

#### 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





amended

**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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service (except black lung benefit trust or private foundation)

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

Open to Public Inspection

For the 2008 calendar year, or tax year beginning 2008, and ending    Creck if abplicable.   Address change   Name and address of principal officer   DAVID VENNES   Name change   Name and address of principal officer   DAVID VENNES   Name change   Name and address of principal officer   DAVID VENNES   Name change   Name and address of principal officer   DAVID VENNES   Name change   Name cha
Address change   Name change
Name change   Initial return   Termination   Amended return   Amended return   Amended return   Amended return   Application pending   F Name and address of principal officer   DAVID VENNES   H(a) is this a group return for affiliatios?   Ves   X   N   N   N   N   N   N   N   N   N
Initial return Termination Amended return Application pending F Name and address of principal officer DAVID VENNES SAME AS C ABOVE  I Tax-exempt status X 501(c) (3 ) ** (insert no.)
Termination Amended return  Amended return  Application pending SAME AS C ABOVE  I Tax-exempt status X 501(c) (3 ) * (insert no.)   4947(a)(1) or   527  Website: * WWW.NUWAY-HOUSE.ORG  K Type of organization X Corporation Trust Association Other L Year of Formation: 1966 M State of legal domicile: MN  Part 1. Summary  1 Briefly describe the organization's mission or most significant activities. TO PROVIDE A TEMPORARY HOME FOR ALCOHOLIC & OTHERWISE CHEMICALLY DEPENDENT MEN USING COUNSELING, TEACHING, CLASSES, LECTURES & MEETINGS TO HELP THEM ATTAIN SOBRIETY  2 Check this box * X if the organization discontinued its operations or disposed of more than 25% of its assets.
Amended return  Application pending  F Name and address of principal officer  DAVID VENNES  SAME AS C ABOVE  Tax-exempt status X 501(c) (3 ) * (insert no.) 4947(a)(1) or 527  Website: WWW.NUWAY-HOUSE.ORG  K Type of organization X Corporation Trust Association Other L Year of Formation: 1966 M State of legal domicile: MN  Part 1. Summary  1 Briefly describe the organization's mission or most significant activities. TO PROVIDE A TEMPORARY HOME FOR ALCOHOLIC & OTHERWISE CHEMICALLY DEPENDENT MEN USING COUNSELING, TEACHING,  CLASSES, LECTURES & MEETINGS TO HELP THEM ATTAIN SOBRIETY  2 Check this box X If the organization discontinued its operations or disposed of more than 25% of its assets.
Application pending   F Name and address of principal officer   DAVID VENNES   H(a) is this a group return for affiliates?   Yes   X N N N N N N N N N N N N N N N N N N
Tax-exempt status   X   501(c) (3 ) = (insert no.)   4947(a)(1) or   527
Tax-exempt status X 501(c) (3 ) * (insert no.) 4947(a)(1) or 527    Website:
Website: ► WWW.NUWAY-HOUSE.ORG
K   Type of organization   X   Corporation   Trust   Association   Other   L   Year of Formation: 1966   M State of legal domicite   MN
Part 1. Summary  1 Briefly describe the organization's mission or most significant activities. TO PROVIDE A TEMPORARY HOME FOR ALCOHOLIC & OTHERWISE CHEMICALLY DEPENDENT MEN USING COUNSELING, TEACHING, CLASSES, LECTURES & MEETINGS TO HELP THEM ATTAIN SOBRIETY  2 Check this box > X if the organization discontinued its operations or disposed of more than 25% of its assets.
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ALCOHOLIC & OTHERWISE CHEMICALLY DEPENDENT MEN USING COUNSELING, TEACHING,  CLASSES, LECTURES & MEETINGS TO HELP THEM ATTAIN SOBRIETY  Check this box > X if the organization discontinued its operations or disposed of more than 25% of its assets.
CLASSES, LECTURES & MEETINGS TO HELP THEM ATTAIN SOBRIETY  Check this box > X if the organization discontinued its operations or disposed of more than 25% of its assets.
2 Check this box > X if the organization discontinued its operations or disposed of more than 25% of its assets.  3 Number of voting members of the governing body (Part VI, line 1a)  4 Number of independent voting members of the governing body (Part VI, line 1b)  5 Total number of employees (Part V, line 2a)  6 Total number of volunteers (estimate if necessary)
Check this box X if the organization discontinued its operations or disposed of more than 25% of its assets.  Number of voting members of the governing body (Part VI, line 1a)
Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)  Total number of employees (Part V, line 2a)  Total number of volunteers (estimate if necessary)
4 Number of independent voting members of the governing body (Part VI, line 1b)  5 Total number of employees (Part V, line 2a)  6 Total number of volunteers (estimate if necessary)
5 Total number of employees (Part V, line 2a)  Total number of volunteers (estimate if necessary)
5   5   Total number of volunteers (estimate if necessary)
7a Total gross unrelated business revenue from Part VIII, line 12, column (C)
Prior Year Current Year
8 Contributions and grants (Part VIII, line 1h) 10,025
9 Program service revenue (Part VIII, line 2g) 861, 453. 794, 315 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 105, 774
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 866, 182. 934, 675
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)
14 Benefits paid to or for members (Part IX, column (A), line 4)
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . 567, 430. 908, 339
16a Professional fundraising fees (Part IX, column (A), line 11e)
16a Professional fundraising fees (Part IX, column (A), line 11e)  b Total fundraising expenses (Part IX, column (D), line 25)
17 Other expenses (Part IX, column (A), lines 11a-11d-111-249 365, 986. 352, 693
18 Total expenses Add lines 13-17 (must equal Part REAL (X) File 25)
19 Revenue less expenses Subtract line 18 from tine 12
19 Revenue less expenses Subtract line 18 from fine 12
$12 \times 10$ Total assets (Part A, line 16) . $12 \times 10^{-1}$
20 20 21 21 22 22 23 23 25 25 25 25 25 25 25 25 25 25 25 25 25
22 Net assets or fund balances Subtract line 2 from DIGDEN, UT  205, 520. 122, 144
21 Total liabilities (Part X, line 26)  22 Net assets or fund balances Subtract line 2 from DEDEN, UT  Part II S Signature Block  1205, 520. 122, 144
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is interpret, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.
Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is intercontrol of preparer (other than officer) is based on all information of which preparer has any knowledge.
Sign \ \ (6/95/10
Sign   Signature of officer   Date
Sign Here  David Vennes  David Vennes  David Vennes
Sign Here Signature of officer Date
Sign Here Signature of officer Date DAVID VENNES Type or punt name and title  Date Date Check if Preparer's identifying number
Sign Here  Signature of officer  Date  Date  Date  Date  Date  Date  Check if self-self-self-self-self-self-self-self-
Sign Here  Signature of officer  Date  DAVID VENNES  Type or print name and title  Date  Date  Check if self-cased (see instructions)
Sign Here  Signature of officer  Date  Date  Date  Date  Date  Date  Date  Preparer's identifying number (see unstructions)  Preparer's signature  Preparer's Preparer's dentifying number (see unstructions)  N/A
Sign Here  Signature of officer  Date  Date  Date  Date  Date  Date  Date  Date  Preparer's Signature Preparer's Signature  Preparer's Signature  Preparer's Signature  Preparer's Signature  Preparer's Signature  Preparer's Mantifying number Self- employed  N/A  Preparer's Mantifying number Self- employed  N/A
Sign Here  Signature of officer  Date  Date  Date  Date  Date  Date  Date  Date  Preparer's Suprature  Preparer's Mentifying number Self- employed  N/A  Preparer's Mentifying number Self- employed  N/A  EIN N/A
Sign Here  Signature of officer  Date  Date  Date  Date  Date  EXECUTIVE DIRECTOR  Preparer's squarture of officer  Date  Date  Date  Check if self-employed particulars of self-employed property of se
Sign Here    Signature of officer   Date

