

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# <sup>6</sup> 990

Department of the Treasury Internal Revenue Service

# **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)

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

OMB No 1545-0047
2008
Open to Public

		ue service The organization may have to use a copy of this federal to satisfy state	3,	- mspecuon
A F	or the	2008 calendar year, or tax year beginning and ending	<del></del>	
Во	heck if	Please C Name of organization	D Employer identific	cation number
		Use HS THE ANDRE AGASSI FOUNDATION		
	Addres change	s label or FOR EDUCATION		
X	]Name ]change	type Doing Business As	34-1	<u>759295</u>
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/sui	te E Telephone number	7
$\Box$	Termin	Specific	'L (702	) 227-5700
x	⊒ation Amend	110000	G Gross receipts \$	8,117,461.
	Jreturn ∏Applica		H(a) Is this a group re	
_	Ition pendini		for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
_		mpt status X 501(c) ( 3  ) ◀ (insert no )		list. (see instructions)
		e: ► WWW.AGASSIFOUNDATION.ORG	H(c) Group exemption	
	-		ar of formation: 1994 N	1 State of legal domicile: OH
Ра		Summary		
ø		Briefly describe the organization's mission or most significant activities THE ORGAN		
Activities & Governance	٠ -	TRANSFORMING U.S. PUBLIC EDUCATION FOR UNDERS	ERVED YOUTH.	THE
Ĕ	2 (	Check this box 🕨 📖 if the organization discontinued its operations or disposed of mo	ore than 25% of its assets	\$
ove	3 1	Number of voting members of the governing body (Part VI, line 1a)	3	3
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)	4	0
8	_	Fotal number of employees (Part V, line 2a)	5	20
iţie	_	Total number of volunteers (estimate if necessary)	6	250
) <u>F</u>		Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
) A		-	. 7a	0.
? — <u></u>	י מ	Net unrelated business taxable income from Form 990-T, line 34		
3		<u> </u>	Prior Year	Current Year
e e		Contributions and grants (Part VIII, line 1h)	45,895,270.	2,835,425.
Revenue	9 F	Program service revenue (Part VIII, line 2g)		
ev.	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	456,269.	<u>-18,587,638.</u>
	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-572,347.	5,269,530.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	45,779,192.	-10,482,683.
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,675,427.
,	14	Benefits paid to or for members (Part IX, com The PD		
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,077,879.
Expenses		Professional fundraising fees (Part 🔀 column (A), line 11e)		
Der.		Fotal fundraising expenses (Part IX, Column (D), like 25) 11 3,528,076.		
Ä		Other expenses (Part IX, column (A), lines_1,1a_11d, 11f-24f)	<u>`</u>	10,124,977.
1				16,878,283.
		Total expenses. Add lines 13-17 (must equal Part IX poblum (A), line 25)	45,779,192.	
		Revenue less expenses Subtract line 18 from line 12		
is o			Beginning of Year	End of Year
Ssei	20	Total assets (Part X, line 16)	120,086,024.	
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	38,886,136.	43,276,371.
		Net assets or fund balances Subtract line 21 from line 20	81,199,888.	53,691,719.
Pa	art II.	Signature Block		<del></del>
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statemen and complete Declaration of preparer (either than officer) is based on all information of which preparer has any knowledge.	ts, and to the best of my knowled ige	ge and belief, it is true, correct,
Sig	n		11-0	4-2010
Her	1	Signature of officer	Date	
	•	SHAWN CABLE, DIRECTOR OF FINANCE		
		Type or print name and title		
				er's identifying number
Paid	1		self- employed > [] (see in	structions)
Pre	parer's		EIN >	
Use	Only	yours if RSM MCGDADRET, 1140.	LIIV	
		address, and	DL	00 750 4000
		LAS VEGAS, NV 89101	Phone no. P	02 759 4000
May	y the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
8320	01 12-1	8-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate i	nstructions.	Form <b>990</b> (2008)

Form	n 990 (2008) FOR EDUC	ATION	34-1759295	Page 2
Pa	rt III Statement of Program Sen	ice Accomplishments (see instructions)		
1	Briefly describe the organization's mission	SEE SCHEDULE O FOR CONTINUA	TON	
•		EDICATED TO TRANSFORMING U.S.		
				TN
		. THE FOUNDATION DRIVES TO RE		T 1/4
		RTNERSHIPS THAT PROVIDE QUALI		
	ENRICHMENT OPPORTUNIT	IES. THE FOUNDATION PRIMARIL	Y FUNDS THE ANDRE	
2	Did the organization undertake any signific	ant program services during the year which were not liste	d on	
	the prior Form 990 or 990-EZ?		Yes	X No
	If "Yes", describe these new services on S	chedule O		
_	· · · · · · · · · · · · · · · · · · ·			X No
3		make significant changes in how it conducts, any program	n services?	L&J NO
	If "Yes", describe these changes on Sche	dule O.		
4	Describe the exempt purpose achievement	ts for each of the organization's three largest program ser	vices by expenses.	
	Section 501(c)(3) and 501(c)(4) organization	ns and section 4947(a)(1) trusts are required to report the	amount of grants and	
	allocations to others, the total expenses, a	nd revenue, if any, for each program service reported		
	•	, , , , , , , , , , , , , , , , , , , ,		
4a	(Code ) (Expenses \$	9,833,504. including grants of \$	) (Revenue \$	
40			• •	,
		FUNDS TO SPONSOR RECREATIONA		
		RISK CHILDREN FROM LOW INCOME		
	GRANTS FOR RURAL DOME	<u>STIC VIOLENCE, CHILD ABUSE PR</u>	REVENTION PROGRAMS	TO
	LOCAL AGENCIES, AND S	UPPORT FOR ELEMENTARY, MIDDLE	AND HIGH SCHOOLS	•
	THE ORGANIZATION ALSO	PROVIDES THE SCHOOL FACILITI	ES TO THE ANDRE	
	AGASSI COLLEGE PREPAR			
	AGADDI COLLIGI INDIAN	MIONI ACADEMI:		
4b	(Code ) (Expenses \$	including grants of \$	) (Revenue \$	
713	(Code ) (Expenses w	including grains of $\phi$	) (Hoveride w	,
		<del></del>		
	· · · · · · · · · · · · · · · · · · ·			
40	(Code ) (Expenses \$	including grants of \$	) (Revenue \$	
4c	(Code ) (Expenses #	including grants or \$	) (Nevenue \$	,
			<del></del>	
	_			
	Other program and the state of	dula ON		
4d	Other program services. (Describe in Sche	•		
	(Expenses \$ inclu	ding grants of \$ ) (Revenue \$		
	Takal anamana pembah aumanasa 🏲 A	Q Q Q Q Q FOR A MAjort acqual Part IV Lina 25 of	olumn (DL)	

34-1759295 Page 3

Part IV | Checklist of Required Schedules

	r		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A .	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_	,,	
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5_	<u>N/</u>	<u>A</u>
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			7.7
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Х
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide	9		х
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	11	X	
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  Did the organization receive an audited financial statement for the year for which it is completing this return that was		- 11	
12	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
40	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	5	14a		X
14a h	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
D	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	<del> </del>
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.		٦,	
	If "No", go to question 25	24a	X	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		v
	any tax-exempt bonds?	24c 24d	Х	X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240	^	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	a		<del> </del>
D	prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			<del></del>
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Х
		Form	990	(2008)

34-1759295 Page 4

	Terral Checking of Hodairea Concadies (Continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an	}		l
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X	
þ	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	X_	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			İ
	If "Yes," complete Schedule R, Part V, line 2	35_		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		Ì	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

34-1759295

Page 5

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0 if not applicable 1a 44			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			ļ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		ŀ	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country ► IRELAND, CAYMAN ISLANDS, BERMUDA			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			İ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		-
	Did the organization solicit any contributions that were not tax deductible?	<u>6a</u>	Х	ļ
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		.,	
_	were not tax deductible?	6b	X	-
7	Organizations that may receive deductible contributions under section 170(c).	7.	v	
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a 7b	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		<del> </del>
С	to file Form 8282?	7c		Х
ч	If "Yes," indicate the number of Forms 8282 filed during the year	,,,		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		,	
•	benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year? N/A	8		<u> </u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		ļ	ļ
а	Did the organization make any taxable distributions under section 4966?  N/A	9a	<u> </u>	
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter. N/A	1		
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	{	}	
11	Section 501(c)(12) organizations. Enter N/A	1	ľ	
_	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them)  11b	40-	1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	12a	├	†
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	Form	990	(SUUD
		1 0111		, _ , , , , ,

34-1759295

Page 6

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management		<del></del>	
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions.			
	Enter the number of voting members of the governing body	3		
b	Enter the number of voting members that are independent	<u>0</u>		
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?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		X
6	Does the organization have members or stockholders?	6_		_X_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	ı		
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following.			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		:	
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		!	
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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 in Schedule O	11		<u>X</u>
<u>Sect</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		_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.	1		i
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	Describe the process in 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?	16a		_X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	<u> </u>			
	tion C. Disclosure			
17	<del></del>			
17 18	tion C. Disclosure	le for		
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ► NONE	le for		
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	le for		
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply		ancial	
18	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply  Own website Another's website X Upon request		ancial	
18	List the states with which a copy of this Form 990 is required to be filed ► NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply  Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina		
18	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply  Own website. Another's website. Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.	and fina		

FOR EDUCATION

Form 990 (2008)

34-1759295

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter 0 in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees, and former such persons

(A) Name and Title	(B) Average		(C) Position					( <b>D)</b> Reportable	<b>(E)</b> Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee			Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ANDRE AGASSI TRUSTEE	0.00	x		Х				0.	0.	0.
STEVE MILLER CEO	40.00			x				128,825.	0.	32,909.
GUNLEK RUDER TRUSTEE	40.00			х				0.	200,000.	24,833.
JULIE PIPPENGER COO	40.00	_		x				125,417.	0.	11,099.
STEPHEN PANUS TRUSTEE	40.00			х				0.	146,846.	14,960.
SHAWN CABLE DIRECTOR OF FINANCE	40.00			x	ļ			0.	19,205.	1,635
PERRY ROGERS TERMINATED							Х	0.	377,071.	0.
CHRISTOPHER TODD WILSON TERMINATED							X	0.	222,000.	0.
		_								
			-							

