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22940 09/06/2012 8 49 PM Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

2008
Open to Public Inspection

ॐ Depa ⊸√interr	rtment of the Tr nal Revenue Se	reasury rvice benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state rep	oorting requiren	nents	Open to Public Inspection
<u>—</u>	For the 2008 c	alendar year, or tax year beginning , and ending			
≅B 0	Check if applicable	Please C Name of organization	D	Employe	er identification number
	Address change	label or Enlisted Assoc of AR National	Guard		
	Name change	print or Doing Business As		71-0	393457
	nitial return	type. Number and street (or P O box if mail is not delivered to street address) Ro	om/suite E		
SH.		See P.O. Box 535		<u> 501-</u>	212-5007
י בו	Termination	Instruc- City or town, state or country, and ZIP + 4	<u> </u>	Gross receipts	s\$ 85,701
″ <u> </u>	Amended return	tions. North Little Rock AR 72115-0535			
X	Application pending	F Name and address of pnncipal officer] н	(a) Is this a g	
			ا ا	affiliates?	
3			"	(b) Are all aff included?	
ž —]	If "No," at	tach a list (see instructions)
<u>, </u>	Tax-exempt stat	tus X 501(c) (4) ◀ (Insert no) 4947(a)(1) or 527			
<u>J</u> '	Website: 🕨	N/A			emption number
K	Type of organizatio	n X Corporation Trust Association Other L Year	of formation 190	<u> 56 м</u>	State of legal domicile AR
	arti S	Gummary			
39.4	_	describe the organization's mission or most significant activities			
டு	To	improve the standing of enlisted Guard members			
~ã					
FFB 2 5 & Governance		STATUTE UNI	IT		
ر ق م	2 Check t	this box 🕨 🔲 if the organization discontinued its operations or disposed 🗱 🕳 📆	% of its assets		
8	3 Numbe	r of voting members of the governing body (Part VI, line 1a)			14
5 0 9 Activities	4 Numbe	r of independent voting members of the governing body (Part VI, line 1b) FEB $$ 2 $$ 2015	}	4	14
vit	5 Total nu	umber of employees (Part V, line 2a)	Н	5	0
Act	6 Total ni	umber of volunteers (estimate if necessary)		6	
7	7a Total gr	ross unrelated business revenue from Part VIII, line 12, column (C)		7a	50,041
5 —	b Net unr	related business taxable income from Form 990-T, line 34		7b	12,359
9			Pnor Year	<u> </u>	Current Year
اة بم	l	utions and grants (Part VIII, line 1h)	106	500	00 166
4 3 Revenue	1	m service revenue (Part VIII, line 2g)	126		90,166
Şe,		nent income (Part VIII, column (A), lines 3, 4, and 7d)		, 335	3,058
_		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,285	<u>-7,523</u>
		evenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	137	,481	85,701
		and similar amounts paid (Part IX, column (A), lines 1-3)			
		s paid to or for members (Part IX, column (A), line 4)			
es S		s, other compensation, employee benefits (Part IX, column (A), lines 5–10)			
Sylvanses	1	sional fundraising fees (Part IX, column (A), line 11e)		 -	
ညည္ကို		undraising expenses (Part IX, column (D), line 25) ► 41,726	416	603	72 047
- "		expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		, 603	73,847
Œ	18 lotale	xpenses Add lines 13-17 (must equal Part IX, column (A), line 25)		,603 ,878	73,847
ng/ F F P atrAssets or A Balances	19 Revent	ue less expenses Subtract line 18 from line 12	Beginning of Y		11,854 End of Year
ets c	20 Total a	ssets (Part X, line 16)		,178	143,032
2 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	21 Total In	abilities (Part X, line 10)			= -3,002
in Batching/ Irres (Arkadasse)	22 Net 200	sets or fund balances Subtract line 21 from line 20	131	,178	143,032
äį g		Signature Block			
@ ♥		Inder penalties of penjury, I declare that I have examined this return, including accompanying schedules and	d statements and	to the hest	of my knowledge
<u> </u>		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all inform-			
္ဗန္တာ	ın l	CAL DO LICE		173	SED ONIN
ပ္တန္တြင္ ကြွ He	re	Signature of officer	-	Date	
	· ·	STPOMONIP MATAPANAPT			
		Type or print name and title			
	- _	Data	Check if		Preparer's identifying number
Pai	141	Preparer's 9/06/	solf_	🗀 l	(see instructions) P00299466
Pre	eparer's ⊢ੌ		12 employed		EUUZ33400
	e Only	Times name (or yours t		EIN	<u> </u>
	- ıf	f self-employed), 415 North McKinley, Suite 1100 Little Rock, AR 72205		Phone	
N.4				no 🕨	
ivia	y ine iKS aisc	cuss this return with the preparer shown above? (see instructions)			Yes No

