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#### 1 Form-J90

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)

2008

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

Open to Public Inspection

4	A Fo	or the	2008 calendar year, or tax year beginning MAY 1, 2008 and ending	APR 30, 2009	
E		eck if plicable	Please use IRS	D Employer identific	cation number
		Address change Name	THE NATIONAL BOOK FOUNDATION INC.		247524
		Name Ichange Initial	Doing Business As		347524
	_	return Termin-	See Number and street (or P.O. box if mail is not delivered to street address) Room/st	· ·	
	$\vdash$	ation Amende	Specific 95 MADISON AVENUE 709		685 0261
		return Applica-	City or town, state or country, and ZIP + 4	G Gross receipts \$	2,403,301.
		tion	NEW TORK, NI 10016	H(a) Is this a group re	
		. •	F Name and address of principal officer HAROLD AUGENBRAUM	for affiliates?	Yes X No
-			SAME AS C ABOVE	H(b) Are all affiliates inc	
			mpt status X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527		list (see instructions)
			e:	H(c) Group exemption	N State of legal domicile: NY
			Summary	ear or formation. 1960 N	A State of legal doffliche, IN I
	$\neg$		Briefly describe the organization's mission or most significant activities THE MISS	TON OF THE NA	TTONAL BOOK
	Governance		FOUNDATION AND THE NATIONAL BOOK AWARDS IS T		
	ia	_	Check this box  if the organization discontinued its operations or disposed of m		
	ě		lumber of voting members of the governing body (Part VI, line 1a)	3	18
			lumber of independent voting members of the governing body (Part VI, line 1b)	4	18
	8		otal number of employees (Part V, line 2a)	5	7
	ję		otal number of volunteers (estimate if necessary)	6	0
	Activities &		otal gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	۲		let unrelated business taxable income from Form 990-T, line 34	7b	0.
_				Prior Year	Current Year
Û	<b>a</b>	<b>8</b> C	Contributions and grants (Part VIII, line 1h)	848,546.	901,745.
2010	Revenue	<b>9</b> P	Program service revenue (Part VIII, line 2g)	267,755.	248,561.
	ě	10 In	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	202,270.	-340,045.
ണ	-	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c-9c, 10c, and 11e)	647.	1,916.
چ_			otal revenue · add lines 8 through 11 (must equal Part VIII, column (A) line 12 - 0	1,319,218.	812,177.
MAR		<b>13</b> G	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	76,000.	77,000.
	ł	<b>14</b> B	Brants and similar amounts paid (Part IX, column (A), lines 1-3)  Benefits paid to or for members (Part IX, column (A), dine 4), AR 1 2 2010		
SCANNED	es	<b>15</b> S	calaries, other compensation, employee benefits (Part X, column (A), lines 5:10)	474,836.	501,474.
Z	Expenses		Professional fundraising fees (Part IX, column (A), line 14e)		
Ķ	Ř		otal fundraising expenses (Part IX, column (D), line 25)		
တ္တ	٦,		Other expenses (Part IX, column (A), lines 11a-11d, 14f-24f)	597,018.	585,286.
	1		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,147,854.	1,163,760.
		19 R	Revenue less expenses Subtract line 18 from line 12	171,364.	-351,583.
9	Fund Balances			Beginning of Year	End of Year
9	Bass		otal assets (Part X, line 16)	2,926,995. 18,000.	2,120,888. 40,236.
3			otal liabilities (Part X, line 26)	2,908,995.	2,080,652.
		$\overline{}$	let assets or fund balances Subtract line 21 from line 20 Signature Block	2,300,333.	2,000,032.
Ĺ			Under penalties of perjunt I declare that I have examined this return, including accompanying schedules and stateme and complete. Declarate of preparer (other year officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowled	ge and belief, it is true, correct,
		•	and complete Declaration of preparer (other yan officer) is based on all information of which preparer has any knowle		_
ç	Sign		-Hardle	3-10	-2010
	lere	11	Signature of officer	Date	
			► HAROLD AUGENBRAUM		
_			Type or print name and title		
_	1-:4		Preparer's M D D D Date	Check if Prepar	er's identifying number structions)
	aid 'aid	' . L.	signature Pluchael Wallace, CPA 3/10/10	employed > Po	088/938
	repa Jse (	1	Firm's name (or LUTZ AND CARR, CPAS LLP	EIN ►	
٠	,36 (	ן עיייי	self-employed). 300 EAST 42ND STREET		
_			NEW YORK, NY 10017	Phone no. ► 2	12-697-2299
N	Лау	the IRS	S discuss this return with the preparer shown above? (see instructions)		X Yes No

