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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

2008
Open to Public

			The organization may have to use a sopy of this folder to eather, state to	po.c <u>g</u> .oqu		Hisperion
<u>A</u>	For the 200	8 calendar y	ear, or tax year beginning, and ending		·	
В	Check ¿applica		C Name of organization		D Empl	oyer identification number
	Address change	use IRS	AYUDA, INC.			
	Name change	print or	Doing Business As		59-	<u>-1761257</u>
H	•	type.	Number and street (or P O box if mail is not delivered to street address)	toom/suite	E Telepi	none number
\vdash	Initial return	See	13899 Biscayne BLVD	123	305	5-864-6885_
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4		G Gross reco	eipts\$ 1,023,686
П	Amended return	B	North Miami FL 33181			
Ħ	Application pen	ding F Nam	e and address of principal officer	010	H(a) Is this	a group return for
ш	мррисации рен	""" Lu	is DeJesus (2008) 2/1/ ByRow A	we	affiliat	es? Yes X No
		13	899 Biscayne BLVD W. B. Fl. 33	141	H(b) Are ali	
			rth Miami FL 33181			attach a list (see instructions)
	Tax-exempt		501(c) (3) ♦ (insert no) 4947(a)(1) or 527			,,
<u>.</u>			ayudamiami.org		H(c) Group	exemption number •
	Type of organiz				977	M State of legal domicite FL
******	art l	Summa		0.1011120011		III Claic of logal actinions — —
	· · · · · · · · · · · · · · · · · · ·		the organization's mission or most significant activities			
	I	•	t under-served and/or at-risk families in Miami-	Dade Cor	inty ti	hrough
JCe			n, life-skills training, and programs that suppo			
na.			ficiency.			
Governance	2 01-		♦ ☐ if the organization discontinued its operations or disposed of more than 25	0/ of its social	_	
ဖွ	2 Chec			70 OF ILS ASSEL		9
•ඊ ′			g members of the governing body (Part VI, line 1a)		3	9
Activities &			endent voting members of the governing body (Part VI, line 1b)		4	24
ξi			employees (Part V, line 2a)		5	
Ac			volunteers (estimate if necessary)		6	51
	1	_	lated business revenue from Part VIII, line 12, column (C)		7a	
_	b Net t	unrelated bu	7b	Current Year		
			, 954	1,022,765		
ne	8 Cont	ributions an	, 934	921		
6 U3≸d Revenue	9 Prog		revenue (Part VIII, line 2g)			321
= é	10 Inves		me (Part VIII, column (A), lines 3, 4, and 7d)		\longrightarrow	
7	11 Othe	•	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	065	OF A	1 022 606
—			add lines 8 through 11 (must equal Part VIII, column (A), line 12)	903	954	1,023,686
-			ar amounts paid (Part IX, column (A), lines 1-3)			
Penses	14 Bene	efits paid to	or for members (Part IX, column (A), line 4)			
Ses	15 Sala		ompensation, employee benefits (Pair & Column At Lules 5-10)			
, E	16a Profe	essional fun	draising fees (Part IX, column (A), line 11e) gexpenses (Part IX, column (I)) ine DE C 2 0 2010 (Part IX, column (A), lines 11a-11d, 11f-24f) Add lines 13 17 (must equal Part 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-		
ָבָּ גַּי	b Tota	l fundraising	expenses (Part IX, column (P)Sine BF C+2 0 2010	1 020	405	007.004
- W	17 Othe	r expenses	(Part IX, column (A), lines 114-11d, 11f-24f)	1,239		997,824
Net Assets or Exp	18 Tota	l expenses	Add lines 13-17 (Indist equal fact IX, colding IX), line 237	1,239		997,824
<u>.</u>	19 Reve	enue less ex	penses Subtract line 18 from line 10GDEN, UT		3,541	25,862 End of Year
رة قرار 100 ق				Beginning of	, 444	123,078
SSE A	e 20 lota	•	rt X, line 16)		,692	
e e	21 Tota		Part X, line 26)			347,465
			nd balances) Subtract line 21 from line 20	-250	,248	-224,387
	Part II		re-Block			
		Under pena	lties of perury, I declare that I have examined this return, including accompanying schedules an tig true, correct, and complete Declaration of preparer (other than officer) is based on all inform	id statements, a	nd to the be	est of my knowledge
		and belief, i	the lide contest, and complete decidation of prepared (other than officer) is based on all minority	iadori oi willon p	i AD	- /a CD
Sig	- 1	X	Marian	<u>-</u>	XIL	-4-10
He	ere	gnati	rie of officer		Date	
			PRESISPUT (CUrrent)			<u> </u>
		Туре 6	print name and tyle			
_	7	Preparer's	Date	Check i	f	Preparer's identifying number (see instructions)
Pa	1	signature	RODERICK HARVEY, CPA 11/30/	10 self- employe	ed 🔷 🗀	P000000002
	eparer's		Harvey, Covington & Thomas, LLC		EIN	•
Us	se Only	Firm's name if self-emple	2016 Welleman of Direct Che 202		Phone	
	-	address, ar	· · · · · · · · · · · · · · · · · · ·		no •	407-475-1000
Ma	v the IPS d	<u>_</u>	eturn with the preparer shown above? (see instructions)		110	Yes No
			Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2008)
						\-300/