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

Form **990** (2008)

Statement of	r Program Service	e Accomplishments	(see instructions)

1 Briefly describe the organization's mission

To impro	ve the standing of	of enlisted Guard member	:s	
the prior Form	n 990 or 990-EZ?	program services during the year which were not	listed on	Yes X No
3 Did the organ services?		e significant changes in how it conducts, any pro	gram	Yes X No
4 Describe the Section 501(c)(3) and 501(c)(4) organizations a	Or each of the organization's three largest program and section 4947(a)(1) trusts are required to repose the section 4947 (a)(1) trusts are required to repose the section and the section are reported to the section and the section are reported to the section and the section are reported to the section are rep	rt the amount of grants and	
the enlialso in the National These efformembers to the mattending	ociation works to sted National Gua obtaining additional Guard Associated forts include a sof the associaited members; executive	statewide convention for on; distribution of a ne e officers and board mer onal conferences to fur	nnity and fforts of the ewsletter abers)
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
. •	m services (Describe in Schedule		David & B	
(Expenses :	sm service expenses ► \$	uding grants of \$) (I 27,454 (Must equal Part IX, Line	Revenue \$ 25, column (B))	

Part IV Checklist of Required Schedules

Form 990 (2008) Enlisted Assoc of AR National Guard 71-0393457

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	\vdash	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
_	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			
_	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_ ا		X
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		A
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	6		x
7	Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	"		
7	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,"	\ <u>'</u>		
0	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	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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	x	
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		X
13	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	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	ļ	1	
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	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	ļ	X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	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>	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		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			.
	Schedule J	23		X
24a	· · · · · · · · · · · · · · · · · · ·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions	24a	1	x
_	24b–24d and complete Schedule K If "No," go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u>* </u>
b c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240	1	
·	to defease any tax-exempt bonds?	24c	1	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	†	1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1-10		<u> </u>
_va	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		x
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		For	m 990	(2008

Part IV 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			
а	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>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
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		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? 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		
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		X

Form **990** (2008)

Form 990 (2008) Enlisted Assoc of AR National Guard 71-0393457

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
-					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1				
	U.S. Information Returns. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable	9			
	gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?		2b		
	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	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthorit	ty			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina					
	account)?			4a		X
b	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	3ank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		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
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributio	ns or			ł	
	gifts were not tax deductible?			6b		<u> </u>
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		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S				
	required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		4		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a po	ersona	nl			l
	benefit contract?			7e		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?			7 <u>g</u>		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as				٠,,
	required?			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect					
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon	soring			1	
_	organization, have excess business holdings at any time during the year?			8	-	-
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				1	
a	Did the organization make any taxable distributions under section 4966?			9a 9b	 	_
b	Did the organization make a distribution to a donor, donor advisor, or related person?			30	ļ	
10	Section 501(c)(7) organizations. Enter	10a				
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts included on Form 990, Part VIII, line 12, for public use of club facilities	10a		1		
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	[100]		1		
11	Gross income from members or shareholders	11a				
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	''a		1		
J	amounts due or received from them)	11ь				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form)	12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		1	 	
	The state of the section of the section interior to the section of		·	· · · · · · · · · · · · · · · · · · ·		•