٠,٠	Y(2008) THE NATIONAL BOOK FOUNDATION INC. 13-3347524 Page 2
Par	till Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATION
•	THE MISSION OF THE NATIONAL BOOK FOUNDATION AND THE NATIONAL BOOK
	AWARDS IS TO CELEBRATE THE BEST OF AMERICAN LITERATURE, TO EXPAND ITS
	AUDIENCE, AND TO ENHANCE THE CULTURAL VALUE OF GOOD WRITING IN
	AMERICA. THE FOUNDATION'S STRATEGIES INCLUDE RECOGNITION OF LITERARY
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes", describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes", describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported  SEE SCHEDULE O FOR CONTINUATION(S)
40	77 000 027
+a	(Code ) (Expenses \$ 909,837. including grants of \$ 77,000.) (Revenue \$ 248,561.)  NATIONAL BOOK AWARDS
	MATIONIE BOOK IMINED
	FOUNDED IN 1950, THE NATIONAL BOOK AWARDS HAVE LONG BEEN ESTABLISHED AS
	ONE OF AMERICA'S MOST SIGNIFICANT SYMBOLS OF LITERARY EXCELLENCE. A
	PANTHEON OF SUCH WRITERS AS WILLIAM FAULKNER, MARIANNE MOORE, RALPH
	ELLISON, JOHN CHEEVER, BERNARD MALAMUD, PHILIP ROTH, ROBERT LOWELL,
	WALKER PERCY, JOHN UPDIKE, KATHERINE ANNE PORTER, NORMAN MAILER,
	LILLIAN HELLMAN, ELIZABETH BISHOP, SAUL BELLOW, DONALD BARTHELME,
	FLANNERY O'CONNOR, ADRIENNE RICH, THOMAS PYNCHON, ISAAC BASHEVIS
	SINGER, ALICE WALKER AND E. ANNIE PROULX HAVE ALL WON THE AWARD, EACH
	SELECTED BY A PANEL OF PEER WRITERS. AWARDS ARE PRESENTED IN FOUR
	CATEGORIES: FICTION, NON-FICTION, POETRY, AND YOUNG PEOPLE'S
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e_	Total program service expenses ▶\$ 909,837. (Must equal Part IX, Line 25, column (B))
	Form <b>990</b> (2008)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		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	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, 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	Х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S ? If "Yes," complete Schedule F, Part I	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			l <u></u>
	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			۱,,
	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	v	X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	Х
19 00	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  Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	20 21		X
21	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	
22 23	Did the organization report more than \$3,000 on Part IX, colditin (A), line 2 * ii * res, * complete Schedule J.  Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes, * complete Schedule J.	23	X	<b>—</b> —
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
e.70	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K	1		
	If "No", go to question 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ĭ	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		-	
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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>	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
		Form	gan /	'onno

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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		_X_
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		X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	_30		Х
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 7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	<u>'</u>		
	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		X
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
		_	000	

Form **990** (2008)

a	if Yes, indicate the number of Forms 6262 filed during the year	/a
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	personal
	benefit contract?	
f	Did the organization, during the year, pay premiums, directly or indirectly on a personal benefit con-	tract?

For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?

Did the organization make a distribution to a donor, donor advisor, or related person?