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1 I	Briefly describe to assist	ement of Program Section of Program Section of Program Section of Microscopic of Program Section of Program	and/or a	t-risk famil	ies in Miam		nty through	_ _ h
3	the prior Form 99 If "Yes," describe Did the organizat services? If "Yes," describe Describe the exe Section 501(c)(3	tion undertake any significa 90 or 990-EZ? e these new services on So tion cease conducting, or n e these changes on Schedu empt purpose achievements) and 501(c)(4) organization iers, the total expenses, an	hedule O nake significant o ule O s for each of the o ns and section 49 d revenue, if any	hanges in how it conducts organization's three larges 947(a)(1) trusts are require , for each program service	, any program t program services by ed to report the amoun	t of grants and	Yes X No	-
T)(Expenses \$ needy people i concerns wit	in the c) (Revenue \$	20,976)
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$		-)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$		
	(Expenses \$		ncluding grants o) (Revenue \$	2)))	_
<u>4e</u>	Total program s	ervice expenses 🔷 \$	930	, / L 9 (Must equal Part	IX, Line 25, column (I	B))	Form 990 (2008	_

Part IV 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	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	1.		x
5	Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4		
5	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	_ <u>~</u> _		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6	' i	X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		1	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		<u> </u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	1	l	
40	Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	12	x	
13	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b		1.50	-	
•	business, 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		Х
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		<u> </u>
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_		<u>X</u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u>X</u>
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
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		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
_~a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	The state of the s			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			77
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or		ŀ	x
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27 Eorg	990	
		ron	. 330	(∠∪∪ठ)

organization? If "Yes," complete Schedule R, Part V, line 2

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

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 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, X 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," X 28b complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a X 28c professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X 34 III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X 35 Schedule R. Part V. line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 X 36

Form 990 (2008)

37

ra	Statements Regarding Other IRS Fillings and Tax Compliance			,-	Van	No
4.	Enter the number reported in Box 3 of Form 1006. Annual Summary and Transmittal of	. I			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	4			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	24			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep					
·	gaming (gambling) winnings to prize winners?		-	1c	X	
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	2a	24			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	<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)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by				
	this return?			3a	<u> </u>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b_	Ì	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		У			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	anciai		4a		x
	account)?			44		-
þ	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign E	Rank				
		Janik				
5 0	and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
	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	ļ	<u> </u>
6a	Did the organization solicit any contributions that were not tax deductible?			6a	X	ļ
b	If "Yes," did the organization include with every solicitation an express statement that such contributio		l			
	gifts were not tax deductible?			<u>6b</u>	X	├
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than		_		.
	\$75?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	_		7b	-	├ ^
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S		7c		x
	required to file Form 8282?	7d		10		
d	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 po					
θ	benefit contract?	0,00,10	•	7е		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
y h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C					
••	required?			<u>7h</u>	<u> </u>	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect	tion				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon					
	organization, have excess business holdings at any time during the year?			8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a	┼	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	 -	X
10	Section 501(c)(7) organizations. Enter	امدا		-		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>			
11	Section 501(c)(12) organizations. Enter	11a		į.		
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	'a				
b	amounts due or received from them)	11b				
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126				
	II 100, Cities alle different of the energy interest reserved of desired daming the just				996	(2008)