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	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe	e the					
	circumstances, processes, or changes in Schedule O See instructions	l i					
1a	Enter the number of voting members of the governing body	1a_	14				
b	Enter the number of voting members that are independent	1b	14				
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		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	dırect			}		
	supervision of officers, directors or trustees, or key employees to a management company or other pe	erson?			3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior For	m 990	was fi	led?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	s?			5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers					
	of the governing body?				7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other personal by the stockholders and stockholders.	ons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken d	lurıng					
	the year by the following						
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9a	Does the organization have local chapters, branches, or affiliates?				9a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such of	hapter	S,				
	affiliates, and branches to ensure their operations are consistent with those of the organization?				9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	janizat	ions			'	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re-	eached	l at				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		X
<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	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ld give	!				
	nse to conflicts?				12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes,"					
	describe in Schedule O how this is done				12c	ļ	X
13	Does the organization have a written whistleblower policy?				13		X
14	Does the organization have a written document retention and destruction policy?				14	ļ	X
15	Did the process for determining compensation of the following persons include a review and approva						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation ar	id deci	sion		ŀ		
а	The organization's CEO, Executive Director, or top management official?				15a		X
b	Other officers or key employees of the organization?				15b		X
	Describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent					
	with a taxable entity during the year?				16a		X
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval						
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to sa	teguar	d			1	
_	the organization's exempt status with respect to such arrangements?				16b		L
	tion C. Disclosure		_				
17	List the states with which a copy of this Form 990 is required to be filed AR						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T	(501(c)(3)s c	nly)			
	available for public inspection. Indicate how you make these available. Check all that apply						
	Own website	_	_				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict	of inte	rest			
	policy, and financial statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books at			the			
_	organization ► SGT Stephanie Hernandez 2975 Spring				E01 01	2 -	
_ <u>M</u>	abelvale	AR 7	/210	13	501-21	<u>. </u>	007

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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

Check this box if the o	(B)	T			. <u>,</u> C)		1	trustee, or key employee (D)	(E)	(F)
Name and Title	Average hours per	individual trustee or director		chec	k all	that a	pply)	Reportable compensation	Reportable compensation	Estimated amount of
	week		Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MSgt Myra Cı										
President	1	<u> </u>			<u> </u>	ļ		0	0	0
MSG Ken Gill	more									
Past Pres.	1		<u> </u>					0	0	0
SMSgt John I										
Director	1	ļ		_	_	<u> </u>		0	0	0
SGT Maryah (sborn							_	_	
Treasurer	11	.				<u> </u>		0	0	0
SRA Michelle	Romp									
Director		—	ļ					0	0	0
TSgt Kevin N	iller									
Director	. <u> </u>	<u> </u>		_	_	-	<u> </u>	0	0	0
SSG Jeffrey	J. Frisby						1		^	_
Director			-	╄	┾	+	├	0	0	0
SFC Kevin Da	vis							0	0	o
Director SFC Ronald F		+	┢	₩	╁	+	┢	0	U	<u> </u>
Director	aynes							0	o	o
SFC Cliff Wi	nherm	1	╁─	╁	+	+	┢	 		
Director	Imerry		1					0	0	o
SMSgt Michae	l Lenahan	+	╁	+	+	+				
2nd Vice Pre		+						0	o	o
Msgt Joyce N	I. Jackson	+	1	十一	1	\top	1		<u>-</u>	
Director	[0	0	l o
1Sgt Don Bre	shears	1	†		1		Ì			
Director		1		1				0	0	l
SSG Regina I	owell					Ì				
1st Vice Pre			$oxed{igspace}$					0	0	0
		1	1	1	\dagger	T	+			
 		+	+	+	+		-			
				1	1					