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Form 990 (2008)

rai	Crassif Checklist of Required Schedules			
•			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	,	х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
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		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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 credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Old the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V.	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	<b>x</b> _	_
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? I f 'Yes,' complete Schedule E	13		X
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
1	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	145		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		х
<sub>1</sub> 16	Old 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		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Old 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		<u> </u>
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? 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		х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete School Le W. No. 'on the questions 25			v
	complete Schedule K If No, go to question 25 Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24a 24b		X
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to detease			
	any tax-exempt bonds?	24c		$\vdash$
		240		<del>                                     </del>
	a 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		X
	b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I.	25b		<u>x</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		X
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Form 990 (2008) NU-WAY HOUSE INC
Part V Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an 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	<u> </u>	X
-	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV.	28b		Х
•	s 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		X
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	ļ	х
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	х	
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)? 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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
BA		Forr	n <b>990</b>	(2008

Pan.v.	Statements Regarding Other IRS Filings and Tax Compliance				
<b>.</b>		1 1	NA 20	Yes	No
Intorn	the number reported in Box 3 of form 1096, Annual Summary and Transmittat of U.S. nation Returns. Enter -0- if not applicable	1a 0			
<b>b</b> Enter.	the number of Forms W-2G included in line 1a. Enter -0- if not applicable	16 0			
c Did the	e organization compty with backup withholding rules for reportable payments to vendors a bling) winnings to prize winners?	and reportable gaming	ر نندا 1 c	siccia)	Bud
2 a Enter th calenda	e number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the r year ending with or within the year covered by this return	<b>2</b> a 39			
	east one is reported on line 2a, did the organization file all required federal employment ta	ax returns?	2b	x	
Note.	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retui	rn. (see instructions)	1800	789	\$\forall \( \sqrt{1} \)
3a Did the	e organization have unrelated business gross income of \$1,000 or more during the year of	covered by	3a		X
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	r time during the calendar year, did the organization have an interest in, or a signature or ial account in a foreign country (such as a bank account, securities account, or other final	other authority over, a	4a		Х
	s, enter the name of the foreign country:	and a doubling i	30%	مؤهمك	<u>.</u>
See th	ne instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Fo	oreign Bank and			
Finani	cial Accounts	_		18 19	
5a was t	he organization a party to a prohibited tax shelter transaction at any time during the tax y	rear?	<u>5a</u>		X
	by taxable party notify the organization that it was or is a party to a prohibited tax shelter		5b	$\sqcup$	X
Pronic	to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt often Transaction?	Entity Regarding	5c		
6a Did th	e organization solicit any contributions that were not tax deductible?		6a		X
b If 'Yes deduc	did the organization include with every solicitation an express statement that such controls	ributions or gifts were not	6 <b>b</b>		
	nizations that may receive deductible contributions under section 170(c).				(\$g)
a Did th	e organization provide goods or services in exchange for any quid pro quo contribution of	more than \$75?	7a	[ " " ]	X
b If 'Yes	i,' did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the Form	e organization sell, exchange, or otherwise dispose of tangible personal property for whic 8282?	h it was required to file	7c		х
d If 'Yes	s,' indicate the number of Forms 8282 filed during the year	7d	[X ]^	त्र्ध	<u>,,,,5,,</u>
e Did thi benefi	e organization, during the year, receive any funds, directly or indirectly, to pay premiums t contract?	on a personal	7e	::*\$3	4 354 <b>X</b>
f Did the	e organization, during the year, pay premiums, directly or indirectly, on a personal benefi	l contract?	71		X
g For all	contributions of qualified intellectual property, did the organization file Form 8899 as req	uired?	79		X
h For all	contributions of cars, boats, airplanes, and other vehicles, did the organization file a For	m 1098-C as required?	7h		X
8 Section	on 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sorting organizations. Did the supporting organization, or a fund maintained by a sponsories business holdings at any time during the year?	ection 509(a)(3) ng organization, have	8	** !//: "!	(%), AGG (%), AGG
	on 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	• • • • • • • • • • • • • • • • • • • •	12.8	37	[B48]
	e organization make any taxable distributions under section 4966?		9a		
	e organization make any distribution to a donor, donor advisor, or related person?		9b		
	on 501(c)(7) organizations. Enter	·	<b>325</b>	W 63	4.55°
a Initiati	on fees and capital contributions included on Part VIII, line 12	10a			
	Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
	on 501(c)(12) organizations. Enler:			100	
a Gross	income from other members or shareholders	11a			
<b>b</b> Gross amour	income from other sources (Do not net amounts due or paid to other sources against nts due or received from them.)	116			
12a Section	on 4947(a)(1) non-exempt chantable trusts. Is the organization filing Form 990 in lieu of F		12a		~~~
b If 'Yes	, enter the amount of tax-exempt interest received or accrued during the year	126	<b>W</b>	ese i	233
BAA			Form	990 (	2008)

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				
		Yes' response to lines 2.7b below, and for a 'No' response to lines 8 or t , or changes in Schedule O. See instructions.	9b below, describe the circumstances,	886	Yes	No
1 a	Enter the	number of voting members of the governing body	1a  11		2333	
ŧ	Enter the	number of voting members that are independent			200 gr	3300
2	Did any of officer, dir	ficer, director, trustee, or key employee have a family relationship or a tector, trustee or key employee?	pusiness relationship with any other	2		X
3	Did the or of officers	ganization delegate control over management duties customarily perform , directors or trustees, or key employees to a management company or	ned by or under the direct supervision other person?	3		х
4		ganization make any significant changes to its organizational documents		4		X
	since the	prior Form 990 was filed?				
5	Did the or	ganization become aware during the year of a material diversion of the c		5		X
6	Does the	organization have members or stockholders? SEE SCHEDULE (	<b>0</b>	6	X	L
		•		7a		
1	b Are any d	ecisions of the governing body subject to approval by members, stockho	olders, or other persons? SEE SCH C	7 <u>5</u>	X	
8	Did the or the following	ganization contemporaneously document the meetings held or written acing.	ctions undertaken during the year by		, ,	
	a The gover	ning body?		<u>8a</u>		<u></u>
		miltee with authority to act on behalf of the governing body?		<u>8b</u>		<u></u>
		organization have local chapters, branches, or affiliates?		<u>9a</u>	<del> </del>	X
ı	o If 'Yes,' d and brand	oes the organization have written policies and procedures governing the thes to ensure their operations are consistent with those of the organizat	activities of such chapters, affiliates,	9 b		
10	Was a co describe i	py of the Form 990 provided to the organization's governing body before n Schedule O the process, if any, the organization uses to review the Fo	it was filed? All organizations must orm 990 SEE SCHEDULE O	10	х	
11	organizati	ny officer, director or trustee, or key employee listed in Part VII, Section ion's mailing address? If 'Yes,' provide the names and addresses in Sch	A, who cannol be reached at the hedule O	11		Х
Sec	ction B.	Policies				
					Yes	No
12	a Does the	organization have a written conflict of interest policy? If 'No,' go to line	13	12a	X	<u> </u>
1	b Are office to conflict	rs, directors or trustees, and key employees required to disclose annual s?	ly interests that could give rise	12b	x	
•	c Does the Schedule	organization regularly and consistently monitor and enforce compliance O how this is done	with the policy? If 'Yes,' describe in	12c		X
13	Does the	organization have a written whistleblower policy?		13	<u> </u>	X
14	Does the	organization have a written document retention and destruction policy?		14	X	
15	Did the propersions,	rocess for determining compensation of the following persons include a r comparability data, and contemporaneous substantiation of the deliberal	eview and approval by independent lion and decision:			
	a The organ	nization's CEO, Executive Director, or top management official?		15a		X
1	<b>b</b> Other offi	cers of key employees of the organization?		15b	4	X
	Describe	the process in Schedule O. (see instructions)		Ties in the second		
16	a Did the or entity dur	ganization invest in, contribute assets to, or participate in a joint venturing the year?	e or similar arrangement with a taxable	16a	1000	X
1	b if 'Yes.' h in joint ve status wil	as the organization adopted a written policy or procedure requiring the or enture arrangements under applicable federal tax law, and taken steps to h respect to such arrangements?	organization to evaluate its participation o safeguard the organization's exempt	166	1	
Sec		Disclosures				
17	List the st	lates with which a copy of this Form 990 is required to be filed  M	N			
18	inspection	104 requires an organization to make its Forms 1023 (or 1024 if applical n. Indicate how you make these available. Check all that apply	ble). 990. and 990-T (501(c)(3)s only) ava	lable f	or pub	olic
	Own	website Another's website X Upon request				
19	Describe statemen	in Schedule O whether (and if so, how) the organization makes its gover its available to the public. SEE SCHEDULE O	rning documents, contlict of interest policy	, and f	inancı	al
20		name, physical address, and telephone number of the person who poss VENNES 2518 FIRST AVENUE SOUTH MINNEAPOLIS	<del>_</del>	zation	:	
BA				Fore	n gan	(2008)
~~/	•			1 (31)	,, JJV	(2000)