Page 7

THE ANDRE AGASSI FOUNDATION FOR EDUCATION

(A)  Name and title	(B) (C) Average Position							(D) Reportable	(E) Reportable	(F)		
Name and the	hours per week	-				арр		compensation from the	compensation from related organizations	d oth		nt of er esation
		Indivitiual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W·2/1099-MISC	i a	and re	zation
						-				_		
						-						
1b Total		_		<u></u>		┢		254,242.	965,12	2.	85,	436.
Total number of individuals (including thos compensation from the organization	e ın 1a) who re	ceiv	ed n	nore	tha	an \$1	00,0	000 in reportable		<b>&gt;</b>	1 52	2
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			e, ke	y en	nplo	yee,	or h	nighest compensated e	mployee on	3	Ye	
For any individual listed on line 1a, is the s     and related organizations greater than \$15	um of reportab	ole c							the organization	4		
Did any person listed on line 1a receive or the organization? If "Yes," complete Sched Section B. Independent Contractors				from	an	y un	relat	ed organization for serv	rices rendered to	5	,	x
Complete this table for your five highest country the organization NONE	ompensated in	dep	ende	ent c	conf	tracte	ors t	that received more than	\$100,000 of comp	pensatio	n fror	n
(A) Name and business	s address	•						(B) Description of	services	Com	(C) pensa	ation
	<del> </del>											
						-						
Total number of independent contractors	(including the	e in	1) w	ho r	ece		mo	re than \$100,000 in con	npensation			
from the organization	0	•								Fo	rm <b>9</b> 9	0 (2008)

_			EDUCATION				34-1759	295 Page <b>9</b>
Pa	rt VII	Statement of Reve	nue		·			
		· · · · · · · · · · · · · · · · · · ·	-	-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Related organizations Government grants (contribut	nts, and ove 1f 2	835425. 107625.	2,835,425.	*		
		TOTAL FROM INCO TO THE		Business Code				
Program Service Revenue	2 a b c d e							
		All other program service reversed. Add lines 2a-2f	enue	<b>•</b>				
	3 4 5	Investment income (including other similar amounts) Income from investment of tal Royalties		est, and	12,506.			12,506.
	6 a b c	Gross Rents Less rental expenses Rental income or (loss)	(i) Real 28,676.	(II) Personal	00 686	00.585		
		Net rental income or (loss)	() Converting	(d) Other	28,676.	28,676.		
	b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)	(i) Securities 18600144 ########	(ii) Other	,		-	
ļ		Net gain or (loss)			-18600144.	<u>-18600144.</u>		
Other Revenue		Gross income from fundraisin including \$ contributions reported on line Part IV, line 18 Less direct expenses	of a 1c). See	5135651.				
Other Reven	9 a	Net income or (loss) from fund Gross income from gaming and Part IV, line 19	_		5,135,651.	5,135,651.	-	<del> </del>
	С	Less direct expenses  Net income or (loss) from gan  Gross sales of inventory, less	_	<b>•</b>	-	-		· · · · · · · · · · · · · · · · · · ·
	b	and allowances Less cost of goods sold Net income or (loss) from sale	a b	<b>&gt;</b>	-			
	11 a	Miscellaneous Revenu	Je	Business Code 90099	105,203.	105,203.		
	С							
	d	• •	-		105 202			
		Total Revenue Add man to 22.2	4 5 64 74 0- 0- 40	b and the	105,203.	-13330614.	0.	12,506.
83200 02-02	12 9 -09	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 50, 70, 80, 90, 10	ic, and 11e	T TO 400009.	1 TOOOOT4.	·	Form <b>990</b> (2008)

## Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	<del>``</del>	<del></del>	<del></del>	<del></del>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	5,675,427.	5,675,427.	,	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				<del></del>
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)	040 256	000 440	050 064	070 064
7	Other salaries and wages	848,376.	288,448.	279,964.	279,964.
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	162,671.	50,711.	62,740.	49,220.
9	Other employee benefits	66,832.	22,724.	22,054.	
10	Payroll taxes	00,032.	24,144.	44,054.	22,054.
11	Fees for services (non-employees):				
a	Management	586,930.		586,930.	
b	Legal Accounting	30,624.		30,624.	
4	Lobbying	30,024		30,024.	
	Professional fundraising services. See Part IV, line 17			• ,	
f	Investment management fees				<del></del>
g	Other	664,976.	22,081.	389,688.	253,207.
12	Advertising and promotion	116,542.	39,537.	38,375.	38,630.
13	Office expenses	137,427.	30,606.	29,705.	77,116.
14	Information technology				
15	Royalties				
16	Occupancy	134,180.	51,074.	41,553.	41,553.
17	Travel	193,051.	90,405.	51,207.	51,439.
18	Payments of travel or entertainment expenses		ļ		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	27,166.	6,757.	13,852.	6,557.
20	Interest	1,429,024.	485,868.	471,578.	471,578.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,519,549.	1,519,549.		00 00
23	Insurance	72,705.	25,587.	23,559.	23,559.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				·
а	LOSS ON SWAP AGREEMENT	3,420,074.	1,162,826.	1,128,624.	1,128,624.
b	WRITE OFF UNCOLLECTIBLE	856,133.	291,085.	282,524.	282,524.
С	PRODUCTION COSTS	604,458.			604,458.
d	LINE OF CREDIT FEES	136,160.	46,294.	44,933.	44,933.
е	FRIDAY NIGHT	133,101.			133,101.
f	All other expenses	62,877.	24,525.	18,793.	19,559.
25	Total functional expenses. Add lines 1 through 24f	16,878,283.	9,833,504.	3,516,703.	3,528,076.
26	Joint Costs Check here ▶ if following				
	SOP 98-2. Complete this line only if the organization	]			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	11			Form <b>990</b> (2008)

Form **990** (2008)

Form 990 (2008)

Pa	rt X	Balance Sheet		<u> </u>	1705250go
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,102,719.	1	879,258.
	2	Savings and temporary cash investments	1,217,696.	2	960,183.
	3	Pledges and grants receivable, net	4,996,100.	3	2,777,203.
	4	Accounts receivable, net .		4	68,507.
	5	Receivables from current and former officers, directors, trustees, key			
	}	employees, or other related parties. Complete Part II of Schedule L.		_5	
	6	Receivables from other disqualified persons (as defined under section			
	]	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			*
		Part II of Schedule L		_6	
ets	7	Notes and loans receivable, net		7	4,379.
Assets	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges		9	3,116.
		Land, buildings, and equipment. cost basis 10a 35,673,030.			
	b	Less accumulated depreciation Complete Part VI of Schedule D  10b  2,432,540.	34,389,121.		33,240,490.
	11	Part VI of Schedule D 10b 2,432,540.  Investments - publicly traded securities	34,630,194.	10c	12,903,776.
	12	Investments - other securities See Part IV, line 11	42,200,702.	12	44,631,449.
	13	Investments - program-related See Part IV, line 11	12/200//02:	13	<u> </u>
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	549,492.	15	1,499,729.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	120,086,024.	16	96,968,090.
	17	Accounts payable and accrued expenses	1,088,228.	17	121,590.
	18	Grants payable	2,010,447.	18	1,861,226.
	19	Deferred revenue .		19	
	20	Tax-exempt bond liabilities .	35,705,000.	20	35,705,000.
es	21	Escrow account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			. ;
iab		highest compensated employees, and disqualified persons. Complete Part II			´
_	1	of Schedule L	82,461.	22	73,843.
	23	Secured mortgages and notes payable to unrelated third parties	<u> </u>	23	
	24	Unsecured notes and loans payable	0.	24	5,514,712.
	25	Other liabilities. Complete Part X of Schedule D	38,886,136.	25	43,276,371.
	26	Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117, check here	30,000,130.	26	43,410,311.
ro.		Organizations that follow SFAS 117, check here LXJ and complete lines 27 through 29, and lines 33 and 34.			,
ğ	27	Unrestricted net assets	76,223,773.	27	47,414,868.
alar	28	Temporarily restricted net assets	4,976,115.	28	6,276,851.
g p	29	Permanently restricted net assets		29	
Fund Balances		Organizations that do not follow SFAS 117, check here			
5		complete lines 30 through 34.			•
ets	30	Capital stock or trust principal, or current funds		_30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et/	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances .	81,199,888.		53,691,719.
-	34	Total liabilities and net assets/fund balances	120,086,024.	34	96,968,090.
Pa	rt XI	Financial Statements and Reporting			
			<b>7</b>		Yes No
1		ounting method used to prepare the Form 990: Cash X Accrual	_l Other		
2a		e the organization's financial statements compiled or reviewed by an independent	accountant?		2a X
b		e the organization's financial statements audited by an independent accountant?	naihilitu far avarasht ef the	4. المراجع	. 2b X
С		es" to lines 2a or 2b, does the organization have a committee that assumes respo w, or compilation of its financial statements and selection of an independent acco		audit	
2-					
Sa		result of a federal award, was the organization required to undergo an audit or au and OMB Circular A-133?	and do ook lotter in the only	, Auc	3a X
_		as " did the organization undergo the required audit or audits?	••		2h 22