									Guard 71-039 and Highest Compensated		-	_	Pa	ige
art V	(A)	(B)	rustee	s, r.e		npic C)	yees	, an	(D)	(E)		——— F)		
Na	me and title	Average hours per week	o Individual trustee o or director	_			Highest compensated employee	Former		Reportable compensation from related organizations (W-2/1099-MISC)	Estur amo ot compe fror organ	nated unt of her ensation the ization	nc n t	
	· · · · · · · · · · · · · · · · · · ·													
													_	
												 .		
	·-			-	i									
			-	_				_						
1b To				<u> </u>										
	tal number of ind anization ▶ 0	lividuals (including thos	e in 1a)	who	rece	eived	l mor	re th	an \$100,000 in reportable	compensation from the		1,7		
3 Dic	the organization	n list any former officer	, directo	or or	trust	ee, l	ey e	mple	oyee, or highest compensa	ited		Y	es	No
4 Fo	r any individual li		sum of r	eport	table	con	npen	satio	on and other compensationes," complete Schedule J fo		3			X
ind 5 Did	ividual I any person liste	•	accrue	com	pens	satio	n froi	m ar	ny unrelated organization fo		5		\dashv	x x
	B. Independen		100, 00	, iiipic	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	70710	34.0	0 10.						
		e for your five highest con the organization	ompens	ated	ınde	pen	dent	cont	tractors that received more	than \$100,000 of				
		(A) Name and business addres	s					<u> </u>	Descri	(B) plion of services		Compe	C) ensatio	חכ
								+						
					<u>. </u>									
	 								- , - , - ,					
		dependent contractors (ıncludır	g the	ose i	n 1)	who	rece	eived more than \$100,000 i	ın		0		

Form 990 (2008) Enlisted Assoc of AR National Guard 71-0393457

Pa	rt VI	II Statement of Rev	/enue					
					(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					Total Tovolido	exempt	business	excluded from tax
						function revenue	revenue	under sections 512, 513, or 514
इंद	1a	Federated campaigns	1a					<u> </u>
E P	b	Membership dues	1b					
S, C	С	Fundraising events	1c					
뺼	d	Related organizations	1d					
S.E.	е	Government grants (contributions)	1e				[
흕	f	All other contributions, gifts, grants,						
듗휨		and similar amounts not included above	1f					
ng	g	Noncash contributions included in lines	1a-1f \$					
Q @	h	Total. Add lines 1a-1f						
Program Service Revenue Contributions, gifts, grants and other similar amounts				Busn. Code				
ě	2a	Statewide conf bk		511120	48,682		48,682	
2	b	Membership dues			40,125	40,125		·
<u>ĕ</u>	C	Life Ins. commissi	Lons	524298	1,359		1,359	
Ser	d							
E	е							
ᅙ	f	All other program service re-	venue					
_	g	Total. Add lines 2a-2f		•	90,166			
	3	Investment income (includin	ig dividends, inter	est, and				
		other similar amounts)		. ▶ -	3,058			3,058
	4	Income from investment of t	ax-exempt bond	proceeds P				· · · · · · · · · · · · · · · · · · ·
	5	Royalties		Para and				
	•	(ı) Rea	(11)	Personal	-			
	6a	Gross Rents						
	b	Less rental exps	-					
	C	Rental inc or (loss)				1		
	d 7a	Gross amount from (i) Securi	ties (ii) Other				
		sales of assets	laco (., o				
	b	other than inventory Less cost or other						
		basis & sales exps						
	c	Gain or (loss)						
	d	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	•	Í	1		
		Gross income from fundraising e	events					
e '		(not including \$						
len.		of contributions reported on line	1c)	İ				
Re)		See Part IV, line 18	а					
Other Revenue	b	Less direct expenses	b					
	С	Net income or (loss) from fu	ındraising events	•				
	9a	Gross income from gaming activ	rities					
		See Part IV, line 19	a					
	b	Less direct expenses	b					
	С	Net income or (loss) from g	aming activities	•				
	10a	Gross sales of inventory, les	ss	Ī				
		returns and allowances	a					
		Less cost of goods sold	b					
	С	Net income or (loss) from s		<u> </u>				
	<u> </u>	Miscellaneous Reve	nue	Busn. Code		1		
	11a	Fundraising events		 	-7,523			-7,523
	b							 _
	C	A 11 41	•	 +				
	d				7 500			
	e	Total. Add lines 11a-11d	L 0_ 0 4 5 0:	74 00	-7,523			:
	12	Total Revenue. Add lines 1	n, ∠g, 3, 4, 5, 6d,		95 701	40 125	50,041	-4,465
	L	9c, 10c, and 11e			85,701	40,125	30,041	-4,405