Section 501(c)(7) organizations. Enter N/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

Section 501(c)(12) organizations. Enter N/A a Gross income from members or shareholders

Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

10a 10b 11a 11b 12a

Form 990 (2008)

Х

Х

7e

7f

7g

7h

8

9a

9b

Form 990 (2008) THE NATIONAL BOOK FOUNDATION INC. 13-3347524 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 the circumstances,			
	processes, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body  1a 1			
b	Enter the number of voting members that are independent  1b  1b	켁		
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>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		7.7
	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	ļ	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	ļ	X
6	Does the organization have members or stockholders?	6		_X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	_		v
	governing body?	7a		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following The appropriate hadre?		х	
a	The governing body?	8a	^	v
b O-	Each committee with authority to act on behalf of the governing body?	8b 9a		X
9a	Does the organization have local chapters, branches, or affiliates?  If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	94		
ь	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	90		
10	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	x	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
••	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Х
Sec	tion B. Policies		·	
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		_X_
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		_X_
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	İ		
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available subtraction and section are secti	e ior		
	public inspection. Indicate how you make these available. Check all that apply  Own website			
10		and for-	nosel	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public	and IIM	ırıcıal	
20	statements available to the public  State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation •		
20	HAROLD AUGENBRAUM - 212-685-0261	ACIO11		<del></del>
	95 MADISON AVE-SUITE 709, NEW YORK, NY 10016			
33200			000	(2008)

### 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 organization did not		<u>ıy o</u>	fice			or, tr	uste		<del>,</del>	
(A)	(B)	1	(C) Position (check all that apply)			(D)	(E)	(F)		
Name and Title	Average	,				Reportable	Reportable	Estimated		
	hours	H	nec	k all	tnat	app	iy)	compensation from	compensation from related	amount of other
	week	Individual trustee or director						the	organizations	compensation
		[ 5 6	, e	1		ated		organization	(W-2/1099-MISC)	from the
		ustee	trust		ಕ್ಷ	bens		(W-2/1099-MISC)		organization
	ł	lag f	tional		p d	že Š	_			and related
		P P	Institutional trustee	Officer	Key er	Highest compensated employee	Form			organizations
QUANG BAO	<del>                                     </del>	┢╌	-	-				1		
BOARD MEMBER	1.00	X	<u> </u>			ļ		0.	0.	0.
JAMIE CAREY										
BOARD MEMBER	1.00	x						0.	0.	0.
DAVID DRUMMOND										
BOARD MEMBER	1.00	X	_					0.	0.	0.
MORGAN ENTREKIN										
BOARD VICE CHAIRMAN	1.00	X		X		<u> </u>		0.	0.	0.
JESSICA HAGEDORN	1									
BOARD MEMBER	1.00	X	L		<u> </u>	ļ		0.	0.	0.
SUSAN PETERSEN KENNEDY										
BOARD MEMBER	1.00	X	_	<u> </u>	<u> </u>	<u> </u>		0.	0.	0.
PAUL LECLERC			1				Ì			
BOARD MEMBER	1.00	X	ļ	<u> </u>	ļ	<u> </u>	_	0.	0.	0.
STEVEN LEVEEN	1			ľ			ĺ		_	
BOARD MEMBER	1.00	X	┡	ļ	_	<u> </u>		0.	0.	0.
LES B. LEVI		}		1	l				_ :	
BOARD MEMBER	1.00	X		<u> </u>	<u> </u>	↓_	_	0.	0.	0.
RON MARSHALL										_
BOARD MEMBER	1.00	<u>  X</u>	<u> </u>	<u> </u>	<b>├</b>	₩	<u> </u>	0.	0.	0.
W. DRAKE MCFEELY				}					•	
BOARD MEMBER	1.00	X	—	<b>.</b>	<del> </del> -	$\vdash$	<u> </u>	0.	0.	0.
LYNN NESBIT	1			Ì						•
BOARD MEMBER	1.00	X	╄-	<u> </u>	<u> </u>	┼	_	0.	0.	0.
CAROLYN K. REIDY	1 00	]	1	Ì	ļ				•	
BOARD MEMBER	1.00	X	$\vdash$	<del> </del>	├	╀		0.	0.	0.
SANDRA SILVERMAN	1	l								
BOARD TREASURER	1.00	X	-	X	ļ	┿		0.	0.	0.
CALVIN SIMS	1 00	1	1	ŀ					0	
BOARD MEMBER	1.00	X	$\vdash$	<del> </del>		<del> </del>	├-	0.	0.	0.
DAVID STEINBERGER	1 1 00	,,							^	•
BOARD CHAIRMAN	1.00	X	$\vdash$	X	-	-	-	0.	0.	0.
ELPIDIO VILLARREAL	1 00	7.		1	1				^	_
BOARD MEMBER	1.00	X				1		0.	0.	0.