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

#### Section A. 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) or 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

Check this box if the organization did not (A)	(B)			((				(D)	(E)	(F)
Name and Title	Average hours	L				at apph	<u> </u>	Reportable compensation from	Reportable	Esturnated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099-MISC)	emount of other connensation from the organization and related organizations
GREG ROMAIN PRESIDENT	1	х		х				0.	0.	0.
CRAIG_KARL SECRETARY	1	Х		х				0.1	0.	0.
SAM COHEN TREASURER	1	Х		Х				0.	0.	0.
GEORGE WAWRO DIRECTOR	1	Х						0.	0.	0.
CRAIG SCHOTT DIRECTOR	1	X						0.	0.	0.
ROB ANDERSON DIRECTOR	1	Х		-			_	0.	0.	0.
PAT DUFF DIRECTOR JOHN FROHLING	1	Х						0.	0.	0.
DIRECTOR BOB JENKINS	1	х					_	0.	0.	0.
DIRECTOR PASCAL MOREL	1	Х					_	0.	0.	0.
DIRECTOR DAVID RUNDE	11	X						0.	0.	0.
DIRECTOR DAVID VENNES	1_	Х					_	0.	0.	0.
EXECUTIVE DIRECTOM ADAMS	60			Х			_	29,791.	0.	1,740.
DIRECTOR	60		$\left  \cdot \right $	X		- {		42,816.	0.	12,600.
							_			
		-	$\left  \cdot \right $							
	· · · · · · · · · · · · · · · · · · ·		$\left  \cdot \right $							
BAA					047					Form <b>990</b> (2008)

Form 990 (2008) NU-WAY HOUSE INC Part VII Section A. Officers, Directors, Trus	toos I	(A)	En	ani	046	205	an	d Highest Co	41-605295	
(A)		<u>vey</u>	LII			:05,	4"	(D)	(E)	(F)
Name and Title	(B) Average	Posi	an (	) check		hat ar	noby)	, ,		1
·	hours per week	Individual frustee or director		Officer	Key employee	Highest compensated		Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estambled amount; of other compensation from the from the organization and related organizations
							[ ]			
		_					_			
						_				
						j				
1 b Total								72,607.	0.	14,340
2 Total number of individuals (including those in 1a) w organization ► 0	ho recer	ved i	more	e tha	an \$	100.	.000	in reportable com	pensation from the	
<ul> <li>3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in</li> <li>4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual</li> <li>5 Did any person listed on line 1a receive or accrue corendered to the organization? If 'Yes,' complete Sch.</li> </ul>	dividual ortable an \$150 impensa	comp ,000 ·	pens ? If fron	atio 'Yes	on an	nd o' ompl ompl	ther ete	compensation from	m h	3 X 4 X
Section B. Independent Contractors  1 Complete this table for your five highest compensate	_									
compensation from the organization								<del></del>	<del></del>	
(A) Name and business addres	<u>s</u>							Description (	of Services	(C) Compensation
					_					
				_				<b></b>		

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in

compensation from the organization • 0

la F b M c F d F e G f A g M	Federated campaigns Membership dues Fundraising events				exempt function revenue	business revenue	excluded from tax under sections 512, 513, or 514
c F d F e G f A g N	•	<u>  1a</u>					
d F e G f A s	Fundraising events .	. 78					
e G f A s		10					
f A s	Related organizations	1d					
g N	Government grants (contribution	ons) 1 e					
g N	All other contributions wifts a		1				
g N	All other contributions, gifts, g similar amounts not included a	above 1f	10,025.				
-	Noncash contribus included in	Ins la-lf: . \$					
h 1	Total. Add lines 1a-1f .			10,025.			
			Business Code	1000 00 0000	MARKE AND A	71272	#1636.5° 12.5° 12.5° 12.5°
2a _(	CHEM DEP COUNSI	ELING	623990	794,315.	794,315.		
b							
c ]				1			
ď				T			
е_					]		
1 7	All other program service	e revenue		L	1		
<u>g</u> 7	Total. Add lines 2a-2f.			794, 315.	2008/34/58/8/64		\$0,866 V 8 5 % CO /4
3 l	Investment income (incli	uding dividends	s, interest and	1			
C	other similar amounts)			·	<u> </u>		
	Income from investment	of tax-exempt	bond proceeds	·	<b>}</b>		
5 F	Royalties	r	<u>, , , , , , , , , , , , , , , , , , , </u>				
		(i) Real	(ii) Personal				
6a (	Gross Rents	<b></b>					
Ьl	Less: rental expenses						ART BALLANCE
	Rental income or (loss) .	L					
1 b	Net rental income or (los	ss)	<b>•</b>				
	Gross amount from sales of	(i) Securities	(ii) Other	1483 REAL TRANSPORT	r es anal		
а	assets other than inventory		199,800.		La Canada de Cara		
ы	Less' cost or other basis						
	and sales expenses		94,626.	The same of the sa			
c (	Gain or (loss)	L	105,174.		The contract of the contract o		
d f	Net gain or (loss) .		· <u> </u>	105,174.			105,174.
8a (	Gross income from fund	raising events	-	<b>医红色的</b> 医			
(	(not including \$	<del></del>	-	De 12 1			
C	of contributions reported	i on line 1c).	J	Belleville Committee			
5	See Part IV, line 18	•	a				
ьι	Less direct expenses .		b	105,174.			
c l	Net income or (loss) from	m fundraising e	events .	-)	ł		
9a (	Gross income from gam See Part IV, line 19	ing activities	1			Same Buch Stor	K. J. W. S. C. W.
			a				
	Less: direct expenses .		b{		ficata (Glas		
<b>c</b> 1	Net income or (loss) from	m gaming activ	rities 🟲	ı	E .		
10a (	Gross sales of inventory	r. less returns	1				
	and allowances .		a				
	Less cost of goods sold		<b>b</b> {				
<u>c 1</u>	Net income or (loss) troi			·1	1		
	Miscellaneous Reveni	ue	Business Code				
	VENDING		900004	1,739.	<del> </del>		1,739.
b_	MISCELLANEOUS	- <i>-</i>	900099	23,422.	1		23, 422.
c ~			<u></u>	<u> </u>	<u> </u>		
	All other revenue	•	L	<u> </u>	-		
e 1	Total. Add lines 11a-11d			25,161.			
2 1	Total Revenue. Add tine 10c. and 11e	s 1h, 2p, 3, 4.	5, 6d, 7d, 8c. 9c.	934,675.	794,315.		130, 335. [0

# Form 990 (2008) NU-WAY HOUSE INC Part IX: Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

<ul> <li>All other organizations must complete column (A) but are not required to complete colu</li> </ul>	nns (B), (C), and (D).	