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

		(,			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			G	
1	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				
5	Compensation of current officers, directors,				
•	trustees, and key employees				
6	Compensation not included above, to disqualified	-			
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
Ū	and section 403(b) employer contributions)				
9	Other employee benefits				-
10	Payroll taxes				
11	Fees for services (non-employees)				
'' a	Management				
	Legal				
b	Accounting				
d					
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
	- ·			-	
g 12				-	
13	Office expenses		-	-	
14	Information technology				
15	Royalties		_		
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,433		389	5,044
23	Insurance				
		······································			
24	Other expenses Itemize expenses not				
_•	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed		:		
	5% of total expenses shown on line 25 below				
а		36,682			36,682
b	National (EANGUS) dues	13,590			,
c	National (EANGUS) expense				
d	Printing and reproduction				
e	Postage	1,094		1,094	
f		2,720			
25	Total functional expenses. Add lines 1 through 24f				
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			1	
	fundraising solicitation				

Form 990 (2008)	Enlisted	Assoc	of AR	National	Guard	71-0393457

P	art)	Balance Sheet							
			·		(A) Beginning of year		(B) End of		
	1	Cash—non-interest bearing		"	24,354	1	1	L8,9	21
	2	Savings and temporary cash investments			83,428	2		01,2	
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net		<u> </u>		4			
	5	Receivables from current and former officers, directors, t	rustee	s kev		-			
		employees, or other related parties Complete Part II of S		· •		5			
	6	Receivables from other disqualified persons (as defined							
		4958(f)(1)) and persons described in section 4958(c)(3)(l		Į.					
		Part II of Schedule L	5, 50	pioto	•	6	İ		
w	7	Notes and loans receivable, net			100	7			100
et	8	Inventories for sale or use				<u> </u>	 		
Assets	9	Prepaid expenses and deferred charges				9	 		
٩	-	Land, buildings, and equipment cost basis	10a	45,953					
		Less accumulated depreciation Complete	IVa	40,755					
,		Part VI of Schedule D	10Ь	23,344	23,142	10c		22,€	509
	11	Investments—publicly traded securities	100	20,044	23,142	11	-	<u> , </u>	,00
	12	Investments—other securities See Part IV, line 11				12	1		
	13	Investments—program-related See Part IV, line 11		-		13	 		
	14	Intangible assets				14	+		
	15	Other assets See Part IV, line 11		-	154	15		- 1	L 54
	16	Total assets. Add lines 1 through 15 (must equal line 34	١.	-	131,178	16	1/	43,0	
	17	Accounts payable and accrued expenses	· <u>/</u>		131,170	17	<u> </u>	13,0	<u>, , , , , , , , , , , , , , , , , , , </u>
	18	Grants payable		 		18	+		
	19	Deferred revenue		-		19	 		
	20	Tax-exempt bond liabilities				20	+		
S	l	Escrow account liability Complete Part IV of Schedule D		-		21	+		
itie	21	·		<i>,</i>		21	 		
Liabilities	22	Payables to current and former officers, directors, truster employees, highest compensated employees, and disqu		į.					
<u>.e</u>		persons Complete Part II of Schedule L	ailleu		;	22	1		
_	23	Secured mortgages and notes payable to unrelated third	l nartio			23	1		
	24	Unsecured notes and loans payable	partie	-		24	+		
	25	Other liabilities Complete Part X of Schedule D				25	+		
	26	Total liabilities. Add lines 17 through 25				26	†		
s	20	Organizations that follow SFAS 117, check here ▶	and	1		-20			•
ces		complete lines 27 through 29, and lines 33 and 34.	allo	'					
Balanc	27	Unrestricted net assets			131,178	27	1 14	43,0	132
Bal	28	Temporarily restricted net assets				28	 		
豆	29	Permanently restricted net assets				29	 		
5		Organizations that do not follow SFAS 117, check her	e▶「	ካ !					
or Fund		and complete lines 30 through 34.	٠, [-					
	30	Capital stock or trust principal, or current funds				30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment	t fund			31	†		
155	32	Retained earnings, endowment, accumulated income, or		funds		32	1		
يد	33	Total net assets or fund balances			131,178		1,	43,0	<u> </u>
ž	34	Total liabilities and net assets/fund balances			131,178			43,0	
P	art)	··········		L			<u> </u>		
					<u> </u>	-		Yes	No
1	Ac	counting method used to prepare the Form 990 🛛 🛣 C	ash	Accrual Oth	ner				
2	a W	ere the organization's financial statements compiled or rev	/iewed	by an independent accounta	ant?		2a		Х
1	b W	ere the organization's financial statements audited by an i	ndepe	ndent accountant?			2b		X
	c If'	Yes" to lines 2a or 2b, does the organization have a comr	nıttee	that assumes responsibility f	for oversight of				
	th	e audit, review, or compilation of its financial statements a	and se	lection of an independent ac	countant?		2c		
3	a As	a result of a federal award, was the organization required	l to une	dergo an audit or audits as s	et forth in			1	
	the	e Single Audit Act and OMB Circular A-133?					3a		
	b f'	Yes," did the organization undergo the required audit or a	udits?				3b		
								aan	(0000)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2008
Open to Public Inspection