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Form 990 (2008)

(B) Average	İ		•	C)			(D)	(E)	i		(F)	
Average	1								(E)			
l 6	Position						Reportable	Reportable			timate	
per week	Individual frustee or director	Institutional trustee					compensation from the organization (W-2/1099-MISC)	from relate organization	d ns	com fr org and	other pensa om th anizat d relat	ation le tion ted
1.00	х						0.		0.			0.
1.00	X			_	_		0.		0.			0.
40.00	-		x				202,552.		0.	1	3,8	48.
											-	
					<b>&gt;</b>		·		0.	1	3,8	48
se in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0	000 in reportable		<b>•</b>		Ves	No
such individual	'								1	3		х
50,000? If "Yes	," co	mpl	ete S	Sche	edule	e J f	or such individual	Ü		4	Х	
dule J for such	pers	on								5		X
compensated in	dep	ende	ent c	ontr	acto	ors t	hat received more than	\$100,000 of co	mpens	ation t	rom	
s address							(B)	services				
	-											
(malustus II		1)	he				o than \$100,000					
	1.00 1.00 40.00 40.00  ase in 1a) who reser, director or true resuch individual sum of reportate 50,000? If "Yes or accrue compensated in compensated in ass address	per week  1.00 X  1.00 X  1.00 X  40.00  See in 1a) who receives a such individual sum of reportable compensate adule J for such personal compensated independences and the such individual sum of such personal compensated independences and the such personal such person	per week  1.00 X  1.00 X  1.00 X  40.00  See in 1a) who received in the ser, director or trustee, ker such individual sum of reportable compensation or accrue compensation fedule J for such person compensated independences and the sex address	per week  1.00 X  1.00 X  1.00 X  40.00 X  40.00 X  40.00 Firector or trustee, key en r such individual sum of reportable compensation from edule J for such person compensated independent of the said of the sai	per week  1.00 X  1.00 X  1.00 X  40.00 X  40.00 X  40.00 Trustee, key employer such individual sum of reportable compensation from any edule J for such person compensated independent contress address	per week  1.00 X  1.00 X  1.00 X  40.00 X  40.00 X  40.00 III III III III III III III III III	per week  1.00 X  1.00 X  1.00 X  40.00	per week    100   X     100   X     100	per week    100	per week    Part   per week	regard to the compensation from the organization (W-2/1099-MISC)  1.00 X	