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

<u>5e</u>	ction A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the		1	
_	circumstances, processes, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body		1	
b	Enter the number of voting members that are independent 1b 9			
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		X
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	<u> </u>	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	J]	
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
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		X
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		<u>X</u>
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		<u> </u>
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> </u>
<u>Sec</u>	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		1	
	describe in Schedule O how this is done	12c	_X_	
13	Does the organization have a written whistleblower policy?	_13		<u>X</u> _
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			
а	The organization's CEO, Executive Director, or top management official?	15a		<u>X</u> _
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		<u>X</u> _
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	[X
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ♦ RAFAEL MAYA 7144 Nyron Avenue #5			
M	iami Beach FL 33141	305-86	4-6	885

Form 990 (2008) AYUDA, INC.

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) 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)	(B) Average	Pos	tion (() checl	C) k all t	that ap	(vlgc	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	or director		Officer	Key employee	Highest compensated employee	Former	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
DeAnne Graha	m	\						0	0	
Chair Angela Posil	lico	X	\vdash			\vdash		<u> </u>	J	0
Vice Chair	1160	x						o	0	0
Martine Arri	ola	1^			 	\vdash				
Member		x			ļ			o	0	0
Jacqueline I	ertz	 								
Member		x		L				0	0	0
Enrique Pulo	om				[
<u>Member</u>		<u> </u>			L			0	0	0
Robert Susi			1							
Member	•	X	_	<u> </u>				0	0	0
Marjorie You	rk 	7.						o	0	0
Member Luis De Jesu		X	_					0	<u> </u>	0
CEQ	40			x	Ì			72,120	0	0
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Form 990 (2008) AYUDA, INC. 59-1761257 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (F) Position (check all that apply) Name and title Average Reportable Reportable Esumated hours per compensation Officer compensation amount of Institutional trustee Key employee dividual trustee director week from from related other the organizations compensation organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related organizations 72,120 • 1b Total Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization • 0 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A)
Name and business address (B)
Description of services (C) Compensation Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization Form **990** (2008)

Pa	rt VI	Statement of Revenue					
•				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
					revenue	Tevenus	512, 513, or 514
먑		Federated campaigns 1a		1			
E O		Membership dues 1b		1			
a, ts	С	Fundraising events 1c					
<u>igi</u>	d	Related organizations 1d					
S.E	0	Government grants (contributions) 1e 1,0	02,710				
흕	f	All other contributions, gifts, grants,					
들휨		and similar amounts not included above 1f	20,055				
ם	g	Noncash contributions included in lines 1a-1f \$					
Program Service Revenue Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	•	1,022,765			
a l			Busn. Code		201		
Ş	2a	Program Service Revenue		921	921		
Š	b						
ξ	C					-	
Sel	d						
ag	е						
ē	f	All other program service revenue	L				
٦		Total. Add lines 2a-2f	•	921			<u> </u>
	3	Investment income (including dividends, intere	st, and				
		other similar amounts)	•				
	4	Income from investment of tax-exempt bond p	roceeds 🔷 📙				
	5	Royalties	•				
		(ı) Real (ıı) P	ersonal				
	6a	Gross Rents					
	b	Less rental exps					
	С	Rental inc or (loss)					
		Net rental income or (loss) Gross amount from (i) Securities (ii)	•				
	1 a	sales of assets (i) Securities (ii)	Other				
		other than inventory					
	b	Less cost or other					
		basis & sales exps					
		Gain or (loss)					
		Net gain or (loss)	•				
_	8a	Gross income from fundraising events					
nue		(not including \$					
)ve		of contributions reported on line 1c)					
8		See Part IV, line 18 a					
Other Revenu		Less direct expenses b					
ŏ		Net income or (loss) from fundraising events	•				
	9a	Gross income from gaming activities					
		See Part IV, line 19 a					
		Less direct expenses b				.	
		Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less					
		returns and allowances a					
		Less cost of goods sold b					
	С	Net income or (loss) from sales of inventory	Buon Code		11-111-11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- n.	
	_	Miscellaneous Revenue	Busn. Code				
	11a		 				
	b				-		
	С	AU - U					
	d	All other revenue					
	_	Total. Add lines 11a-11d	7-1 00				
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d,	/a, 8C,	1,023,686	921	0	o
	i	9c, 10c, and 11e		1,023,000	321		