Name of the organization

Employer identification number

141116	of the organization	\	Linploye	identification na	
Eı	nlisted Assoc of AR National Guard		71-03	393457	
	organizations Maintaining Donor Advised Further organization answered "Yes" to Form 990, I				ıf
	are organization anomored 100 to 10111 000, 1	(a) Donor advised funds	(b)	Funds and other ac	counts
1	Total number at end of year	(-,	(-)		
2	Aggregate contributions to (during year)				
3	Aggregate contributions to (during year) Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised		· · · · ·	
	funds are the organization's property, subject to the organization's excl			Yes	□ No
6	Did the organization inform all grantees, donors, and donor advisors in	•			
•	used only for charitable purposes and not for the benefit of the donor o	• •			
	impermissible private benefit?			Yes	☐ No
Pa	art II Conservation Easements. Complete if the orga	anization answered "Yes" to Forr	n 990. F		
1	Purpose(s) of conservation easements held by the organization (check	-		<u>, </u>	· · · · · · · · · · · · · · · · · · ·
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically imp	portant lan	d area	
	Protection of natural habitat	Preservation of certified historic s			
	Preservation of open space				
2	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
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		•
С	Number of conservation easements on a certified historic structure incl	luded in (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/17/	706	2d		
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizat	tion during	1	
	the taxable year				
4	Number of states where property subject to conservation easement is	located ▶			
5	Does the organization have a written policy regarding the periodic mon	itoring, inspection, violations, and			
	enforcement of the conservation easements it holds?				☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	ng easements during the year $lacksquare$ $lacksquare$ $lacksquare$			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	easements during the year $ black s$ $_$ $_$ $_$			
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section			\Box
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			∐ Yes	∐ No
9	In Part XIV, describe how the organization reports conservation easer				
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that d	lescribes		
_	the organization's accounting for conservation easements	Illiada di al Taranza da Odhani	0::!	A 4 -	
Pā	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to	Form 990. Part IV. line 8.	Similar i	Assets.	
	Complete if the organization answered Tes to	. Jili ood, i dit iv, ilio o.			·
4.	If the organization elected, as permitted under SFAS 116, not to report	t in its revenue statement and halance she	aat works	of	
ıd	art, historical treasures, or other similar assets held for public exhibition				
	provide, in Part XIV, the text of the footnote to its financial statements		. pasiio 36		
	provide, and are vitt, and toxe of the foothers to its infamous statements	and december these famile			
b	If the organization elected, as permitted under SFAS 116, to report in i	ts revenue statement and balance sheet	works of a	rt,	
2	historical treasures, or other similar assets held for public exhibition, e				
	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	r other similar assets for financial dain, or	ovide the	* – – -	
4	following amounts required to be reported under SFAS 116 relating to		OFIGE LITE		
	Revenues included in Form 990, Part VIII, line 1	uicoc iiciiio		\$	
d	Assets included in Form 990, Part X			\$: \$:	
D	ASSETS HIGHWEN III FUITI 330, FAIL A			° — — .	