0

Form 990 (2008) THE NATIONAL
Part IX Statement of Functional Expenses

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

	All other organizations must comp	and 501(c)(4) organizat lete column (A) but are			(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	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	77,000.	77,000.		
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	210,852.	126,511.	21,085.	63,256.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		242 225	10 607	10.040
7	Other salaries and wages	240,732.	210,095.	19,697.	10,940.
8	Pension plan contributions (include section 401(k)	2 505	2 4 5 2	350	1 076
	and section 403(b) employer contributions)	3,587.	<u>2,152.</u>	359.	1,076.
9	Other employee benefits	18,412.	16,430.	1,482.	500. 4,463.
10	Payroll taxes	27,891.	20,918.	2,510.	4,403.
11	Fees for services (non-employees)				
a	Management				<del></del>
b	Legal	22,504.		22,504.	
	Accounting	22,504.		22,304.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	13,427.		13,427.	
9	Other Advertising and promotion	56,068.	53,170.	2,545.	353.
12	j ,	156,023.	131,782.	12,956.	11,285.
13	Office expenses Information technology	2,071.	2,071.	12,550.	11,200.
14 15	Royalties	2,0,1.	2,011.		
16	Occupancy	99,600.	74,530.	9,340.	15,730.
17	Travel	39,040.	39,040.		
18	Payments of travel or entertainment expenses	02/020	05/050	-	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	27,820.	20,866.	2,504.	4,450.
23	Insurance	12,785.		12,785.	- +
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.)	127,571.	127,571.	0.	0.
a	HONORARIA	20,676.	0.	0.	20,676.
b	INDIRECT AWARD DINNER E	4,738.	4,738.	0.	20,676.
C	PHOTOGRAPHY INTERNS AND COUNSELOR F	2,963.	2,963.	0.	0.
d	THIERING WAND COUNSETON L	2,303.	4,303.		<u> </u>
e •	All other expenses				
f 25	Total functional expenses. Add lines 1 through 24f	1,163,760.	909,837.	121,194.	132,729.
25 26	Joint Costs Check here I if following	1,100,7000	202,031.		
20	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

832010 12-18-08

Form **990** (2008)

		Data Toy Oncot	(A) Beginning of year		(B) End of year					
	_	Cook and interest begans	283,979.	1	295,121.					
	1	Cash - non-interest-bearing	203,919.	2	275,121.					
	2	Savings and temporary cash investments	20,420.	3	87,500.					
	3	Pledges and grants receivable, net	1,750.	4	3,750.					
	4	Accounts receivable, net	1,750	-	3,730.					
	5	Receivables from current and former officers, directors, trustees, key		5						
	_	employees, or other related parties. Complete Part II of Schedule L	<del> </del>	3						
	6	Receivables from other disqualified persons (as defined under section	1							
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		6						
	_	Part II of Schedule L		7						
ets	7	Notes and loans receivable, net		8						
Assets	8	Inventories for sale or use Prepaid expenses and deferred charges	23,814.	9	8,814.					
	9	Land, buildings, and equipment cost basis 10a 376,783		-	0,011.					
		Less accumulated depreciation Complete		-						
		Part VI of Schedule D 10b 319, 378	85,225.	10c	57,405.					
	11	Investments - publicly traded securities	2,462,940.	11	1,619,431.					
	12	Investments - other securities See Part IV, line 11	2/102/3101	12						
	13	Investments - program-related See Part IV, line 11		13	***************************************					
	14	Intangible assets		14						
	15	Other assets See Part IV, line 11	48,867.	15	48,867.					
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,926,995.	16	2,120,888.					
	17	Accounts payable and accrued expenses	18,000.	17	40,236.					
	18	Grants payable		18						
	19	Deferred revenue		19						
	20	Tax-exempt bond liabilities		20						
ý	21	Escrow account liability Complete Part IV of Schedule D		21						
ite	22	Payables to current and former officers, directors, trustees, key employees,								
Liabilities	1	highest compensated employees, and disqualified persons. Complete Part II								
ت		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		25						
	26	Total liabilities. Add lines 17 through 25	18,000.	26	40,236.					
		Organizations that follow SFAS 117, check here   X and complete								
ŝ		lines 27 through 29, and lines 33 and 34.	0 550 005		4 542 450					
and	27	Unrestricted net assets	2,658,995.	27	1,743,152.					
Bal	28	Temporarily restricted net assets	250,000	28	87,500.					
Fund Balance	29	Permanently restricted net assets	250,000.	29	250,000.					
		Organizations that do not follow SFAS 117, check here								
Net Assets or		complete lines 30 through 34.		-						
set	30	Capital stock or trust principal, or current funds		30						
As	31	Paid in or capital surplus, or land, building, or equipment fund		31						
ě	32	Retained earnings, endowment, accumulated income, or other funds	2 000 005	32	2,080,652.					
_	33	Total net assets or fund balances	2,908,995. 2,926,995.	33 34	2,120,888.					
Pa	<u>34</u> rt XI	Total liabilities and net assets/fund balances Financial Statements and Reporting	1 2,320,333.	34 )	2,120,000.					
_ <u> </u>	1671	Tinancial otalements and reporting			Yes No					
1	Acco	ounting method used to prepare the Form 990 Cash X Accrual	Other							
2a			2a X							
b		e the organization's financial statements compiled or reviewed by an independe the organization's financial statements audited by an independent accountan			2b X					
	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,									
		w, or compilation of its financial statements and selection of an independent ac			2c X					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit									
	Act and OMB Circular A-133?									
<u> </u>	If "Ye	es," did the organization undergo the required audit or audits?			3b					
83201	1 12-18	3-08			Form <b>990</b> (2008)					