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

THE ANDRE AGASSI FOUNDATION

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

		FOR EDU							34	1-1/59295	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	.) (see ins	tructions)			
he organ	nization is not a	a private foundation	because it is (Please ch	eck only o	ne organiz	ation.)					
1	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)				
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)							
з 🔲	A hospital or	a cooperative hospi	tal service organization (	described	n section	170(b)(1)	<b>(A)(iii).</b> (At	tach Sche	dule H.)		
4	A medical res	search organization	operated in conjunction	with a hos	pıtal desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter th	ne hospital's name,	
	city, and stat	e									
5	An organizati	on operated for the	benefit of a college or u	niversity ov	vned or op	erated by	a governi	nental uni	t describe	d in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)								
e 🗀	A federal, sta	ite, or local governm	ent or governmental unr	t described	ın sectio	n 170(b)(1	)(A)(v).				
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit c	r from the	general p	ublic described in	
	section 170(	b)(1)(A)(vi). (Comple	te Part II)								
8 🔲	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)						
9 🔲	An organizati	on that normally rec	eives (1) more than 33	1/3% of its	support fi	om contri	butions, m	nembershi	p fees, an	d gross receipts from	n
	activities rela	ted to its exempt fui	nctions - subject to certa	un exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support f	rom gross investmer	nt
	income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	ınızatıon a	fter June 30, 1975.	
	See section	509(a)(2). (Complete	the Part III)								
10 🔲	An organizati	ion organized and op	perated exclusively to te	st for publi	c safety S	See sectio	n 509(a)(4	l). (see ins	tructions)		
11 🔲	An organizati	on organized and op	perated exclusively for th	ne benefit d	of, to perfo	rm the fur	nctions of,	or to carr	y out the p	ourposes of one or	
	more publicly	supported organiza	itions described in secti	on 509(a)(1	l) or sectio	n 509(a)(2	) See sec	tion 509(	a)(3). Che	ck the box that	
	describes the	type of supporting	organization and compl	ete lines 1	1e through	11h					
	a Type I	l b∟	_ Type II و	Typ	e III - Func	tionally int	egrated		d	Type III - Other	
e	By checking	this box, I certify tha	it the organization is not	controlled	directly o	r ındırectly	by one or	r more dis	qualified p	ersons other than	
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	9(a)(1) or s	ection 509(a)(2)	
f	if the organiz	ation received a writ	ten determination from t	the IRS tha	t it is a Ty	pe I, Type	II, or Type	e III		_	
	supporting of	rganızatıon, check th	is box							L	_
g	Since August	t 17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing per	sons?	<del></del>	
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons o	lescribed	ın (ıı) and (	III) below,	Yes No	<u>o</u>
	_	• •	upported organization?							11g(i)	
	• •	•	n described in (i) above?							11g(ii)	
		•	person described in (i)							11g(iii)	_
h	Provide the f	ollowing information	about the organizations	the organ	ization sup	oports.					
	<del></del>		(:::) Tune of	T				<del></del>	Т	<del></del>	
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o in col. (i) lis	rganization	(v) Did you organizat	notify the	(vi) Is   organizati	s the on in col.	(vii) Amount of	
orga	anization		(described on lines 1-9		document?	(i) of your		(i) organiz U.S	ed in the	support	
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No		
		<u> </u>	(See instructions)/								-
								ł	1 1		
<del></del>								<del> </del>	-		-
	<del></del>		<u> </u>	†					<del>                                     </del>	<u> </u>	-
				<del> </del>					<del>                                     </del>		-
								1			
	<del>,</del>			<del> </del>	<del></del>			<del>                                     </del>	<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	-
			}	1	}			1	1		
											_
otal											
											_

Schedule A (Form 990 or 990 EZ) 2008 FOR EDUCATION

34-1759295 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 7647679. 13161532. 45895270. 2788555. 82640706. include any "unusual grants") 13147670. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 7647679.13161532.45895270. 2788555.82640706. 13147670. 4 Total. Add lines 1 - 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 82640706. 6 Public Support. Subtract line 5 from line Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2006(d) 2007 (e) 2008 (f) Total (a) 2004 (b) 2005 <u> 2788555.82640706.</u> 7647679.|13161532.|45895270. 13147670 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 374,558. 1211082. 456,426. 412,719. 12,506. 2467291. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 22,989, 572,504. 5269530. 4720015. assets (Explain in Part IV) 89828012. 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 92.00 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 95.51 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and  $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007, If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c. 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carned on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f) 15 % 16 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g % Section D. Computation of Investment Income Percentage 17 % Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedulè A (Fo	om 990	or 990-EZ)	2008	FOR E	DUCA'	TION					34-17	59295 Page	4
Part IV S	<b>upple</b> Part III	<b>mental  </b> , line 12. Pi	<b>ntorm</b> rovide a	<b>nation.</b> Converse	omplete dditiona	this part to p I information	provide the (see instrui	explanat	tion required	by Part II, line	10, Part II, li	ne 17a or 17b,	
			-						000000				_
SCHEDUL	<u> A,</u>	PART	<u> </u>	_ TINE	10,	EXPLAN	NATION	FOR	OTHER	INCOME:			
SPECIAL	EVE	NT						_ <del></del> -	- <del></del>	<del></del>		<del></del>	
												· <b>-</b>	_
		<del></del>			<del>-</del>	·	···-	·····	<del></del>				_
				·							·		_
					·								_
							<del></del>				<del></del>		
							<del></del>				<del></del> .		_
							··-	-					
											<del></del>		
<del></del>				···						· · · · · · · · · · · · · · · · · · ·			
											·-	<del></del>	
		, <u> </u>				<del>-</del>					· <u>-</u>		
							· · · · · · · · · · · · · · · · · · ·						_
												·=	
					<del></del>		<del></del>					<del></del>	
						·					<u></u> ,	·····	
<del></del>										*			
	<u>.</u>										<del></del>	<del>-</del>	_
											_	<del>-</del>	
					·								
													_
						<del></del>	<del></del> .		<del> </del>				
		<del></del>					<del></del>		·	·			_

# Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

THE ANDRE AGASSI FOUNDATION

FOR EDUCATION

Employer identification number

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
Га			o or resources complete in the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's	_	Yes L No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
Pai			Part IV, line /
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p		istorically important land area
	Protection of natural habitat	Preservation of certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a co	nservation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired		_2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organization dunng the taxable
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, violations,	
	enforcement of the conservation easements it holds?		. LYes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describe	s the organization's accounting for
	conservation easements		011011
Pa	<u> </u>		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, no		
	treasures, or other similar assets held for public exhibition, e		bublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
b			
	or other similar assets held for public exhibition, education, of	or research in furtherance of public servi	ce, provide the following amounts relating to
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

	rt III Organizations Maintaining (		LI:-	torical Tr		Oth -			59295	
3	Using the organization's accession and other	er records, check any	y of the	following tha	it are a signifi	icant use	of its colle	ction ite	ms (checi	k all
	that apply).									
а	Public exhibition	C	' ├		hange progra	ams				
b	Scholarly research	e	لـا •	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how t	hey further t	he organizati	on's exer	npt purpos	e in Par	t XIV	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	er sımılar	assets	_	_	
	to be sold to raise funds rather than to be m								Yes	<u>ll No</u>
Pa	Trust, Escrow and Custodia reported an amount on Form 990, Pa	_	. Comp	lete if organ	zation answe	ered "Yes	" to Form 9	990, Par	t IV, line 9	, or
12	Is the organization an agent, trustee, custod		diany for	contribution	e or other as	sets not	included			
Ia	on Form 990, Part X?	nan or other intermet	alal y 101	CONTRIBUTION	is or other as	3613 1101	included		Yes	□ No
h	•	and complete the fe		toblo					res	L NO
D	If "Yes," explain the arrangement in Part XIV	and complete the ic	HOWING	table					A	
	December to be a second						-		Amount	
C	Beginning balance	•			•		1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance		040				1f	<del></del> _	1.,	
2a	Did the organization include an amount on F	· ·	21?		•				_ Yes	∟_ No
Pai	If "Yes," explain the arrangement in Part XIV <b>t V Endowment Funds.</b> Complete			- II An Cours (	200 D-+ IV I	10				
Fai	Littowine it Funds. Complete						. D. Th			
	D of Liter	(a) Current year	(6)	Prior year	(c) Two year	s Dack	<b>d)</b> Three yea	ars dack	(e) Four	years back
1a	Beginning of year balance	174,469.			<del></del>	-			<u> </u>	
b	Contributions	30,092.								
C	Investment earnings or losses	4,071.		<del></del>			· · · ·			
đ	Grants or scholarships		<u>-</u>		ļ		<del></del> -			
е	Other expenditures for facilities		-	•					]	
_	and programs		· ·	***************************************		<del></del> }-			<del> </del>	
f	Administrative expenses	200 (22	<u> </u>						ļ.——	
g	End of year balance	208,632.	l <u>.                                    </u>		L				<u> </u>	
2	Provide the estimated percentage of the year	ar end balance held a								
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С		<u></u> %								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	ind administe	red for th	ne organiza	tion	Г	
	by.								1 1	Yes No
	(i) unrelated organizations			• •					3a(i)	X
	(ii) related organizations				•				3a(ii)	X
	If "Yes" to 3a(ıı), are the related organization	-		-					3b	
Par	Describe in Part XIV the intended uses of the				Dod V. Loo	10				<del></del>
Га			-							
	Description of investment	(a) Cost or of basis (investr			or other (other)	(c) De	epreciation		(d) Book	value
1a	Land			16	3,914.				163	3,914.
b	Buildings			34,43	4,717.	1,9	36,38	8. 3	2,498	3,329.
С	Leasehold improvements							[_		
d	Equipment									
е	Other			1,07	4,399.		196,15	2.	578	3,247.
Total	. Add lines 1a-1e (Column (d) should equal F	orm 990, Part X, colu	ımn (B),				11.1.61	▶ 3		,490.