Schedule Part		ssoc of AR Na					sets (con		age 2
	sing the organization's accession and other re						sets (COI	itiliueu)	
	ms (check all that apply)				it use of its	Collection			
a	Public exhibition	d Loan or	exchange progran	ns					
b L	Scholarly research	e 💹 Other					_		
c _	Preservation for future generations								
	ovide a description of the organization's colle art XIV	ections and explain how the	ey further the orga	nızatıon's	exempt pu	rpose in			
	uring the year, did the organization solicit or resets to be sold to raise funds rather than to b	e maintained as part of th	e organization's co	ollection?			Yes		No
Part	•				n answer	ed "Yes" to	Form 99	90,	
	Part IV, line 9, or reported an	n amount on Form 99	90, Part X, line	2 1.					
1a Is	the organization an agent, trustee, custodian	or other intermediary for o	contributions or otl	her assets	s not				
ind	cluded on Form 990, Part X?						Yes		No
b If	"Yes," explain the arrangement in Part XIV ar	nd complete the following t	able						
							Am	ount	
с Ве	eginning balance					1c			
d Ad	dditions during the year					1d			
e Di	stributions during the year					1e			
f Er	nding balance					1f			
2a Di	d the organization include an amount on For	m 990, Part X, line 21?					Yes		No
b_lf	"Yes," explain the arrangement in Part XIV								
Part	V Endowment Funds. Comple	te if organization an	swered "Yes"	to Form	า 990, Pa	rt IV, line 1	0.		
		(a) Current year	(b) Pnor year	(c) Two	years back	(d) Three year	s back (e)	Four years	back
1a Be	eginning of year balance								
b C	ontributions								
c In	vestment earnings or losses								
d G	rants or scholarships								
e O	ther expenditures for facilities								
ar	nd programs	<u> </u>							
f A	dministrative expenses								
	nd of year balance								
-	rovide the estimated percentage of the year e	end balance held as							
	oard designated or quasi-endowment	%							
	ermanent endowment ► %	_							
	erm endowment >								
3a A	re there endowment funds not in the possess	ion of the organization tha	t are held and adr	nınıstered	for the				
or	rganization by							Yes	No
(i)	unrelated organizations						3	a(i)	
(ii	i) related organizations						38	n(ii)	
b If	"Yes" to 3a(II), are the related organizations I	isted as required on Sche	dule R?					3b	
4 D	escribe in Part XIV the intended uses of the o	organization's endowment	funds						
Part				0, Part	X, line 1	0.			
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or of basis (othe		(c) De	preciation	(d) E	Book value	
1a L:	and			-			1		
	uildings								
	easehold improvements			·			1		
	quipment				-				-
	Other		45	, 953		23,344	Į l	22,	609
	Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, column (E	•			<u> </u>	1	22,	

Schedule D (Form 990) 2008 Enlisted Assoc of AR Part VII Investments—Other Securities. See Form 9		. 71-0393457 Page 3
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)	(5) 555% 12.25	Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
 	_	
	_	
	_	
	_	
 	_	
T. (.) (.) (.) (.) (.) (.) (.) (.) (.) (.		
10000 (00000 (0) 00000 0 quan (0) 000 (1) 000 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	000 Port V line 12	
Part VIII Investments—Program Related. See Form (a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
	+	-
		-
	L	······································
	>	
Part IX Other Assets. See Form 990, Part X, line 15	D	(h) Bartaurtus
(a) Description		(b) Book value
		
