMONT NC 28012			Phone no.	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No