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21					
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			Park Parmus (27	II patra ou inter "".	
5	Compensation of current officers, directors, trustees, and key employees.	86,947.	74,774.	12,173.	0.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.	
,		517,206.	444,797.	72,409.		
,	Other salaries and wages	317,200.	444, 131.	12,403.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	190,842.	164,124.	26,718.		
9	Other employee benefits	57,785.	50,851.	6,934.		
10	Payroll taxes	55,559.	47,781.	7,778.		
11	Fees for services (non-employees)					
ā	a Management					
ŧ	b Legal					
	c Accounting .	6,470.		6,470.		
	d Lobbying					
	e Prof fundraising svcs. See Part IV, In 17		7, 0,7 7,558 A 13875 7	@ \$2 68 180 A 79		
	f Investment management fees	<del></del>	<del> </del>	**************************************		
	g Other	38,923.	38,923.	<del></del>		
	Advertising and promotion .	1,288.	1,288.			
13		38,652.	17,703.	20,949.		
14	Information technology	4,073.	3,503.	570.		
	-	4,073.	3,303.	370.		
15	Royalties	102 754	05 561	7 102		
16	Occupancy	102,754.	95,561.	7,193.	<del></del>	
17 18	Travel. Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings .					
20	Interest					
21			,			
22	Depreciation, depletion, and amortization	13,289.	9,568.	3,721.		
23	Insurance .	48,842.	39,562.	9,280.		
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)	577 3 7 5 0 3 7 5 C 7 6 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5	~	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Contract and Contract	
	a FOOD	65,007.	65,007.			
	b TAX - MN CARE	17,377.	17,377.	<u> </u>		
	c CLOTHING & LINEN	7,111.	7,111.	<u> </u>	<del></del>	
	d DRUG TESTING	5,058.	5,058.	<del></del>		
	e DUES & SUBSCRIPTIONS	3,339.	3,339.	<b></b>	<del> </del>	
	f All other expenses	510.	510.	ļ		
25	Total functional expenses. Add lines 1 through 24f	1,261,032.	1,086,837.	174,195.	0.	
26	Joint Costs. Check here Juf 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.					
BAA					Form 990 (2008) [ [	ค. 181

L				(A) Beginning of year		(B) End of year
$\neg$	1	Cash - non-interest-bearing	, , .		1	81,128.
ŀ	2	Savings and temporary cash investments			2	
Į	3	Pledges and grants receivable, net			3	
- 1	4	Accounts receivable, net		101,009.	4	56,387.
	5	Receivables from current and former officers, directors, to other related parties. Complete Part II of Schedule L	rustees, key employees,		5	
ļ	6	Receivables from other disqualified persons (as defined of and persons described in section 4958(c)(3)(B). Complete			 	
Å	7	Notes and loans receivable, net			7	
S S E	8	Inventories for sale or use			8	
S	9	Prepaid expenses and deferred charges		5,789.	9	
1	10 a	Land, buildings, and equipment cost basis	10a 619,868.	255/6/45/6/2000/6/56	<u> </u>	
	ь	Less, accumulated depreciation, Complete Part VI of			200	
- 1		Schedule D	10ь 565,288.	159,211.	10c	54,580.
	11	Investments - publicly-traded securities			111	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	<del></del>
i	14	Intangible assets			14	
	15	Other assets See Part IV, line 11	1,145.	15		
	16	Total assets Add lines 1 through 15 (must equal line 34)	)	267,154.	16	192,095.
_	17	Accounts payable and accrued expenses		12,160.	17	69,951.
	18	Grants payable		18		
	19	Deferred revenue			19	
Ļ	20	Tax-exempt bond liabilities			20	
À	21	Escrow account liability. Complete Part IV of Schedule D	) .		21	<del></del> -
L	22	Payables to current and former officers, directors, truste highest compensated employees, and disqualified person		30 80°		
É		of Schedule L			22	<del> </del>
S	23	Secured mortgages and notes payable to unrelated third		23		
	24	Unsecured notes and loans payable		24		
	25	Other liabilities. Complete Part X of Schedule D		49,474.	25	
	26	Total liabilities. Add lines 17 through 25	<u> </u>	61,634.	26	69,951.
N .		Organizations that follow SFAS 117, check here > 27 through 29 and lines 33 and 34.	X and complete lines			
d/n/m/v	27	Unrestricted net assets		205,520.	27	122,144.
Ę	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets .			29	<u> </u>
R F		Organizations that do not follow SFAS 117, check here lines 30 through 34.	and complete			
<b>92</b> C+	30	Capital stock or trust principal, or current funds .			30	
Ŗ	31	Paid-in or capital surplus, or land, building, and equipme	ent fund .		31	
UMCIZETED	32	Retained earnings, endowment, accumulated income, or	other funds		32	
ğ	33	Total net assets or fund balances.		205,520.	33	122,144.
	34	Total liabilities and net assets/fund balances	<u> </u>	267,154.	34	192,095.
1	a We b We	counting method used to prepare the Form 990. Ca ere the organization's financial statements compiled or rev ere the organization's financial statements audited by an in	ndependent accountant?			Yes No  2a X  2b X
_	rev	Yes' to 2a or 2b, does the organization have a committee riew, or compilation of its financial statements and selections are the second of a factoral second or a large statement.	on of an independent accour	ntant?		2c
3	Au	a result of a federal award, was the organization required dit Act and OMB Circular A-133?  Yes, did the organization undergo the required audit or all			ngle 	3a X
BA	_	the organization officings the required adult of at		· · . · · · · · · · · · · · · · · ·	:	Form 990 (2008)

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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.

2008

Open to Public Inspection

		HOUSE INC							41-60	52957			
Part	. l×	Reason for Pu	blic Charity Statu	s (All organizations	must	compl	ete thi	s part	.) (see	instruc	tions)		
				e it is (Please check only									
1	$\bigcap$	A church, convention	on of churches or associ	ciation of churches descri	bed in	section	170(Б)(1	XAXi).					
2	$\sqcap$	A school described	in section 170(b)(1)(A	(ii). (Attach Schedule E	)								
3	$\sqcap$	A hospital or coope	rative hospital service	organization described in	section	n 170(b)	(1)(A)(ii	). (Atta	ch Sche	dule H.)			
4	_			in conjunction with a hos						•	r the hospi	tal's	
		name, city, and sta		•	•	_		'		• •	•		
5		An organization ope 170(b)(1)(A)(iv). (C	erated for the benefit of complete Part II.)	a college or university o	wned or	operate	d by a g	overnm	ental un	if describ	ed in se	ction	
6		A federal, state, or	local government or go	overnmental unit describe	dın se	ction 17	0(b)(1)(/	<b>4)(v)</b> .					
7	吕	in section 170(b)(1)	(A)(vi). (Complete Par	• • • •		-	rnmenta	o finu lu	r from th	e genera	i) public de:	scribe	t
8		A community trust of	described in section 13	<b>70(b)(1)(A)(vi).</b> (Complete	Part II.	)							
9		from activities relation investment income	ed to its exempt function	) more than 33-1/3 % of toons — subject to certain on the stand of the	exceptio	ns and	(2) no m	ore tha	n 33-1/3	t % of its	support fro	am oro	ec.
10	$\prod$	An organization org	janized and operated e	xclusively to test for publ	ic safety	See	section !	509(a)(4	). (see i	instructio	ns)		
11		An organization org more publicly suppl	janized and operated e orted organizations de	exclusively for the benefit escribed in section 509(a) ation and complete lines 1	of, to pe	erform th	e functio	ons of	or carry	out the o	urposes of	one or box th	r iat
		a [] Type I	b ∐Type II	c 🔙 Type III	- Fund	tionally	integrate	ed		∏ ه	Type III-	Other	
е		By checking this bo than foundation ma 509(a)(2).	x. I certify that the org- nagers and other than	anization is not controlled one or more publicly sup	i directly ported o	or indir organizat	ectly by lions des	one or icribed	more dis in sectio	qualified n 509(a)(	persons o (1) or section	other on	
f		If the organization recheck this box	received a written detei	rmination from the IRS th	at is a T	уре І. Т	ype II or	Type I	Il suppoi	rting orga	inization,		
9		Since August 17, 2	006, has the organizati	ion accepted any gift or o	contribut	uon from	any of	the follo	owing pe	rsons?		· ·	
		(i) a person who below, the go	directly or indirectly coverning body of the sup	ontrols, either alone or tog	gether w	ith persi	ons desc	ribed ır	ı (ıı) and	(iri)	11g()	Yes	No
			ber of a person descri			•		•		• •	11 g (ii)		
		•	· ·	described in (i) or (ii) abo	 ve7	•	•	••••			11 g (iii)		
h				e organizations the organ		unnorts		•	•		<u>g</u> (m)		
		Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	(rv) to organiza: (i) tisted gove	s the	(v) Did yo the organi col ( your su	zation in	(vi) I: organizati (i) organiz U S	on in col	(vii) Amoun	t of Sup	port
		·			Yes	No	Yes	No	Yes	No			
		_											
		<del></del>							]	L1			
						<u> </u>			<u> </u>				
			]						[				
					1								
									[	<u> </u>			
lotal													
	For	Privacy Act and Pa	perwork Reduction A	ct Notice, see the Instruc	tions for	Eom C	MUU WANANAN		Schodul	a A Œ Orr	m 990 or 96	30.E7\	3008