Schedule D (Form 990) 2008

Tr/D	EDUC	רוחתי	$\Gamma \cap NT$
ruk	P. I J. J.	- A 11 1	

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12	1	
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuation st or end-of-year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
BAY HARBOUR	1,162,270.	COST	
DAVIDSON KEMPNER INT'L FUND	3,721,256.	COST	
CERBERUS SERIES III HOLDINGS,			
LLC	845,097.	COST	
MONITOR VENTURE PARTNERS	173,190.		_
ARES CORP	169,990.		
KS INTERNATIONAL	1,869,610.	COST	
OCM/GFI POWER FUND	172,913.	COST	
SANDERSON INT'L VALUE FUND	1,257,053.	COST	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	44,631,449.		
Part VIII Investments - Program Related. S	ee Form 990, Part X, line 1	3.	
(a) Description of investment type	(b) Book value		(c) Method of valuation st or end-of-year market value
Total (Col (b) should equal Form 990, Part X, col (B) line 13.)		28	
Part IX Other Assets. See Form 990, Part X, line			
(a)	Description		(b) Book value
		•	
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col (B) II			<u> </u>
Part X Other Liabilities. See Form 990, Part X,	line 25.	(b) Amount	1
(a) Description of liability		(b) Amount	-
Federal income taxes		F F4 4 F4 6	-
INTEREST RATE SWAP LIABILITY		5,514,712.	,
			1.
			· · · · · · · · · · · · · · · · · · ·
			,
Total. (Column (b) should equal Form 990, Part X, col (B) li		5,514,712.	

	dule D (Form 990) 2008 FOR EDUCATION					<u> 34</u>	1/59295	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Fina	ncial S	tateme	nts			
1	Total revenue (Form 990, Part VIII, column (A), line 12)			_1_			-10,482	,683.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			16,878	,283.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			-27,360	,966.
4	Net unrealized gains (losses) on investments			4				
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior penod adjustments			7			-147	,203.
8	Other (Describe in Part XIV)			8				
9	Total adjustments (net) Add lines 4-8	•		9			-147	,203.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10			-27,508	
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	/ith Re	venue p	er Re			
1	Total revenue, gains, and other support per audited financial statements					1	-10,482	,683.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		•					
а	Net unrealized gains on investments	2a						
b	Donated services and use of facilities	2b	<del></del> -					
c	Recoveries of prior year grants	2c				}		
ď	Other (Describe in Part XIV)	2d						
e	Add lines 2a through 2d	<u></u>	<u> </u>			2e		0.
3	Subtract line 2e from line 1				-		-10,482	683.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					-		
· a	investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIV)	4b						
c	Add lines 4a and 4b					4c		0.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		•				-10,482	
Pai	t XIII Reconciliation of Expenses per Audited Financial Statem	ents \	With Ex	penses	per l	Retu	rn	
1	Total expenses and losses per audited financial statements					1	16,878	,283.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				Γ			
a	Donated services and use of facilities	2a			•			
b	Prior year adjustments	2b						
c	Losses reported on Form 990, Part IX, line 25	2c				`		
d	Other (Describe in Part XIV)	2d						
e	Add lines 2a through 2d					2e		0.
3	Subtract line 2e from line 1		•	•		3	16,878	283.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				Ī			
· a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			l	1		
b	Other (Describe in Part XIV)	4b	<del> </del>					
c	Add lines 4a and 4b					4c		0.
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			•	ľ	5	16,878	
	t XIV Supplemental Information							
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II. lines	1a and 4	: Part IV. I	ines 1b	and 2	2b. Part V. lin	 e 4. Part
	rt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.	·		•				·
	RT V, LINE 4: THE ENDOWMENT WAS SETUP BY S	LETI	ON C	ONSTR	UCT	ON	TO	
								<del></del>
FUI	TO COLLEGE SCHOLARSHIPS FOR HIGH SCHOOL GR	ADUA	TES	OF TH	E Al	NDR:	E AGASS	SI
COI	LEGE PREP ACADEMY. IN 2009, THE FIRST GRA	PAUD	ING	CLASS	GRA	ADU.	ATED FF	MO
AA(	CPA.							
						-		
_								
							-	

Part XIV Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
METROPOLITAN REAL ESTATE PTRS(MREP)	1,367,344.	COST
GLOBEFLEX INT'L PTRS	1,628,388.	COST
DAVIDSON COLCHIS CAPITAL REALTY PARTNERS LTD	2,878,903.	COST
MREP EUROPE (METROPOLITAN EUROPE)	194,365.	COST
SEMINOLE OFFSHORE FUND LTD	2,551,942.	COST
BLACK BEAR OFFSHORE FD LTD	1,870,381.	COST
SPINNER GLOBAL TECHNOLOGY FUND	909,840.	COST
DRAWBRIDGE GLOBAL MACRO	1,966,392.	COST
LOEB MARATHON OFFSHORE	972,826.	COST
CITADEL KENSINGTON GLOBAL STRATEGIES	3,172,003.	COST
ARES CORP FUND II, LP	679,850.	COST
RLR FOCUS OFFSHORE FUND	930,454.	COST
CLARIUM CAPITAL FUND	1,649,585.	COST
ACOF II	84,750.	COST
BLUMBERG CAPITAL II LP	57,461.	COST
ATTAICUS EUROPEAN, LTD	1,019,508.	COST
THIRD AVE GLOBAL VALUE OFFSHRE FUND, LTD	815,764.	COST
MREP GLOBAL	230,225.	COST
ARES/IVY HILL	1,843,532.	COST
CHILTON GLOBAL NATURAL-RES INTL	1,524,541.	COST
VISIO CAPITAL	436,453.	COST
GOLDENTREE CLO	1,020,099.	COST
ARES CORP FUND III	38,607.	COST
PRIME FINANCE	192,699.	COST
ROYALTY PHARMA	1,564,320.	COST
VISIO LIMITED FUND	490,352.	COST
		<u> </u>

FOR EDUCATION

Part XIV | Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12		<del></del>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
POST STRATEGIC OFFSHRE FUND	2,324,255.	COST
COLCHESTER GLOBAL BOND FUND	2,845,231.	COST

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

2008

OMB No 1545-0047

Open To Public Inspection

Schedule G (Form 990 or 990-EZ) 2008

Name of the organization THE ANDRE AGASSI FOUNDATION Employer identification number FOR EDUCATION 34-1759295 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Email solicitations Solicitation of government grants b Phone solicitations g X Special fundraising events C d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? \_ Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table. (v) Amount paid Did (iii) (vi) Amount paid (iv) Gross receipts (i) Name of individual to (or retained by) fundraiser have custody or control of contributions? to (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser organization listed in col (i) Yes No 08 GRAND SLAM 4,927,957 ,927,957. 985,426 985,426. HAMPTONS EVENT 5,913,383. 5,913,383. Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedulè G (Form 990 or 990 EZ) 2008 FOR EDUCATION

34-1759295 Page 2

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000. (c) Other Events (b) Event #2 (a) Event #1 (d) Total Events HAMPTONS 08 GRAND NONE (Add col (a) through EVENT SLAMcol (c)) (total number) (event type) (event type) Revenue 5,913,383. 985,426 4,927,957 Gross receipts 2 Less. Charitable contributions 4,927,957 5,913,383. 985,426 Gross revenue (line 1 minus line 2) Cash prizes 4 Non-cash prizes Direct Expenses 436,679 436,679. Rent/facility costs Other direct expenses 436,679) Direct expense summary. Add lines 4 through 7 in column (d) 5,476,704. Net income summary Combine lines 3 and 8 in column (d) Part III | Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (d) Total gaming (Add (b) Pull tabs/Instant (c) Other gaming Revenue (a) Bingo col (a) through col (c)) bingo/progressive bingo Gross revenue 2 Cash prizes Direct Expenses Non-cash prizes 3 Rent/facility costs 4 Other direct expenses 5 % Yes % Yes % Yes Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary. Combine lines 1 and 7 in column (d) No Yes Enter the state(s) in which the organization operates gaming activities a Is the organization licensed to operate gaming activities in each of these states? 9a b If "No," Explain. 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Schedule G (Form 990 or 990-EZ) 2008 FOR EDUCATION	34-175	929	5. Pa	age 3
			Yes	No
13 Indicate the percentage of gaming activity operated in.	ſ			
a The organization's facility	%			
b An outside facility	%			
14 Provide the name and address of the person who prepares the organization's gaming/special events books and reco	ords:			
Name				
Address >				-
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Į.	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amou	ınt			
of gaming revenue retained by the third party > \$				
c If "Yes," enter name and address		1		
				İ
Name				
Address >				
16 Gaming manager information				
Name		ļ		
		1		
Gaming manager compensation  \$				ĺ
Description of services provided				
Director/officer Employee Independent contractor				٠ .
Director/officer Employee Independent contractor				
17 Mandatory distributions				
•				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the	ŀ	11 d		
organization's own exempt activities during the tax year > \$				
organization of the overline defined the tax your p				

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE I					,			OMB No 1545-0047	11
(Form 990)			Grants and O Governme	ants and Other Assistance to Organizatio Governments, and Individuals in the U.S.	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.			2008	
Department of the Treasury Internal Revenue Service	•	Complete	► Complete if the organization	answered "Yes," on F ► Attach to Form 990.	on Form 990, Pa 1990.	zation answered "Yes," on Form 990, Part IV, lines 21 or 22.  Attach to Form 990.		Open to Public Inspection	٠
Name of the organization THE FOR	S ANDRE AGASSI	1	FOUNDATION					Employer identification number 34-1759295	nber . 95
Part I General Information	1 7	nce							
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tain records to substantia	ate the arr	nount of the grants o	r assistance, the c	grantees' eligibility	for the grants or assi	stance, and the select		г
criteria used to award the grants or assistance?	grants or assistance?							X Yes	No N
2 Describe in Part IV the organization's procedures for monitoring the use of	inization's procedures for	r monitorin	ng the use of grant fu	grant funds in the United States	States				
Part II Grants and Other As	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	nts and Or	rganizations in the l	Jnited States. Co	mplete if the orga	ınızatıon answered "Y	es" on Form 990, Part	IV, line 21, for any	
recipient that receive	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	ock this bo	x if no one recipient	received more tha	in \$5,000 Use Pa	rt IV and Schedule I-1	Part IV and Schedule I-1 (Form 990) if additional space is needed	al space is needed	1
1 (a) Name and address of organization or government	rganization (b) EIN		(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
								TO FUND THE TENNIS	
BOY'S & GIRL'S CLUB OF LA	LAS VEGAS							PROGRAM AND CAPITAL	
PALMS AIRPORT DRIV								REPAIRS AT THE LOCATION	NO
LAS VEGAS NV 89101	88-0093150		501(C)(3)	332,676.	0	FMV		WITH ANDRE'S NAME ON	IT.
1 2 2	HOX 451006							FUNDING FOR THE TEACHING	ING
	94-2790134		501(C)(3)	37,000.	0.	FMV		PROGRAM.	
CHARTER SCHOOL DEVELOPMENT	TV							FUNDING FOR GENERAL	
FOUNDATION - 3883 HOWARD HUGHES	HUGHES							GRAM EXPENSES TO	SERVE
PARKWAY - LAS VEGAS, NV	NV 89169 86-0955045		501(C)(3)	135,100.	0	FMV		AT RISK YOUTH,	
ASSISTANT LEAGUE OF LAS VEGAS	VEGAS								
6446 W. CHARLESTON BLVD								SES TO	SERVE
LAS VEGAS, NV 89146	88-0137831	$\neg$	501(C)(3)	75,000.	0	FMV		AT RISK YOUTH.	
								THE DIFFER	<u>ы</u>
ANDRE AGASSI PREPARATORY ACADEMY	ACADEMY							THE STATE	FUNDING
1201 LAKE MEAD BLVD								OST OF A	QUALITY
LAS VEGAS, NV 89106	88-0499565	3565		4,903,591,	0	FMV		EDUCATION,	
BOYS HOPE		······································		. =				FOR GENERAL	
4100 W. FLAMINGO ROAD STE 1200	E 1200							EXPENSES TO	SERVE
LAS VEGAS, NV 89103	43-1209928		501(C)(3)	12,500.	0	EMV		AT RISK YOUTH.	
	on 501(c)(3) and governn	nent orgar	ızatıons					<b>A A</b>	
Enter total number of other organizations     LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	erwork Reduction Act N	Votice, ser	e the Instructions fo	or Form 990.				Schedule I (Form 990) 2008	2008