Part IX Statement of Functional Expenses

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

	All other organizations must o				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	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		1		
	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				
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				
	· · · · · · · · · · · · · · · · · · ·				
7	persons described in section 4958(c)(3)(B) Other salaries and wages				
7 2	Pension plan contributions (include section 401(k)				
8	and section 403(b) employer contributions)				
9	Other employee benefits				
9 10	Payroll taxes		***		
11	Fees for services (non-employees)				
	Management				
	Legal				
	Accounting	7,250		7,250	
	Lobbying				
9	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	877,573	877,130	443	
12	Advertising and promotion	200		200	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	46,815		46,815	
17	Travel	8,310	8,310		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,326		2,326	
21	Payments to affiliates	2-1-1			
22	Depreciation, depletion, and amortization	6,122	6,122		
23	Insurance	18,828	18,828		
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)	0.050	0 050		
а		9,853	9,853	· · · · · · · · · · · · · · · · · · ·	
b	Electric expenses	5,068	5,068		
C	Repair and Maintenance	3,753	2 507	3,753	
d	Equipment Rental	3,507	3,507	2 200	
9	Dues and Subscriptions	2,298	1 001	2,298 4,020	
f	•	5,921	1,901		
25	Total functional expenses. Add lines 1 through 24f	997,824	930,719	0/,105	<u> </u>
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				

<u>P</u>	art)	Balance Sheet							
				(A)		(B)			
		<u> </u>		Beginning of year		End of			
	1	Cash—non-interest bearing			_1		1,3	<u> 355</u>	
	2	Savings and temporary cash investments		177 120	2		<u>~ -</u>	710	
	3	Pledges and grants receivable, net		177,138	3		.2,7	12	
	4	Accounts receivable, net			4				
	5	Receivables from current and former officers, directors, t							
		employees, or other related parties. Complete Part II of S			5				
	6	Receivables from other disqualified persons (as defined	i						
		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 8				
Assets	8	Inventories for sale or use			9	·			
ä	9	Prepaid expenses and deferred charges	10a 56,279		9				
	10a 		10a 56,279						
	ם	Less accumulated depreciation Complete	10ь 48,775	13,626	10c		7,5	504	
		Part VI of Schedule D Investments—publicly traded securities	1001 407773		11		- / -		
	11	Investments—publicly traded securities Investments—other securities See Part IV, line 11			12				
	12 13	Investments—program-related See Part IV, line 11			13				
	14	Intangible assets		1,680	14	-	1,5	507	
	15	Other assets See Part IV, line 11			15				
	16	Total assets. Add lines 1 through 15 (must equal line 34	<u> </u>	192,444	16	12	23,0	78	
	17	Accounts payable and accrued expenses		107,633	17		0,5		
	18	Grants payable		,	18				
	19	Deferred revenue	19						
	20	Tax-exempt bond liabilities			20				
es	21	Escrow account liability Complete Part IV of Schedule I)		21				
Liabilities	22	Payables to current and former officers, directors, truster							
		employees, highest compensated employees, and disqu							
Ë		persons Complete Part II of Schedule L		22					
	23	Secured mortgages and notes payable to unrelated third	parties		23				
	24	Unsecured notes and loans payable			24				
	25	Other liabilities Complete Part X of Schedule D		335,059			56,9		
	26	Total liabilities. Add lines 17 through 25		442,692	26	34	17,4	165	
nces		Organizations that follow SFAS 117, check here ◆	and						
2	ĺ	complete lines 27 through 29, and lines 33 and 34.		050.040		0.0		207	
Balaı	27	Unrestricted net assets		-250,248		-22	24,3	<u> 38 /</u>	
8	28	Temporarily restricted net assets			28				
Fund	29	Permanently restricted net assets	, m		29				
Ţ		Organizations that do not follow SFAS 117, check her	• ◆ ∐						
ō	١.	and complete lines 30 through 34.			20				
Assets	30	Capital stock or trust principal, or current funds	re		30				
SS	31	Paid-in or capital surplus, or land, building, or equipmen			31	· •			
Ä	32	Retained earnings, endowment, accumulated income, o	r otner tunds	-250,248		-22	24,3	387	
Net	33	Total net assets or fund balances		192,444			23,0		
	34	Total liabilities and net assets/fund balances XI Financial Statements and Reporting		192,444	34		<u>. </u>	, , o	
	art :	Ai Financial Statements and Reporting		,			Yes	No	
1	Ac	counting method used to prepare the Form 990	ash 🗓 Accrual 🗍 O	ther					
2		ere the organization's financial statements compiled or rev		ntant?		2a		X	
		At a state of the Common test and the design of the design of the common state of the							
		If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of							
		ne audit, review, or compilation of its financial statements a				2c			
3	a As	s a result of a federal award, was the organization required	l to undergo an audit or audits as	set forth in					
		e Single Audit Act and OMB Circular A-133?				3a	\longrightarrow		
	b If	"Yes," did the organization undergo the required audit or a	udits?			3b			