	dule 'A (Form 990 or 990-EZ) 2009					41-6052957	Page 2
Par	t'll Support Schedule for	Organizations	s Described in	Sections 170	)(b)(1)(A)(iv) a	nd 170(b)(1)(A)(	(vi)
500	(Complete only if you checke tion A. Public Support	ed the box on line 5	5, 7, or 8 of Part I	)			
	ndar year (or fiscal year				1		
begi	nning in) 🟲	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').						<del></del>
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-3 .						
5	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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support				1		
	ndar year (or fiscal year nning in) ►	(a) 2004	(ь) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10			1000 00 35 00 50 50 50 50 50 50 50 50 50 50 50 50			
12	Gross receipts from related activi		<del></del>			12	
13	First five years. If the Form 990 i organization, check this box and	is for the organizat	tion's first, second	, third, fourth, or	fifth tax year as a	<del></del>	▶ □
Sec	tion C. Computation of Pu		Percentage		<u> </u>		<del></del>
14	Public support percentage for 20	08 (line 6, column	(f) divided by line			14	%
15	Public support percentage for 20	07 Schedule A, Pa	art IV-A, line 26f			15	<u>%</u>
16 a	33-1/3 support test — 2008. If the and stop here. The organization	organization did r qualifies as a publ	not check the box licly supported org	on line 13, and thanization.	ne line 14 is 33-1/3		this box
ь	33-1/3 support test - 2007. If the and stop here. The organization of	e oroanization did r	not check a box or	n line 13. or 16a :	and line 15 is 33-1	/3% or more check	this box
17a	10%-facts-and-circumstances te or more, and if the organization rethe organization meets the 'facts-	meels the Tacts an	id-circumstances'	test, check this be	oxand ston here	Fynlain in Parl IV	6 how
	10%-facts-and-circumstances te or more, and if the organization reorganization meets the 'facts-and Private formation. If the assessment of the organization is a second organization.	meets the 'facts-and-circumstances' t	nd-circumstances' lest The organiza	lest, check this bi ition qualifies as a	ox and stop here a publicly supporte	Explain in Part IV dorganization.	how the □
18 BAA	Private foundation. If the organiz	tation did not chec	k a box on line, 1.	3, 16a, 16b, 17a,			
дд					S	chedule A (Form 99)	0 or 990-EZ) 2008 1

Schedule A (Form 990 or 990-EZ) 2008 NU-WAY HOUSE INC

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chec	ked the box on line	e 9 of Part 1.)				
Sec	tion A. Public Support						
	ndar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.)	1,319.	4,675.	920.		10,025.	16,939.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	1,149,241.	1 096 909	1 147 212	861,453.	794,315.	5,049,130 <u>.</u>
3	Gross receipts from activities that are not an unrelated trade or business						
4	under section 513  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	3,463.	3,707.	4,045.	2,487.	1,739.	15,441. 0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total, Add lines 1-5	1,154,023.	1,105,291.	1,152,177.	863,940.	806,079.	5,081,510.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons.	0.	0.	0.	0.	0.	0.
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	0.	0.	0.	0.	0.	
_		0.	0.	0.			0.
	Add lines 7a and 7b	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
	Public support (Subtract line	<u> </u>	. 1997 3 39 <sub>6</sub> 3	22 32	0.870,6800,148	Jánzár Iðaká	F 001 F10
500	7c from line 6)	Ex. 22.3		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>		5,081,510.
	tion B. Total Support ndar year (or fiscal yr beginning in)	(a) 2004	43 200F	1	40.000	4 > 0000	
Laie	DICIAL MODELLO CISCAL AL DECIDALDO IN LES						
			<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,154,023.	1,105,291.	(c) 2006 1, 152, 177.	863, 940.	806,079.	5,081,510.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form						
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses	1,154,023.					1,006.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975	1,154,023.	1,105,291.	1,152,177.	863,940.	806,079.	1,006.
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	1,006. 1,006. 2,378.	0.	0. 370.	0.	0.	1,006. 0. 1,006. 133,835.
9 10 a b 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 1, 10c, 11, and 17)	1,006. 1,006. 2,378.	0. 249.	0. 370.	0.	0. 128,596.	1,006. 0. 1,006.
9 10 a b 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 1, 10c, 11, and 17)	1,006. 1,006. 2,378.	0. 249.	0. 370.	0.	0. 128,596.	1,006. 0. 1,006. 133,835.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add in 1, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	1,006.  1,006.  2,378.	0. 249.	0. 370.	0.	0. 128,596.	1,006. 0. 1,006. 133,835.
9 10a 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (dd list 1 lik, 11, and 17) First five years. If the Form 990 organization, check this box and tion C. Computation of Pi	1, 154, 023.  1, 006.  1, 006.  2, 378.  stor the organization here	0. 249.	0. 370.	0.	0. 128, 596. section 501(c)(3)	1,006.  1,006.  1,006.  133,835.  0. 5,216,351.
9 10a 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add ins 1, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Ptublic support percentage for 20	1, 154, 023.  1, 006.  1, 006.  2, 378.  stor the organization here  ablic Support  08 (line 8, column	0. 249. Percentage (f) divided by line	0. 370.	0.	0. 128, 596. section 501(c)(3)	1,006.  1,006.  1,006.  133,835.  0.  5,216,351.  97.4%
9 10a 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add ins 1, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Ptublic support percentage from 20 Public support percentage from	1, 154, 023.  1, 006.  1, 006.  2, 378.  2, 378.  s for the organization here ublic Support 08 (line 8, column 2007 Schedule A, 1	0. 249. Percentage (f) divided by line Part IV-A, line 276	0. 370.	0.	0. 128, 596. section 501(c)(3)	1,006.  1,006.  1,006.  133,835.  0. 5,216,351.
9 10a b 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add in 1 lic, 11, and 17) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from tion D. Computation of In	1,006.  1,006.  1,006.  2,378.  2,378.  stor the organizal stop here stop here stop here stop Support 08 (line 8, column 2007 Schedule A, lyestment Inco	0. 249. Percentage (f) divided by line Part IV-A, line 270 me Percentage	0. 370. 370.	0. 2,242.	0. 128, 596. section 501(c)(3)	1,006.  1,006.  1,006.  133,835.  0.  5,216,351.  97.4%  99.5%
9 10a 11 12 13 14 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add in 1 lik, 11, and 17) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the support percentage from 1 investment income percentage for 10 investment income percentage for 11 investment income percentage for 12 investment income percentage for 13 investment income percentage for 14 investment income percentage	1,006.  1,006.  1,006.  2,378.  stor the organization of the organ	1, 105, 291.  0.  249.  lion's first, second  Percentage (f) divided by line  Part IV-A, line 270  me Percentage  column (f) divided	0. 370. 370. 13, column (f))	0. 2,242.	0. 128, 596. section 501(c)(3)	5,081,510.  1,006.  0. 1,006.  133,835.  0. 5,216,351.  197.4% 99.5%  0.0%
9 10a b 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Idd list 1 lik, 11, and 17) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the support percentage from 1 investment income percentag	1,006.  1,006.  1,006.  2,378.  2,378.  stor the organization there stop here stop here stop here stop Schedule A. Investment Inco or 2008 (line 10c. om 2007 Schedul	1, 105, 291.  0.  249.  Lion's first, second  Percentage (f) divided by line Part IV-A, line 270 me Percentage column (f) divided e A, Part IV-A, line	0. 370. 370. 13, column (f)) 19 19 19 19 19 19 19 19 19 19 19 19 19	0. 2,242. fifth tax year as a	0. 128, 596.  128, 596.  15 16 17 18	1,006.  1,006.  1,006.  133,835.  0.  5,216,351.  97.4%  99.5%  0.0%  0.0%
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add in 1 lik, 11, and 17) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the same of the support percentage from 1 investment income percentage from 133-1/3 support tests — 2008. If the more than 33-1/3%, check this business.	1,006.  1,006.  1,006.  2,378.  2,378.  stor the organization did ox and stop here.	1, 105, 291.  0.  249.  249.  Percentage (f) divided by line Part IV-A, line 270 me Percentage column (f) divided e A, Part IV-A, lin not check the both The organization	0. 370. 370. 13, column (f)) by line 13, column e 27h c on line 14, and I qualifies as a pub	0.  2,242.  fifth tax year as a hicky supported org	0. 128, 596.  128, 596.  15 16  17 18 n 33-1/3%, and liranization	5,081,510.  1,006.  0. 1,006.  133,835.  0. 5,216,351.  97.4% 99.5%  0.0% 0.0% ne 17 is not ► X
9 10a 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 51) taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Idd Ins 1 10c, 11, and 17) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from 1 investment income percentage from 1 investment income percentage from 133-1/3 support tests — 2008. If the more than 33-1/3%, check this bis not more than 33-1/3%, check	1,006.  1,006.  1,006.  2,378.  2,378.  2,378.  2,378.  208 (line 8, column 2007 Schedule A, levestment Income 2007 Sched	1, 105, 291.  0.  249.  lion's first, second  Percentage (f) divided by line Part IV-A, line 27  me Percentage column (f) divided e A, Part IV-A, line I not check the box The organization I not check a box b here. The organization	1,152,177.  0.  370.  370.  13, column (f))  by line 13, column (f) (f)  con line 14, and liqualities as a public	0.  2,242.  fifth tax year as a licely supported organd line 16 is more than a publicly support	0. 128, 596.  128, 596.  15 16  17 18 n 33-1/3%, and liranization a than 33-1/3%, a	1,006.  1,006.  1,006.  1,006.  133,835.  0.  5,216,351.  97.4%  99.5%  0.0%  0.0%  ne 17 is not  1X and line 18