Schedule I (Form 990) 2008 FOR EDUCATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed

Page 2

34-1759295

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the information	n required in Part I,	line 2, and any other	additional information	
	ļ				
832102 12-18-08					Schedule I (Form 990) 2008

832102 12-18-08

THE ANDRE AGASSI FOUNDATION Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

FOR EDUCATION

▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990)

Open to Public Inspection OMB No 1545-0047 2008

Employer identification number 34-1759295

ı	TTON		11 - 14 - 1 - 1 - 1	- 1/ - 1/- 1/- 1/- 0/- 0	11-0		
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 99U), Part II.)	Assistance to Go	vernments and Orga	nizations in the U.	S. (Schedule 1 (Fo	rm 990), Part II.)		
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAS VEGAS SUN SUMMER CAMP 2775 CORPORATE CIRCLE DRIVE # 300 HENDERSON, NV 89074	23-7087968	501(C)(3)	50 000	0	FMV		FUNDING FOR GENERAL PROGRAM EXPENSES TO SERVE AT RISK YOUTH,
TEACH FOR AMERICA 1785 E, SAHARA AVE STE 460 LAS VEGAS, NV 89104	13-3541913	501(C)(3)	.000 05	0	FMV		SUPPORT FOR A NATIONAL TEACHING PROGRAM FOR GENERAL PROGRAM COSIS,
GREATER LAS VEGAS AFTER-SCHOOL ALL-STARS - 1785 E, SAHARA BLVD STE 40 - LAS VEGAS, NV 89104	95-4441208	501(C)(3)	.000 000	0	FMV		FOR GENERAL PROGRAM COSTS FOR AFTER SCHOOL PROGRAMS.
ATHLETES FOR HOPE 5335 WISCONSIN SUITE 850 WASHINGTON, DC 20015	20-4773044	501(C)(3)	29,500.	0	FMV		GENERAL FUNDING FOR A FOUNDATION THAT ANDRE WAS OF THE ORIGINAL ATHLETES TO PARTICIPATE.
	nd government or	ganizations					
S Elifer total right of other organizations	toubout Dodingt	Act Notice see th	see the Instructions for Form 990	Form 990			Schedule I-1 (Form 990) 2008

Schedule I-1 (Form 990) 2008

#### **SCHEDULE J** (Form 990)

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

THE ANDRE AGASSI FOUNDATION

FOR EDUCATION

Employer identification number 34-1759295

Pa	art I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided	any of the following to or for a person listed in Form 990,			·
	Part VII, Section A, line 1a Complete Part III to provide any	y relevant information regarding these items			
	X First-class or charter travel	X Housing allowance or residence for personal use			
	X Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written p	policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete		1b		Х
2	•	rsing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the ite		2	Х	
3	Indicate which, if any, of the following the organization use	es to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply	-			
	Compensation committee	Written employment contract			1
	Independent compensation consultant	X Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee	j l		
	_				
4	During the year, did any person listed in Form 990, Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control payme	nt?	4a		X
b	Participate in, or receive payment from, a supplemental no	onqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based co	ompensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide th	ne applicable amounts for each item in Part III		,	
			.		
	Only 501(c)(3) and 501(c)(4) organizations must comple	te lines 5-8.		i I	
5	For persons listed in Form 990, Part VII, Section A, line 1a,	, did the organization pay or accrue any compensation		1	
	contingent on the revenues of.				
а	The organization?		5a		X
b	Any related organization?		5b	İ	X
	If "Yes," to line 5a or 5b, describe in Part III.			1	,
6	For persons listed in Form 990, Part VII, Section A, line 1a,	, did the organization pay or accrue any compensation			,
	contingent on the net earnings of.				
а	The organization?		6a	ļ	X
b	Any related organization?		6b		X
	If "Yes" to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a,	, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	l	7		X
8	Were any amounts reported in Form 990, Part VII, paid or a	accrued pursuant to a contract that was subject to the		·	
	initial contract exception described in Regs section 53 49	58-4(a)(3)? If "Yes." describe in Part III	8	ĺ	х

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

34-1759295

# THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VIII, line 1a

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Deferred	Nontaxable benefits	lotal of columns (B)(I)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	Ξ	128,82		0	000	32,909.	161,734.	0
STEVE MILLER		0	0	0	00	24,833.	24,833.	
GUNLEK RUDER	<u> </u>	200,00	0.	0	0	4 1		
	Ξ	7	0.	0	0	14,960.	14,960.	
STEPHEN PANUS		146,846.	0	į		000	140,040.	0
PERRY ROGERS	€ €	377,07		0	0	0	377,071.	0
	3			0	0	0	0.	0
CHRISTOPHER TODD WILSON	: 🗉	222,00			0	0	222,000.	0
	€ €							
	9							
	€ €							
	€							
	(ii)							
	Ξ							
	⊞							
	Ξ							
	▣							
	Ξ							
	8							
	E (							
	3 8							
	€							
	Ξ							
	⊞							
	Ξ							
	≞							
	Ξ							
	(ii)							
							Schedul	Schedule J (Form 990) 2008

SCHEDULEK (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No 1545-0047 Open to Public

(h) On behalf Employer identification number å of issuer ٥ ŝ Yes 34-1759295 × ш Yes Yes (g) Defeased ŝ × Yes ŝ ŝ OF Ω (f) Description of purpose Yes Yes FUND BUILDING AACPA CAMPUS ► Attach to Form 990 To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990) ŝ ŝ O Yes Yes 35705000 (e) Issue price ŝ No œ 06/14/03 (d) Date issued Yes Yes 19,651 å 윈서 95-357155851770PAC9 × × × (c) CUSIP# ⋖ THE ANDRE AGASSI FOUNDATION Yes Yes (b) Issuer EIN Are there any lease arrangements with respect to the financed Was the organization a partner in a partnership, or a member Does the organization maintain adequate books and records Were the bonds issued as part of a current refunding issue? of an LLC, which owned property financed by tax-exempt Were the bonds issued as part of an advance refunding property which may result in private business use? EDUCATION Has the final allocation of proceeds been made? Part III Private Business Use (Optional for 2008) Proceeds in refunding or defeasance escrows Working capital expenditures from proceeds to support the final allocation of proceeds? Bond Issues (Required for 2008) Capital expenditures from proceeds Proceeds (Optional for 2008) Gross proceeds in reserve funds FOR Year of substantial completion Issuance costs from proceeds OF NEW YORK (a) Issuer name Other unspent proceeds Total proceeds of issue Name of the organization Department of the Treasury Internal Revenue Service 5spuoq A BANK Part II Part I 4 S 9 ω O 42 N က 우 Q 8 ပ Ω Ш

882121 12-19-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2008

#### SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Transactions with Interested Persons**

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

OMB No 1545-0047

2008

Open To Public Inspection

Schedule L (Form 990 or 990-EZ) 2008

Name of tr	ne organization THE				I FOU	JNDATIO	N				mployer			umber
Part I	Excess Benefit	EDUCA			- FO1(a)(	2) and acetic	501(a)(4)	orgonizatio	2000		<u> 34-17</u>	<u> 5929</u>	5	
raiti	To be completed by o									orm 00	n.E7 Da	rt V. lino	40h	
1	To be completed by c	<u>iganization</u>	s ulai e	ailswe	ieu ies	On Form 99	U, Fait IV,	IIIIe ZJa OI Z	200, 01 1	01111 93	O'LZ, Fai	it v, iiiie	(c) Corr	ected?
	(a) Name of disq	ualified pers	son					Yes	No.					
						<del>,                                      </del>							163	140
	·- <u>-</u>													
	<del></del>					<del> </del>								
		<del></del>					<u>.</u> .			_		<del>.</del>		
2 Enter:	the amount of tax impos	sed on the o	organiz	ation r	nanager	s or disqualifi	ed person	s during the	year un	der				
	n 4958										▶ \$			
3 Enter	the amount of tax, if any	, on line 2,	above,	reimb	ursed by	the organiza	ition .				▶ \$			
	- <del></del>													
Part II	Loans to and/or	From Int	erest	ted P	ersons	<b>3.</b>								
	To be completed by o	rganization	s that a	answe	red "Yes	" on Form 99	0, Part IV,	line 26, or F	orm 990	·EZ, Pa				
(a) Name of interested (b) Loan to or from (c) Orig						nal principal	(d) Bala	ance due	(e) defa			oroved ard or	(g) W	
person and purpose the organizati					ar	nount					committee?		agreer Yes	
10100	То		Fro	rom		0.07		2 042	Yes	No	Yes			No
AGASS I	ENTERPRISE	X_				39,237.		<u>3,843.</u>		X	<del>                                     </del>	<u>X</u>		X
		<del></del>							ļ		<del>                                     </del>		<u> </u>	
											<del> </del>			
					-,-				<del></del> -		-			
		·									-			
Total						▶ \$	7	3,843.			<del> </del>	L		
Part III	<b>Grants or Assist</b>	ance Ber	nefitir	ng In	tereste			0,010					<u></u>	
<u>ا</u>	To be completed by o	rganization	s that a	answe	red "Yes	" on Form 99	0, Part IV.	line 27.						
(;	a) Name of interested p					onship betwe			and		(c) Amou	unt of gr	ant or ty	pe
·			_	· · · · · ·			ganization				O1	f assista	ınce	
	,													
										<u> </u>				
								<del></del>						
Part IV	Business Transa	etione In	volvi.	na In	torost	ad Daman								
Fartiv				•										
	To be completed by o		s that a								D		(e) Sha	ring of
(;	ip between ir d the organiz		(c) Amo		(d)	Descript transacti		òrganız	ation's					
				-			,		•				rever	
СТЕРИЕ	N PANUS			EMP	LOVEI	E OF AG	ASST			AG2	ASSI	ENTE	Yes	No_X
	RUDER_					OF AG		<del> </del>			ASSI			X
	AGASSI	<del></del>				TOF F					ORE A			X
	ENTERPRISE					LOYEE	~~~~				)8 SU			X
									<del></del>					