SCHEDULE A

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number 59-1761257 AYUDA INC. Reason for Public Charity Status (All organizations must complete this part.) (see instructions) Part I The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public X described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h d | Type III-Other c Type III-Functionally Integrated b | Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?

i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o in col (i) Is governing o	sted in your			(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support	
		<u> </u>	Yes	No	Yes	No	Yes	No		
						-				
			1							
									 	

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

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 AYUDA, INC.

59-1761257 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 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 Gifts, grants, contributions, and membership fees received (Do not 1,022,765 1,022,765 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 1,022,765 1,022,765 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 982,255 shown on line 11, column (f) 40,510 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) (b) 2005 (c) 2006 (d) 2007 (e) 2008 (a) 2004 1,022,765 1,022,765 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, 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) 1,022,765 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 12 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 14 3.9608 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 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 stop here. The organization qualifies as a publicly supported organization 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 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

18

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) (d) 2007 (a) 2004 (b) 2005 (c) 2006(e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 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 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Add lines 7a and 7b Public support (Subtract line 7c from Section B. Total Support (e) 2008 (f) Total (c) 2006 (d) 2007 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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 carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, 13 and 12) 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) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 Section D. Computation of Investment Income Percentage 17 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 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

Schedule A (Form 990 or 990-EZ) 2008 AYUDA, INC.

59-1761257

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;

Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

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.

OMB No 1545-0047

Quen to Public

Inspection

Name of the organization Employer identification number AYUDA. 59-1761257 INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ◆ _ _ _ _ Number of states where property subject to conservation easement is located • ____ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year • Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2008 AYU					61257			Page	<u>e 2</u>
Pa	rt III Organizations Ma	aintaining	Collections of Art, i	Historical Trea	sures, or Other	Similar A	ssets	(contin	ued)	
3	Using the organization's accessi	on and other r	ecords, check any of the	following that are a	significant use of its	collection				
	items (check all that apply)									
а	Public exhibition		d Loan o	r exchange prograr	ms					
b	Scholarly research		e U Other							
С	Preservation for future gener	ations								
4	Provide a description of the orga Part XIV	nization's colle	ections and explain how t	hey further the orga	anization's exempt pi	urpose in				
5	During the year, did the organiza assets to be sold to raise funds r	tion solicit or i	receive donations of art, h	nistorical treasures, the organization's c	or other similar		П	Yes	□ No	,
Pa	rt IV Trust, Escrow an	d Custodia	al Arrangements. C	omplete if orga	nization answer	ed "Yes"				_
			n amount on Form 9							
1a	Is the organization an agent, trus	tee, custodiar	n or other intermediary for	contributions or ot	her assets not					
	included on Form 990, Part X?							Yes	∐ No	,
b	If "Yes," explain the arrangement	t in Part XIV a	nd complete the following	table				_		_
								Amoun	<u>t </u>	_
C	Beginning balance					1c				_
d	Additions during the year					1d				_
е	Distributions during the year					<u>1e</u>				_
f	Ending balance					1f				_
2a	Did the organization include an a	mount on For	m 990, Part X, line 21?					Yes	∐ No	
	If "Yes," explain the arrangement									
Pa	rt V Endowment Fund	<u>ds. Comple</u>	ete if organization a	nswered "Yes"						
		Ļ	(a) Current year	(b) Prior year	(c) Two years back	(d) Three ye	ars back	(e) Fou	r years bac	:k
1a	Beginning of year balance	ļ. <u>.</u>								
þ	Contributions						<u></u>			
c	Investment earnings or losses	L								
d	Grants or scholarships	L				<u> </u>				
е	Other expenditures for facilities									
	and programs	L				ļ				
f	Administrative expenses	L		· · · · · · · · · · · · · · · · · · ·						
g	End of year balance	L				<u> </u>		<u> </u>		
2	Provide the estimated percentag	e of the year	end balance held as							
а	Board designated or quasi-endo	wment 🔷	%							
b	Permanent endowment •	%								
С	Term endowment ◆	_%								
3a	Are there endowment funds not	in the possess	sion of the organization th	at are held and adr	ministered for the				—	
	organization by								Yes N	lo
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related of	organizations	listed as required on Scho	edule R?				3b		
4	Describe in Part XIV the intende									
Pa	irt VI Investments—La	ınd, Buildir	ngs, and Equipmen	t. See Form 99	<u> 90, Part X, line 1</u>	0				
	Description of investment		(a) Cost or other basis	(b) Cost or of	ther (c) De	preciation		(d) Book	value	
			(investment)	basis (othe	r)					
1a	Land									
b	Buildings									
С	Leasehold improvements						\perp			
d	Equipment									
	Other		56,27		<u> </u>	48,77	5		7,50	
Tota	I. Add lines 1a-1e (Column (d) st	nould equal Fo	orm 990, Part X, column (B), line 10(c))			◆	_	7,50	<u>) 4</u>