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Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)	Schedule A	(Form 990 or 99	0-EZ) 2008_	NU-WAY HOU	ISE INC		41-6052957	Page 4
R: 01.3	Part IV	Supplementa Part II, line 1	al Informat 7a or 17b:	ion. Complete	this part to prove	ide the explanation re	equired by Part II, line 1 rmation. (see instruction	0; ns)
R. 913			,			, 50,00		
R. 913								
R. 913			<b>-</b>					
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	BAA				TEEA0404L 10/07/	08	Schedule A (Form 990 or 990-	

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

OMB No. 1545 0047

2008

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

Open to Public

NU-WAY HOUSE INC		41-6052957
Part I Organizations Maintaining Dono the organization answered 'Yes'	ir Advised Funds or Other Similar to Form 990, Part IV, line 6.	r Funds or Accounts Complete if
	(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 funds are the organization's property, subject to		
6 Did the organization inform all grantees, donor used only for charitable purposes and not for timpermissible private benefit??	he benefit of the donor or donor advisor or o	other
Part II Conservation Easements Compl	lete if the organization answered "	Ves' to Form 990 Part IV line 7
1 Purpose(s) of conservation easements held by		Tes (0 t off) 990, Tart TV, title 7.
Preservation of land for public use (e.g., re		ition of an historically important land area
Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	ition of certified historic structure
Preservation of open space		NOT OF COMMON VISIONS STREET
• • •	qualified conservation contribution in the fo	orm of a conservation easement on the last day
		Held at the End of the Year
a Total number of conservation easements		. Za
b Total acreage restricted by conservation easer	nents	. 26
c Number of conservation easements on a certif	red historic structure included in (a)	2c
d Number of conservation easements included in	n (c) acquired after 8/17/06	2d
3 Number of conservation easements modified, I	transferred, released, extinguished, or termi	inated by the organization during the taxable
year ►	•	
4 Number of states where property subject to co	nservation easement is located >	
5 Does the organization have a written policy requestrorcement of the conservation easement it h	garding the periodic monitoring, inspection, violds?	violations, and
6 Staff or volunteer hours devoted to monitoring,	, inspecting, and enforcing easements during	g the year ►
7 Amount of expenses incurred in monitoring, in		
8 Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above salisfy the requirements of	section Yes No
9 In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote transcription easements	orts conservation easements in its revenue to the organization's financial statements that	and expense statement, and balance sheet, and at describes the organization's accounting for
Part III Organizations Maintaining Coll	ections of Art, Historical Treasure swered 'Yes' to Form 990, Part IV	es, or Other Similar Assets
1 a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statemen	SFAS 116, not to report in its revenue state ic exhibition, education, or research in furth	ement and balance sheet works of art, historical
b If the organization elected, as permitted under	SFAS 116, not to report in its revenue state	ement and balance sheet works of art, historical erance of public service, provide the following
(i) Revenues included in Form 990, Part VIII.	line 1	<b>⊳</b> \$
(ii) Assets included in Form 990, Part X		+\$
2 If the organization received or held works of ar		
amounts required to be reported under SFAS		
a Revenues included in Form 990, Part VIII, line		▶\$