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

#### **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

**NonCash Contributions** 

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Employer identification number 34-1759295

Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of dete revenues		9	
	Art - Works of art	Х	1	275,000.	FM7			
1	Art - Historical treasures		<u>.</u>	275,000.	r m v			
2	Art - Fractional interests		<del> </del>					
3 4	Books and publications							
4 5	Clothing and household goods	Х		579,375.	FM7			
6	Cars and other vehicles			373,373	1111			
7	Boats and planes		<del> </del>		<del> </del>			
8	Intellectual property		<del>                                     </del>			<del>-</del>		
9	Securities - Publicly traded		<del>                                     </del>					
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or		<del> </del>					
••	trust interests		†					
12	Securities - Miscellaneous							
13	Qualified conservation contribution	-						
	(historic structures)				1			
14	Qualified conservation contribution (other)							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens					<u>.</u>		
24	Archeological artifacts					,		
25	Other ► (TRIPS FOR AUC)	X	42	253,250.	FMV			
26	Other ()							
27	Other							
28	Other (		<u></u>	<u> </u>				
29	Number of Forms 8283 received by the organ	zation dunn	g the tax year	for contributions				
	for which the organization completed Form 82	83, Part IV,	Donee Acknow	wledgment 29	<u> </u>			r
							Yes	No
<b>3</b> 0a	During the year, did the organization receive b	-						
	at least three years from the date of the initial	contribution	i, and which is	not required to be used for	exempt purposes for			
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II							<u></u>
31	Does the organization have a gift acceptance		-			31		X
32a	Does the organization hire or use third parties	or related o	rganizations to	solicit, process, or sell non	cash			
	contributions?					32a	_	X
b	If "Yes," describe in Part II.							1
33	If the organization did not report revenues in o	column (c) fo	or a type of pro	perty for which column (a) is	s checked,			
	describe in Part II					!	1	1

Schedulé M	И (Fo	rm 990	) 200	8 <b>E</b>	OR	EDU	CAT	ION								34	<u>-17592</u>	<u>95</u>	Page 2
Part II	Sı	ıpple	mer	ntal I	nfor	natio	n. Cor	nplete	this p	part to	provide	the info	mation re	equire	d by Part	I, lines 30	b, 32b, and	33.	
	Als	o com	plete	this p	art fo	r any ac	ddition	al inforr	matic	n									
SCHEDU	JLE	Μ,	PP	RT	I,	COL	UMN	(B)	:	FOR	THE	ART	, ONE	P	CTUR	E WAS	DONAT	ED,	
AND TH	ΗE	TRI	PS	FOF	R A	JCTI	ON,	42	TR	IPS	WER	E AU	CTION	IED	OFF.				
<del></del>																			
												<del></del>							
					· · · · ·														
																<del></del>			
																			·
													_						.,,
													-						
																<del></del> .			
						<del></del>													
									_										
	•						·												
								•						_					
									•							•			<del></del>
															<del></del>				
				-															
832142 12-18	8-08																Schedule f	VI (Form	990) 200

832142 12-18-08

## SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Employer identification number 34-1759295

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FOUNDATION DRIVES TO REFORM BY ENGAGING IN PRACTICE, POLICY &
PARTNERSHIPS THAT PROVIDE QUALITY EDUCATION & ENRICHMENT OPPORTUNITIES.
THE FOUNDATION PRIMARILY FUNDS THE ANDRE AGASSI COLLEGE PREPARATORY
ACADEMY AND BOYS & GIRLS OF LAS VEGAS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AGASSI COLLEGE PREPARATORY ACADEMY AND BOYS & GIRLS OF LAS VEGAS.
FORM 990, PART VI, SECTION A, LINE 2: STEPHEN PANUS AND GUNLEK RUDER ARE
BOTH EMPLOYEES OF AGASSI ENTERPRISES, INC. AND ARE BOARD MEMBERS OF THE
FOUNDATION.
FORM 990, PART VI, SECTION A, LINE 7A: THE THREE TRUSTEES HAVE VOTING
AUTHORITY FOR THE FOUNDATION, OF THESE THREE INDIVIDUALS, THE CHAIRMAN HAS
THE RIGHT TO REMOVE MEMBERS IF NEEDED.
FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WILL BE PRESENTED
INDIVIDUALLY TO ALL THREE TRUSTEES OF THE GOVERNING BODY AND TWO NON-VOTING
MEMBERS WILL ALSO REVIEW THE FORM 990.
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR TRUSTEES,
OFFICERS, AND KEY EMPLOYEES ARE DETERMINED BY COMPARABILITY DATA SUPPLIED
BY VARIOUS RECRUITING COMPANIES AND COMPENSATION IS IN LINE WITH OTHER
COMPARABLE ORGANIZATIONS. IN 2008, A COMPENSATION STUDY WAS DONE ON OUR NEW

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Employer identification number 34-1759295

FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE AVAILABLE UPON
REQUEST.
NO DIFFERENCE IN AUDIT PROCEDURE FROM LAST YEAR TO CURRENT YEAR.
SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:
(A) NAME OF PERSON: AGASSI ENTERPRISES, INC
(A) PURPOSE OF LOAN: GENERAL & ADMINISTRATIVE SUPPORT
(B) LOAN TO OR FROM ORGANIZATION? = TO
(C) ORIGINAL PRINCIPAL AMOUNT \$ 89237. (D) BALANCE DUE \$ 73843.
(E) LOAN IN DEFAULT? = NO
(F) APPROVED BY BOARD OR COMMITTEE? = NO
(G) WRITTEN AGREEMENT? = NO
CCU I DADM IV DUCTNESS MDANSACMIONS INVOLVING INMEDERMED DERSONS.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: STEPHEN PANUS
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
EMPLOYEE OF AGASSI ENTERPRISES, INC AND TRUSTEE OF THE FOUNDATION
(C) AMOUNT OF TRANSACTION \$ 0.
(D) DESCRIPTION OF TRANSACTION: AGASSI ENTERPRISES, INC. IS A FOR PROFIT
ENTITY THAT IS OWNED 100% BY THE ANDRE AGASSI TRUST. STEPHEN PANUS IS AN
EMPLOYEE OF AGASSI ENTERPRISES, AND A TRUSTEE OF THE ANDRE AGASSI
CHARITABLE FOUNDATION.

### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Employer identification number 34-1759295

(A) NAME OF PERSON: GUNLEK RUDER
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
EMPLOYEE OF AGASSI ENTERPRISES, INC AND TRUSTEE OF THE FOUNDATION
(C) AMOUNT OF TRANSACTION \$ 0.
(D) DESCRIPTION OF TRANSACTION: AGASSI ENTERPRISES, INC. IS A FOR PROFIT
ENTITY THAT IS OWNED 100% BY THE ANDRE AGASSI TRUST. GUNLEK RUDER IS AN
EMPLOYEE OF AGASSI ENTERPRISES, AND A TRUSTEE OF THE ANDRE AGASSI
CHARITABLE FOUNDATION.
(E) SHARING OF ORGANIZATION REVENUES? = NO
(A) NAME OF PERSON: ANDRE AGASSI
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
PRESIDENT OF FOUNDATION, OWNER OF AGASSI ENTERPRISES, INC.
(C) AMOUNT OF TRANSACTION \$ 0.
(D) DESCRIPTION OF TRANSACTION: ANDRE AGASSI, IS THE PRESIDENT OF THE
ANDRE AGASSI CHARITABLE FOUNDATION AND IS THE OWNER OF AGASSI
ENTERPRISES, INC.
(E) SHARING OF ORGANIZATION REVENUES? = NO
(A) NAME OF PERSON: AGASSI ENTERPRISES
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
KEY EMPLOYEE
(C) AMOUNT OF TRANSACTION \$ 125892.
(D) DESCRIPTION OF TRANSACTION: 2008 SUB-LEASE FOR OFFICE
(E) SHARING OF ORGANIZATION REVENUES? = NO

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2008 Open to Public · Inspection

OMB No 1545-0047

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ▶ See separate instructions.