		-
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	0.5	
Part X Other Liabilities. See Form 990, Part X, line		
(a) Description of liability	(b) Amount	
Federal income taxes		
	 	
	<u> </u>	
	<u> </u>	

>

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for

Total. (Column (b) should equal Form 990, Part X, col (B) line 25)

uncertain tax positions under FIN 48

Sche	dule D (Form 990) 2008 Enlisted Assoc of AR National			7	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Fina	ncial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
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	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts V	ith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	,	ı		
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	ſ	1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)		18741 P	5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents	with Expenses per i	Ketur	<u>n</u>
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 .	1		
	Donated services and use of facilities	2a			
	Prior year adjustments	2b		ł	
	Losses reported on Form 990, Part IX, line 25	2c			
	Other (Describe in Part XIV)	2d		ا ہے ا	
_	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	ſ	1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	١			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
	Other (Describe in Part XIV)	_4b		40	
_	Add lines 4a and 4b			4c	
<u>5</u>	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) Int XIV Supplemental Information	ч-		_ 5	l
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	200 12	and 4 Part IV lines 1h		
	piete this part to provide the descriptions required for Part II, lines 3, 3, and 9, Part III, lines 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d				
anu	20, Fait V, lille 4, Fait A, Fait Ai, lille 6, Fait Aii, lilles 20 aile 40, aile Fait Ain, lilles 20	and 4	•		
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Part XIV Supplemental information (continues)	Schedule D (F	om 990) 200	8 Enl	listed	Assoc	of i	AR	Nat:	iona	l Gւ	larc	71	03	<u>934</u>	57					Pag	je 5
	Part XIV	Supplem	ental In	form <u>atio</u>	n (continued)													_		
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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

Enlisted Assoc of AR National Guard

Employer identification number 71-0393457

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 Draft return provided to treasurer prior to filing.

			Special Eve	nts Schedu	le		7	
Form 99	0		•					2008
		For calendar year 2008, o	or tax year beginning		, and	ending		
lame							Employe	r Identification Number
Enliste	d Ass	oc of AR Nati	onal Guard				71-03	393457
-		(A)	(B)	(C)		Others		Total
Gross receipt	s	26,813	0		0		0	26,813
Less contrib	outions	0	0		0			
Gross revenu	е	26,813	0		0		0	26,813
Less direct	expenses	34,336	0		0		<u> </u>	34,336
Net income (le	oss)	7,523	0		<u> </u>		<u> </u>	-7,523
Description	(A) (B)	Fundraising	events					
	(6)							
	(C)							
	Others							
								

Forms	Othe	er Notes and	Loans Receiv	able	2008
990 / 990-PF	For calendar year 2008, or	tax vear beginning		and ending	2006
lame	Tot cateman jour accepts.	<u></u>			ployer Identification Number
Enlisted Asso	oc of AR Nationa	1 Guard		71	0393457
Form 990, Pai	rt X, Line 7 - A	dditional	Information	<u>n</u>	
	Name of borrower			Relationship to disqualit	fied person
 Other recei 	<u>ivables</u>				
2)					
	- <u>,, , , , , , , , , , , , , , , , , , ,</u>			 	
					<u>.</u>
5)					
			 		
7)			 		
3)			 		
9)					
10)					······································
Original amount	t	Matunty			Interest
borrowed	Date of loan	date	Re	epayment terms	rate
1)					
2)					
3)					
4)					
5)					
6)					
7)					
8)					
9)					
10)		 			
	curity provided by borrower			Purpose of loar	<u>1</u>
1) 2)	S 100				
3)					
4)					· · · · · · · · · · · · · · · · · · ·
5)					
6)			_		
7)					
8)		·		· · · · · · · · · · · · · · · · · · ·	
9)	· · · · · · · · · · · · · · · · · ·	·			
(10)					
0	ation from the difference of the		Balance due at	Balance due at	Fair market value
Consider	ation furnished by lender		beginning of year	end of year	(990-PF only)

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)	100	100	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Totals	100	100	