	Y HOUSE INC				41-6052			Page 2
Part III. Organizations Maintai	ning Collection	is of Art, Histor	<u>ical Treasures, o</u>	r Other Sir	<u>milar Ass</u>	ets (c	ontini	ued)
3 Using the organization's accession that apply):	and other records,	check any of the foll	lowing that are a signi	ficant use of	its collection	items (	(check	all
a Public exhibition		d Loan or a	exchange programs					
b Scholarly research		e 🔲 Other						
c Preservation for luture genera								
4 Provide a description of the organi Part XIV	zation's collections a	and explain how the	y further the organizat	lion's exempt	purpose in			
5 During the year, did the organizati assets to be sold to raise funds ra	on solicit or receive	donations of art, his	dorical treasures, or of	ther similar	F	Yes		No
Part IV: Trust, Escrow and Cu IV, line 9, or reported	stodial Arrange	ments Comple	te if organization				90, F	
1 a Is the organization an agent, trust included on Form 990, Part X?	ee, custodian, or oth			assets not	[	Yes		
b If 'Yes,' explain the arrangement is	n Part XIV and com	plete the following ta	able:					
						Amount		
c Beginning balance				. 1c				
d Additions during the year				1d				
e Distributions during the year			. ,	1e				
f Ending balance	-			11	<del></del>		<del></del> _	
2a Did the organization include an ar	nount on Form 990,	Part X, line 217		•	[	Yes	L	No
b If 'Yes.' explain the arrangement	n Part XIV.							
Part V Endowment Funds Co	mplete if organ	ization answere	d 'Yes' to Form 9	90, Part (\	/, line 10	·		
	(a) Current year	(b) Prior year	(c) Two years back		e years back		our year	
1 a Beginning of year balance .		TOWNING MARKS			ું જાજ અંગ <u>દ્વારા</u> તે	R# 3	المراجع والمراجع	2007
<b>b</b> Contributions		CLARE YEAR	ر نوي رسمندرگري. و	33 Le c + 13	รับมหากกัสร้างกำ	Ľ€ Š.	36.6	<u>چې ج</u>
c Investment earnings or losses		14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7. ****		Sec. 65 3 47	22 A.M.	17714	٤٤٠٠
d Grants or scholarships			a (\$1, \$65) s	·^^ \ \*\ /\		$t \sim$	3.5	. 27.
e Other expenditures for facilities and programs		860 ( Vin ( )				. ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		
1 Administrative expenses		~ X80 X (**)	1. 72 / 2 / 2/2					
g End of year balance		<u> </u>		<u> </u>	\$	$\mathbb{R}^{n \times n}$	(1,493)	33,00
2 Provide the estimated percentage	of the year end bala	ance held as.						
a Board designated or quasi-endow	ment >	<b>t</b>						
b Permanent endowment •	8							
c Term endowment	8							
3a Are there endowment funds not in	the possession of t	he organization that	are held and adminis	tered for the		_		
organization by.							Yes	No
(i) unrelated organizations						3a(i)		↓
(ii) related organizations						3a(ii)		<b>↓</b> _
b If 'Yes' to 3a(ii), are the related o	rganizations listed a	s required on Sched	lule R?			3b		<u> </u>
4 Describe in Part XIV the intended								
Part VI. Investments-Land, E	Juildings, and E	quipment. See	Form 990, Part	X, line 10.				
Description of investment		ost or other basis (investment)	(b) Cost or other basis (other)	(c) Depre		(d) E	Book V	
1a Land			7,750.		3000000			<u>, 750</u>
<b>b</b> Buildings.			394,953.	35	6,425.		38	, 52
c Leasehold improvements .								
d Equipment			8,800.		7,875.			92
e Other	. , . 🗀		208,365.	20	0,988.			, 37
Total. Add lines 1a-1e (Column (d) sho	ould equal Form 990	, Part X, column (B)					54	, 580
IAA	<u></u>					ule D (F		

Part VIII Investments—Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  Total Column (b) Should equal Form 990, Part X, Col. (B) line 13)  Part IX Other Assets (See Form 990, Part X, line 15)  N/A  (a) Description  Total. Column (b) Total (should equal Form 990, Part X, col. (B), line 15)  Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  Federal Income Taxes	Cost or end-of-year market value  3) N/A  (c) Method of valuation Cost or end-of-year market value
Total. Column (b) Should equal Form 990 Part X, col. (8) Inte 12)  Part: VIII   Investments—Program Related (See Form 990, Part X, Inne (a) Description of investment type  (b) Book value    Total Column (b) Should equal Form 990, Part X, Col. (8) Inte 13)   Part IX   Other Assets (See Form 990, Part X, line 15)   N/A (a) Description    Total. Column (b) Total (should equal Form 990, Part X, col. (8), Inne 15)   Part X:   Other Liabilities (See Form 990, Part X, line 25)	3) N/A (c) Method of valuation
olat (Column (b) should equal Form 990 Part X, col. (8) Inne 12.) Part: VIII; Investments—Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  Part IX   Other Assets (See Form 990, Part X, line 15) N/A  (a) Description  (b) Total (should equal Form 990, Part X, col. (8), Inne 15)  Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  (b) Amount rederal Income Taxes	3) N/A (c) Method of valuation
Part VIII Investments—Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  (c) Book value  (d) Book value  (e) Book value  (f) Boo	3) N/A (c) Method of valuation
Part VIII Investments—Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  (c) Book value  (d) Book value  (e) Book value  (e) Book value  (f) Boo	3) N/A (c) Method of valuation
Part VIII Investments—Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  (c) Book value  (d) Book value  (e) Book value  (f) Boo	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value    Description of investment type	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value    Description of investment type	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  Total Column (b) Should equal Form 990, Part X, Col. (B) line 13.) Part IX Other Assets (See Form 990, Part X, line 15) N/A  (a) Description  Total Column (b) Total (should equal Form 990, Part X, col. (B), line 15).  Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  Federal Income Taxes	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value    Description of investment type	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  Total Column (b) Should equal Form 990, Part X, Col. (B) line 13.) Part IX Other Assets (See Form 990, Part X, line 15) N/A  (a) Description  Total Column (b) Total (should equal Form 990, Part X, col. (B), line 15).  Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  Federal Income Taxes	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value    Description of investment type	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  (c) Book value  (d) Book value  (e) Book value  (f) Book value  (f) Book value  (h) Book value  (ii) Book value  (iii) Book v	3) N/A (c) Method of valuation
Part VIII Investments - Program Related (See Form 990, Part X, line  (a) Description of investment type  (b) Book value  (c) Book value  (d) Book value  (e) Book value  (f) Book value  (f) Book value  (h) Book value  (ii) Book value  (iii) Book v	3) N/A (c) Method of valuation
(a) Description of investment type  (b) Book value    Initial Column (b) Should enual Form 990, Part X, Col. (B) line 13.)   Part IX   Other Assets (See Form 990, Part X, line 15)   N/A (a) Description    Initial Column (b) Total (should equal Form 990, Part X, col. (B), line 15)   Part X:   Other Liabilities (See Form 990, Part X, line 25)     (a) Description of Liability   (b) Amount	(c) Method of valuation
Part IX   Other Assets (See Form 990, Part X, col. (B) line 13)  (a) Description  Total. Column (b) Total (should equal Form 990, Part X, col. (B), line 15)  Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  (b) Amount  Federal Income Taxes	Cost or end-of-year market value
Part IX Other Assets (See Form 990, Part X, line 15) N/A  (a) Description  Total. Column (b) Total (should equal Form 990, Part X, col.(B), line 15)  Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability (b) Amount Federal Income Taxes	
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Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  (b) Amount  Federal Income Taxes	(b) Book value
Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  (b) Amount  Federal Income Taxes	
Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  (b) Amount  Federal Income Taxes	
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Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability  (b) Amount  Federal Income Taxes	
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Part X: Other Liabilities (See Form 990, Part X, line 25)  (a) Description of Liability (b) Amount Federal Income Taxes	<b>&gt;</b>
(a) Description of Liability (b) Amount Federal Income Taxes	
Federal Income Taxes	83:55-49:55-49:00 <del>0000000000000000000000000000000000</del>
i i	
Total Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	
In Part XIV, provide the text of the footnote to the organization's financial statements that	
positions under FIN 48.	

41-6052957

Page 3

Schedule b (Form 990) 2008 NU-WAY HOUSE INC

chedule D (Form 990) 2008 NU-WAY HOUSE INC		41-6052957	Page 4
art XI : Reconciliation of Change in Net Assets from Form		ents N/A	
1 Total revenue (Form 990, Part VIII, column (A), line 12)		· ···	
, , , , , , , , , , , , , , , , , , , ,		· }	
B Excess or (deficit) for the year Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
•			
• •	· · · · · · · · · · · · · · · · · · ·		
·			
D Excess or (deficit) for the year per financial statements. Combine lines		7.4	
art XII Reconciliation of Revenue per Audited Financial			
Total revenue, gains, and other support per audited financial statement	ls	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 - 1		
a Net unrealized gains on investments			
b Donated services and use of facilities		<del></del>	
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	. <u>2d</u>		
e Add lines Za through 2d		2e	
3 Subtract line 2e from line 1		. 3	<del></del>
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	_	k bij	
a Investments expenses not included on Form 990, Part VIII, line 7b.	. 4a		
b Other (Describe in Part XIV)	<u>4b</u>	\\* <sup>77</sup> <sup>3</sup> \$	
c Add lines 4a and 4b .		. 4c	
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part		5	
art XIII   Reconciliation of Expenses per Audited Financial St	tatements with Expenses p		
1 Total expenses and losses per audited financial statements .			<del></del>
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	ا ما	ks, 3	
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		<u>2e</u>	<del></del>
3 Subtract line 2e from line 1	· · · · · · · · · · · · · · · · · · ·	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV).	4b		
c Add lines 4a and 4b		<del></del>	
5 Total expenses Add lines 3 and 4c (This should equal Form 990, Parlant XIV:   Supplemental Information	t i, iine 18.)		
omplete this part to provide the descriptions required for Part II, lines 3, 5, se 4; Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2		art IV, lines 1b and 2b;	Part V,
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AA TEEA3304L	12/23/08	Schedule D A	orm 990) 2008
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chedule D (Form 990) 2008	Page 5
chedule D (Form 990) 2008 Part XIV   Supplemental Information (continued)	
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~ #	
AA TEEA2205 070/09	Schodule D (Form 990) 2008

SCHEDULE N (Form 990 or 990-EZ)

NU-WAY HOUSE INC

Department of the Treasury Internal Revenue Service Name of the organization

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

To be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36.