	edule D (Form 990) 2008 AIODA, INC.		Page 4
P£	art XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,023,686
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	997,824
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	25,862
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	- 100
8	Other (Describe in Part XIV)	8	6,122
9	Total adjustments (net) Add lines 4-8	9	6,122
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	31,984
	Reconciliation of Revenue per Audited Financial Statements With Revenue pe		1,023,686
1	Total revenue, gains, and other support per audited financial statements	1	1,023,666
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1	
	Net unrealized gains on investments 2a		
	Donated services and use of facilities 2b		
	Recoveries of prior year grants 2c		
	Other (Describe in Part XIV)	-	
	Add lines 2a through 2d	2e	1,023,686
3	Subtract line 2e from line 1	3	1,023,666
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)	 <u>-</u> ,	
	Add lines 4a and 4b	4c 5	1,023,686
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses		1,025,000
1	Total expenses and losses per audited financial statements	1	991,702
	Amounts included on line 1 but not on Form 990, Part IX, line 25	- ' -	3327.02
	Donated services and use of facilities 23		
		 	
	Prior year adjustments Losses reported on Form 990, Part IX, line 25 2c 2c		
	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2е	
3	·	3	991,702
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	332,702
	Investment expenses not included on Form 990, Part VIII, line 7b		
		122	
	Other (Describe in Part XIV) Add lines 4a and 4b		6,122
		4c 5	997,824
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) art XIV Supplemental Information	<u> </u>	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines	1h	
	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	15	
	Part XI, Line 8 - Reconcilation of Changes - Other		
_	Book / Tax Depreciation Difference	\$	6,122
_			
_	Part XIII, Line 4b - Expense Amounts Included on Return	<u>- Other</u>	
	Book / Tax Depreciation Difference	\$	6,122
		·	''
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Schedule D (I	Form 990	2008 (2	A	<u>rud</u>	Α,	II	NC.								_				59	<u>-17</u>	612	25	7				Р	age 5
Schedule D (I Part XIV	Sup	pleme	ntal	Info	rma	tior	1 (00	ntini	ued)																			
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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. OMB No 1545-0047
2008
Open to Public

Inspection

Name of the organization

AYUDA, INC.

Employer identification number 59-1761257

Form 990, Part III, Line 4d - All Other Achievements

To assist under-served and/or at-risk families in

Miami-Dade County through education, life-skills training,
and programs that support self-sufficiency.

Form 990, Part VI, Line 3 - Management Delegated yes

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents yes