Employer identification number 34-1759295 THE ANDRE AGASSI FOUNDATION FOR EDUCATION Identification of Disregarded Entities Name of the organization

Part I

(F) Direct controlling entity		
(E) End-of-year assets		
(D) Total income		
(C) Legal domicile (state or foreign country)		
(B) Primary activity		
(A) Name, address, and EIN of disregarded entity		

Identification of Related Tax-Exempt Organizations Part II

(A)	(B)	(0)	(Q)	(E)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	epo,	Public charity status (if section 501(c)(3))	Direct
CHARTER SCHOOL DEVELOPMENT FOUNDATION -					
86-0955045, 3883 HOWARD HUGHES PKWY 8TH FL.					
LAS VEGAS NV 89169	EDUCATION	NEVADA	501(C)(3)	6	N/A
	<del>-</del>				
	1				

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2008

THE ANDRE AGASSI FOUNDATION Schedule R (Form 990) 2008 FOR EDUCATION

Page 2

34-1759295

Part III Identification of Related Organizations Taxable as a Partnership

	5 <b>5</b> .℃	<u>o</u>		i		1			1		ı
(v)	managing partner?	Yes No	 -			 $\dashv$		 			
(1)	amount in box	K-1 (Form 1065)									
	rions?	2		 -			_	 		 _	 _
(H)	Disproportion- ate allocations?	Yes						 <del></del>		 	 i
	end-of-year							 -			
(F)	income										
(E)	(related, investment,	ullelated									
(D)	entity										
(0)	Legal domicile (state or foreign	country)									
	Filliary activity										
(A)	Name, address, and Elly of related organization										

orporation or Trust	
s Taxable as a Co	
Identification of Related Organizations	
Part IV	

(A)	(B)	(2)	(a)	(E)	(F)	(5)	£
Name, address, and EiN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
AGASSI ENTERPRISES INC - 88-0310444							
3883 HOWARD HUGHES PARKWAY 8TH FL							
	SPORTS MANAGEMENT	NV		c corp	0	0	100%
ANDRE AGASSI TRUST - 53-0136559							
3883 HOWARD HUGHES PARKWAY 8TH FL							
	INVESTMENTS	NV		TRUST	0	0	100%
832162 12-23-08						Schedule R (Form 990) 2008	n 990) 2008

Page 3

### THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Schedule R (Form 990) 2008 FOR EDUCATIO

Organizations
ith Related
ansactions W
Part V Tr

			⊢	ı
Note. Complete line 1 if any entity is listed in Parts II, III, or IV			Yes	윙
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			-	
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		†a	_	×
<b>b</b> Gift, grant, or capital contribution to other organization(s)		1p		54
c Gift, grant, or capital contribution from other organization(s)		5		يدا
		7	, ×	×
		4		١×
		ַ	-	al .
f Sale of assets to other organization(s)		#	×	×
g Purchase of assets from other organization(s)		-1g	24	×
		ŧ	×	ير
		; <b>-</b>	×	×
j Lease of facilities, equipment, or other assets from other organization(s)		Ţ,	×	×
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×	×
1 Performance of services or membership or fundraising solicitations by other organization(s)		=	~	×
m Sharing of facilities, equipment, mailing lists, or other assets		13	74	×
n Sharing of paid employees		£	74	×
		:		
o Reimbursement paid to other organization for expenses		9	×	54
p Reimbursement paid by other organization for expenses		10		×
		-		
g Other transfer of cash or property to other organization(s)		5	PK	×
		+	×	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	saction thresholds.			ΙI
(A)	(8)	Ó,		
Name of other organization(s)	Transaction type (a-r)	Amount involved	volved	
(1)				
(2)				
(3)				
(4)				
(5)	:			
832-183-08	Sche	Schedule R (Form 990) 2008	990) 20	١ĕ

34-1759295

Page 4

11

THE ANDRE AGASSI FOUNDATION FOR EDUCATION

Schedule R (Form 990) 2008 FOR EDUCATION

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(A) (B)	(B)	(0)	<u>(a)</u>	(E)	(£)	(5)	(E)
Name, address, and EIN	Primary activity	Legal domicile	Are all partners section 501(c)(3)	Share of end-of-	Dispropor-		General or managing
or entity		(state or foreign country)	Yes No	year assets	Yes No	of Schedule K-1 (Form 1065)	1 -
						_	
							_
					-		
						,	
							-
						Schedule R (Form 990) 2008	m 990) 2008

**Depreciation and Amortization** (Including Information on Listed Property)

990

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 67

Name(s	) shown on return	- <del></del> -		Busine	ss or activity to wh	ich this form relate	s	Identifying number
THE	ANDRE AGASSI FOUNI	DATION		1				
FOR	EDUCATION			FOR	M 990 P	AGE 10		34-1759295
Par	t I   Election To Expense Certain Proper	rty Under Section 17	9 Note: If you hav	e any list	ed property, c	omplete Part	V before you	u complete Part I.
1 M	aximum amount. See the instructions	for a higher limit t	for certain busines	sses			1	250,000.
2 To	otal cost of section 179 property place	ed in service (see	instructions)				2	
3 T	nreshold cost of section 179 property	before reduction	ın lımıtatıon			-	3	800,000.
4 R	eduction in limitation. Subtract line 3 t	from line 2 If zero	or less, enter -0-				4	
<b>5</b> Do	bliar limitation for tax year Subtract line 4 from line	1 If zero or less, enter	-0- If married filing sepa	arately, see	instructions		5	
6	(a) Description of pro	operty	(b) (	Cost (busine	ess use only)	(c) Elected	d cost	
	sted property Enter the amount from	line 29			7			
	otal elected cost of section 179 prope		ın column (c), line	s 6 and	7		8	
	entative deduction Enter the smaller	-					9	
10 C	arryover of disallowed deduction from	line 13 of your 20	007 Form 4562				10	
	usiness income limitation. Enter the si	•		than zer	o) or line 5		11	
	ection 179 expense deduction Add in		•		•		12	
	arryover of disallowed deduction to 20	•			▶ 13			
	Do not use Part II or Part III below for							
Par	t II Special Depreciation Allowa	nce and Other De	epreciation (Do n	ot includ	de listed prope	rty)		
15 P	pecial depreciation for qualified proper roperty subject to section 168(f)(1) ele ther depreciation (including ACRS)  III MACRS Depreciation (Do no	ection					15 16	70,752.
			Section	Α				
17 M	ACRS deductions for assets placed in	n service in tax ye	ars beginning bef	ore 2008	3		17	1,411,373.
18 If y	ou are electing to group any assets placed in serv	vice during the tax year i	nto one or more general	l asset acco	ounts, check here	▶ [	<u> </u>	
	Section B - Assets	Placed in Service	e During 2008 Ta	x Year (	Jsing the Gen	eral Deprecia	ation System	m
•	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre- (business/investme only - see instruc	ent use	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property		11,	091.	3 YRS.	HY	SL	1,848.
b	5-year property	7 [	22,	050.	5 YRS.	HY	SL	2,205.
С	7-year property							
d	10-year property	]						
е	15-year property							
f	20-year property	_] [						
_ g	25-year property				25 yrs.		S/L	
	D and a start and a start and a	01/08	352,	252.	27 5 yrs.	MM	S/L	12,275.
h	Residential rental property	/			27 5 yrs.	MM	S/L	
	No accordant and accordant	/			39 yrs	MM	S/L	
i	Nonresidential real property	/				MM	S/L	
	Section C - Assets F	Placed in Service	During 2008 Tax	Year Us	ing the Alterr	native Depre	ciation Syst	em
20a	Class life	J . [					S/L	
b	12-year				12 yrs		S/L	
С	40-year	/			40 yrs.	MM	S/L	
Par	t IV Summary (See instructions )							
21 L	sted property Enter amount from line	28	· · · · · · · · · · · · · · · · · · ·	_			21	
	otal. Add amounts from line 12, lines		es 19 and 20 in co	olumn (g)	, and line 21.			
E	nter here and on the appropriate lines	of your return Pa	artnerships and S	corporat	tions - <u>see inst</u>	<u> </u>	22	1,498,453.
23 F	or assets shown above and placed in	service during the	e current year, ent	er the				
D	ortion of the basis attributable to sect	ion 263A costs			23			

### THE ANDRE AGASSI FOUNDATION

Form 4562 (2008) EDUCATION 34-1759295 Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, Part V recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? Yes No Yes No (b) (c) (i) (e) (h) (d) Date Business/ Basis for depreciation Elected Depreciation Recovery Method/ Type of property Cost or placed in investment (business/investment section 179 (list vehicles first ) other basis period Convention deduction use percentage use only) service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use % % % 27 Property used 50% or less in a qualified business use % S/L S/L % S/L· % 28 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (f) (b) (c) (d) (a) (e) Vehicle Vehicle 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles 33 Total miles driven during the year. Add lines 30 through 32 Yes Yes 34 Was the vehicle available for personal use No No Yes Yes Yes Yes No No Νo No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (b) (c) (d) (e) (f) (a) Amortization period or percentage beams 42 Amortization of costs that begins during your 2008 tax year 43 43 Amortization of costs that began before your 2008 tax year

44

44 Total. Add amounts in column (f). See the instructions for where to report

990

Assat	Description	Date Acquired	Method	Life	No No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
93	10032 PINNACLE VIEW 93(HOUSE)	01 17 08SL		27.501	H61	352,252.			352,252.			12,275.
94	94LEASEHOLD IMPROVEMENTS052008SL	052008		15.001	91	26,258.			26,258.	-		1,021.
95	5SOFTWARE	090508	8SL	3.00	461	10,868.			10,868.		-	1,811.
96	CKEDENTIAL 96MACHINE-GRAND SLAM 200	200092508SL	1	5.00 1	[9B	5,554.	<del></del>		5,554.		,	555.
97	97DATABASE SERVER	092508SL		5.00 1	19B	2,873.			2,873.			287.
9 8	8OPTIPLEX MINITOWERS	013108SL		5.00 1	19B	2,586.			2,586.			259.
9	99COMPUTER EQUIPMENT	070308SL		5.00 1	19B	2,534.			2,534.			253.
100	100COMPUTER EQUIPMENT	082108SL		5.00 1	19B	1,465.			1,465.			147.
101	101SHERIA'S COMPUTER	112508SL		5.00 1	19B	1,241.			1,241.			124.
102	102COMPUTER EQUIPMENT	052308	8SL	5.00 1	19B	1,204.			1,204.			120.
103	103COMPUTER EQUIPMENT	072508	8SL	5.00 1	19B	1,130.			1,130.			113.
104	TER EQU	062508SL	-	5.00 1	19B	1,056.			1,056.			106.
105	EAS E	102708SL		5.00 1	19B	999.			.666			100.
106	HP LASERJET PRINTER	030508SL		5.00	19B	709.			709.			71.
107	HF LASEKOET 4240N 107PRINTER	030508SL		5.00 1	19B	669			669			70.
108	108SOFTWARE	070308SL		3.00	19A	223.	· ·		223.			37.
· · · · · · · · · · · · · · · · · · ·				.000	9 7							0
9	9COMPUTER SOFTWARE	011504SL		3.00 1	[7	9,728.		-	9,728.	8,917.		0