Attach copies of any articles of dissolution, resolutions, or plans.

Attach to Form 990 or 990-EZ.

OMB No 1545 0047 2008

Open to Public

Employer identification number

41-6052957

section of recipient(s) (if tax-exempt) or type of entity (g) IRC Code Liquidation, Termination, or Dissolution. Complete this part if the organization answered 'Yes' to Form 990, Part IV, line 31, or Form 990-EZ, Inne 36. Use Schedule N-1 if additional space is needed Ì (f) Name and address of recipient (e) EIN of recipient (d) Method of determining FMV for asset(s) distributed or transaction expenses 2 Did or will any officer, director, trustee, or key employee of the organization. (c) Fair market value of asset(s) distributed or amount of transaction (b) Date of distribution (a) Description of asset(s) distributed or transaction expenses paid Part I

a Become a director or trustee of a successor or transferee organization?

b Become an employee of, or independent contractor for, a successor or transferee organization?

c Become a direct or indirect owner of a successor or transferee organization?

d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution? e if the organization answered 'Yes' to any of the questions in this line, provide the name of the person involved and explain in Part III

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

TEEA4701L 12/19/08

Schedule N (Form 990 or 990-EZ) 2008

2b 25 Page 2 section of recipient(s) (if tax-exempt) or type of entity [Partill Sale, Exchange, Disposition, or Other Transfer of More than 25% of the Organization's Assets. Complete this part if the organization answered "Yes' to Form 990, Part IV, line 32, or Form 990-EZ, line 36 Use Schedule N-1 if additional space is needed. ŝ Yes Yes CIC **S**b **4**a **5**a **7**a 9 2b 2c 41-6052957 (f) Name and address of recipient LIC SHREE INVESTMENTS LLC MINNETONKA, MN 55345 MINNETONKA, MN 55345 16689 CREEKSIDE LN 16689 CREEKSIDE LN SHREE INVESTMENTS 4a Did the organization request or receive a determination letter from EO Determinations that the organization's exempt status was terminated? 5a is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate? d Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets? b Did the organization discharge or defease tax-exempt bond liabilities in accordance with the internal Revenue Code and state laws? Note. If the organization distributed all of its assets during the tax year, then Form 990. Part X, column (B) should equal -0c If 'Yes,' describe in Part III how the organization defeased or otherwise settled these liabilities If 'No,' explain in Part III (e) EIN of recipient Did the organization distribute its assets in accordance with its governing instrument(s)? If 'No.' describe in Part III (d) Method of determining FNV for asset(s) distributed or b Become an employee of, or independent contractor for, a successor or transferee organization? PRICE SALE PRICE transaction expenses SALE Did the organization discharge or pay all liabilities in accordance with state laws? 7a Did the organization have any tax-exempt bonds outstanding during the year? c Become a direct or indirect owner of a successor or transferee organization? 2 Did or will any officer, director, trustee, or key employee of the organization; (c) Fair market value of asset(s) distributed or amount of transaction 99,900. 900 Part I. Liquidation, Termination, or Dissolution (continued) a Become a director or trustee of a successor or transferee organization? 98 10/21/08 10/21/09 b if 'Yes', did the organization provide such notice? (b) Date of distribution b (If 'Yes', provide the date of the letter. Schedule N (Form 990 or 990-EZ) 2008 (a) Description of asset(s) distributed or transaction Ž ₹ Š ကဲ 2525 1ST AVE 2507 1ST AVE MINNEAPOLIS, MINNEAPOLIS,

BAA

Schedule N (Form 990 or 990·EZ) 2008

e If the organization answered 'Yes' to any of the questions in this line, provide the name of the person involved and explain in Part III.

TEEA4702L 12/19/08

Schedule *	N (Form 990 or 990-EZ) 2008	NU-WAY HOUSE INC	41-6052957 Page 3
Rart III	Supplemental Informati	on. Complete this part to provide the infor	mation required by Part I, lines
	2e, 7c; or Part II, line 2e	; and any additional information.	
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## SCHEDULE O

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

OMB No. 1545 0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the oftanization  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.

NU-WAY HOUSE INC	41-6052957
PRIOR PERIOD ADJUSTMENT	
IN_DATA_RECONSTRUCTION_AFTER_A_COMPLETE_DATA_LOSS,_THE_ORGANIZA	ATION DISCOVERED THAT
PRIOR RETAINED EARNINGS WAS MISSTATED BY \$242,981. THIS MISSTA	TEMENT WAS DUE TO A
SELF-ADMINISTERED RETIREMENT ACCOUNT NOT BEING INCLUDED ON THE	PRIOR 990 AS WELL AS
A CORRECTION TO THE CHECKING BALANCE.	
LATE RETURN PENALTY ABATEMENT REQUEST	
PLEASE ABATE ANY LATE FILING PENALTIES BECAUSE WE FEEL WE HAVE	REASONABLE CAUSE. DUE
TO A COMPUTER SYSTEM CRASH, WE LOST ALL OF OUR FINANCIAL RECOR	DS FOR 2008 AND 2009
AND HAD TO RECREATE BOTH YEARS. BEFORE WE FINISHED THE ENTIRE	DATA RECONSTRUCTION,
WE PREPARED OUR OWN 2008 FORM 990 AND WERE MISSING SOME REQUIR	ED SCHEDULES, SO THE
ORIGINAL FILING WAS RETURNED TO US. SINCE SEVERAL DISCREPANCIE	S WERE FOUND IN DATA
RECONSTRUCTION, WE HIRED A CPA TO ASSIST US WITH CORRECTING TH	E 2008 990 THAT WAS
RETURNED BY THE IRS. WE HAVE SINCE RECREATED THE DATA FOR BOTH	2008 AND 2009 AND
HAVE FILED BOTH RETURNS. WE HAVE PUT IN PLACE A BACK UP SYSTEM	FOR OUR FINANCIAL
DATA AS TO RECTIFY THIS PROBLEM.	
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAI	REHOLDER
CERTIFICATE HOLDERS.	
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOV	ERNING BODY
CERTIFICATE HOLDERS VOTE FOR BOARD MEMBERS.	
FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY	MEMBERS OR SHAREHOLDERS
CHANGES IN THE ARTICLES OF INCORPORATION REQUIRE APPROVAL BY C	ERTIFICATE HOLDERS AND
BOARD MEMBERS.	
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS	
AN ELECTRONIC COPY OF THE 990 IS PROVIDED TO THE BOARD VIA E-M	AIL PRIOR TO FILING.
	·

Schedule O (Form 990) 2008	Page 2
Name of the organization NU-WAY HOUSE INC	Employer identification number 41-6052957
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PU	BLICLY AVAILABLE
•	
GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS	ARE HADE AVAILABLE TOK TOBLE
INSPECTION UPON REQUEST TO THE ORGANIZATION.	
<u>a</u>	
PAA	Schodula Q (Form 990) 2009

TEEA4902L 12/11/2008