(D) - Asset disposed

990

									•			
Asset	Description	Date Acquired Met	Method	e) Pi	Unadjusted No Cost Or Basis		Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
14	14DATAFACTION SOFTWARE	18908080	m	00 1.	7 1,6	688.	<u></u>		1,688.	797.		563.
7	15DATAFACTION SOFTWARE	091306SL	<u>. m</u>	00 1.	7 7 1,4	431.			1,431.	596.	-	477.
20	20SOFTWARE	061907SL	<u>m</u>	00	7 1,0	54.			1,054.	1,054.	,	0
21	21SOFTWARE	061907SL	m	00 1.7	7,	185.		,	7,185.		-	2,395.
85	* 990 PAGE 10	-	•	000 16	73.2	737	,	C	430 737	11 364	C	20 784
	MACHINERI AND EKOLFMEN 7KIA AUTOMOBILE	100103SL	<u>N</u>	.00	26,	263.		<b>,</b>		2,325		ı œ
86		,	0.	000	9							0.
	GE Y A	——————————————————————————————————————			26,2	263.		0	26,263.	22,325.	0	3,938.
1,	BUILDING - BROKEN 12WILLOW	07070681	27	.501	7 382,4	.69		_	382,465.	20,860.		13,908.
2	22BUILDINGS	061907SL	27	.501	7 33700000	.000			33700000.	.068,890.		1225455.
87			•	000								0.
	* 990 PAGE 10 TOTAL - MACHINERY AND EQUIPMEN				34082465	.65.		0	34082465.	684,750.	0	1239363.
56	26FURNITURE	061907SL	<u>.</u>	00	7 196,703	703.			196,703.	19,670.		39,341.
.7	27kINDERGARTEN FURNITURI	FURNITURE061907SL	<u>.v</u>	00	7 4,0	012.			4,012.	401.		802.
5	28KINDERGARTEN FURNITUR	FURNITURE 061907SL	٠. <del>رب</del>	00	7 13,2	271.			13,271.	1,327.		2,654.
2	29KINDERGARTEN FURNITURI	FURNITURE061907SL	Ŋ	.00	7	678.			678.	.89		136.
3(	30FURNITURE & FIXTURES	061907SL	5	5.00 1	7 2,2	230.			2,230.	223.		446.

(D) - Asset disposed

990

Asset No	Description	Date Acquired	Method	Life	No o	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
31	31FURNITURE & FIXTURES	061907SL		2.00	17	43,159.			43,159.	4,316.		8,632.
32	32FURNITURE & FIXTURES	061907SL		5.00	17	4,602.			4,602.	460.		920.
33	33FURNITURE - CABINETS	0619078	SL	5.00	17	3,428.			3,428.	343.		989
34	34FURNITURE	061907SL		5.00	17	11,355.			11,355.	1,136.		2,271.
16	76HS LIBRARY FURNITURE	061907SL	<del>,</del>	7.00	17	61,661.			61,661.	4,404.		8,809.
77	77FURNITURE & FIXTURE	061907SL		7.00	17	14,970.			14,970.	1,069.		2,139.
78	78FURNITURE & FIXTURE	123107SL		7.00	17	14,193.			14,193.			2,028.
8	82FURNITURE & FIXTURE	123107SL		7.00	17	14,193.			14,193.			2,028.
88	**************************************		,	0000	16							0.
	MACHINERY AND EQUIPMEN					384,455.		0	384,455.	33,417.	0	70,892.
35	35SIGNS	061907SL		2.00	17	664.			664.	664.		.0
36	36IMPROVEMENTS - WIRING	061907SL		10.001	17	9,329.			9,329.	466.		933.
79	79LEASEHOLD IMPROVEMENTS123107SL	3123107E		15.001	17	68,584.			68,584.			4,572.
83	83LEASEHOLD IMPROVEMENTS123107SL	31231078	<u>-</u>	15.001	17	53,153.			53,153.		-	3,544.
83	**************************************			000.	16							0.
	* 990 PAGE 10 TOTAL - MACHINERY AND EQUIPMEN	·	,			131,730.		0	131,730.	1,130.	0	9,049.
13	13LAND - BROKEN WILLOW	070706	. 7	<u> </u>		163,914.			163,914.			0.
90				000	16							0

828102 04-25-08

(D) - Asset disposed

990

Asset	Description	Date Acquired	Method	Life	No o	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* 990 PAGE 10 TOTAL - MACHINERY AND EQUIPMEN					163,914.		0	163,914.	0	0	0.
7'	4MISC EQUIPT	0101018	SL	2.00	17	11,886.			11,886.	11,886.		0
u)	SPHONES	113001SL		5.00	17	6,500.			6,500.	5,312.		0
v	6PHONES	042802SL		5.00	17	5,070.			5,070.	5,070.		0
15	19COMMERCIAL PLASMA	112007SL		2.00	17	2,532.			2,532.	42.		506.
38	38SECURITY SYSTEM	061907SL		2.00	16.	8,640.			8,640.	2,160.		4,320.
35	~	061907SL		2.00	16	80,619.			80,619.	20,155.		40,310.
40	PROG. DESIGN 2-5 REC 40PLAY	061907SL	, ,	2.00	16	5,634.			5,634.	1,409.		2,817.
41	41COMPUTER EQUIPMENT	0619078	SI	2.00	16	21,853.	•		21,853.	5,463.		10,927.
42	42COMPUTER EQUIPMENT	061907SL		2.00	16.	8,132.			8,132.	2,033.		4,066.
4	43PROJECTOR SYSTEM	061907SL		2.00	16	11,435.			11,435.	2,859.		5,718.
44	44COMPUTER EQUIPMENT	061907SL	,	2.00	16	3,145.			3,145.	786.		1,573.
4.5	45EQUIPMENT HARDWARE	061907SL		3.00	17	11,643.			11,643.	1,941.		3,881.
46	46EQUIPMENT HARDWARE	061907SL		3.00	17	.966,8			8,996.	1,499.		2,999.
4.7	47EQUIPMENT HARDWARE	061907SL	ij	3.00	17	329.			329.	55.		110.
48	48EQUIPMENT	061907SL	. ;;	3.00	17	12,115.			12,115.	2,019.		4,038.
45	49COMPUTER EQUIPMENT	061907SL		3.00	17	70,498.			70,498.	11,750.		23,499.
5(	50COMPUTER EQUIPMENT	061907SL	ir.	3.00	17	13,450.		-	13,450.	2,242.		4,483.
201826				<b>(</b> 		•	ţ	) (			1	

(D) - Asset disposed

990

-		73.	.00	. 7.	37.	4.	.04	81.	•	49.	0	•	•	. 68	95.	22.	05.	1
	Current Year Deduction	1,473	15,000	9,627	7,037	6,744	1,840	86		151,9				1,03	19	42	30	617
	Current Sec 179									· .		<u>.                                    </u>						
	Accumulated Depreciation	737.	7,500.	4,814.	3,518.	3,372.				96,622.	3,914.	1,376.	1,397.	2,857.	536.	35.	25.	43
	Basis For Depreciation	4,419.	45,000.	28,882.	21,110.	33,722.	9,198.	4,906.		429,714.	3,845.	1,376.	1,397.	5,194.	975.	2,109.	1,524.	2.586.
	Reduction In Basis									0								
	Bus % Excl																•	-
	Unadjusted Cost Or Basis	4,419.	45,000.	28,882.	21,110.	33,722.	9,198.	4,906.		429,714.	3,845.	1,376.	1,397.	5,194.	975.	2,109.	1,524.	2.586.
	No No	17	17	17	17	17	17	17	1.6		17	17	17	17	17	17	17	17
	Life	3.00	3.00	3.00	3.00	5.00	5.00	5.00	000.		5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00
	Method	SL	SI	SL	SL	SL	SL	SL	•		SI	SL	SL	SL	SL	SL	SL	ZI.
	Date Acquired	061907SL	061907SL	061907SL	061907SL	061907SL	123107SL	123107SL	,		113001	02250281	070302SL	031705SL	031705SL	120307	121107	121107
	Description	51COMPUTER EQUIPMENT	52COMPUTER EQUIPMENT	53EQUIPMENT	54EQUIPMENT	COMP HARDWARE - 75COLLEGE	80MACHINERY & EQPT	81MACHINERY & EQPT		* 990 PAGE 10 TOTAL - MACHINERY AND EQUIPMEN	1END2END NETWORKS	2DELL COMPUTERS	3DELL COMPUTERS	10PE2800 SERVER	or.		INTEL CORE DUO 17PROCESSOR	180PTTPI.EX 745 MINITOWER 12110781
	Asset	51	52	53	54	75	8	81	91		<b>~</b> 7		(.,	10	11	1(	17	7

(D) - Asset disposed

990

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

Current Year Deduction	0	0. 2,478. 1498453.					
Current Sec 179				-	<u> </u>		
Accumulated Depreciation	2,719.	12,929.		,			
Basis For Depreciation	2,719.	21,752.		-			
Reduction In Basis		0 0			,		
Bus % Excl	,		-				
Unadjusted Cost Or Basis	2,719.	21,752.	,				
No No	17	9		•	-	,	
Life	3.00	0000	,				
Method	ТS	· .		`			
Date Acquired	061907SL		 				
Description	56TEXTBOOKS	* 990 PAGE 10 TOTAL - MACHINERY AND EQUIPMEN * GRAND TOTAL 990 PAGE 10 DEPR					
Asset No	56	0				-	

(D) - Asset disposed