832011 12-18-08

#### SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

**Public Charity Status and Public Support** 

OMB No 1545,0047

Open to Public

Inspection

Name of the organization Employer identification number 13-3347524 THE NATIONAL BOOK FOUNDATION INC. Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 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 the 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 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 following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports h (III) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (vii) Amount of (ii) EIN organizátion in col. organization in col. (ı) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9 governing document? (i) of your support? above or IRC section Yes Yes Yes Nο Nο No (see instructions))

Schedule A (Form 990 or 990-EZ) 2008

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

Schedule A (Form 990 or 990 EZ) 2008 THE NATIONAL BOOK FOUNDATION INC 13-3347524 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 1) Section A. Public Support (e) 2008 (f) Total (b) 2005(c) 2006 (d) 2007 Calendar year (or fiscal year beginning in) (a) 2004 1 Gifts, grants, contributions, and membership fees received (Do not 769,277. 964,879. 948,634. 848,546. 901,745. 4433081. include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 964,879. 948,634. 848,546. 901, 4433081. 769,277. 4 Total. Add lines 1 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 1641042. column (f) 2792039. 6 Public Support. Subtract line 5 from line Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 901,745 948,634 848,546 4433081. 769,277 964,879. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties 55,640. 88,111. 117,631. 180,041 71,032. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital 647. 1,916. 1,768 583 3,432 8,346. assets (Explain in Part IV) 4953882. 11 Total support. Add lines 7 through 10 1,145,928. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 56.36 % 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 66.41 15 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and  $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,

Schedule A (Form 990 or 990-EZ) 2008

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

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

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

Section A. Public Support				7. 7 (Complete Star)		
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and	•				1	
membership fees received. (Do not			]			
include any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per						1
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose			1			
3 Gross receipts from activities that		<u> </u>	<del> </del>	<del>                                     </del>	1	
are not an unrelated trade or bus-						
iness under section 513						
		<del>†</del>				
4 Tax revenues levied for the organ						
ization's benefit and either paid to						
or expended on its behalf				<del>                                     </del>		
5 The value of services or facilities						}
furnished by a governmental unit to						
the organization without charge		ļ				
6 Total. Add lines 1 · 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of 1% of the total of lines 9, 10c, 11 and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support		•	- <del>1</del>			
Calendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	(-2					
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources		<del></del>		-		
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975		<del>-</del>	ļ			<del> </del>
c Add lines 10a and 10b		<u></u>	<u> </u>	-		
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on			·			
12 Other income Do not include gain or loss from the sale of capital						
assets (Explain in Part IV)				ļ		
13 Total support (Add lines 9, 10c, 11, and 12)				<u> </u>	<u> </u>	
14 First five years. If the Form 990 is for	the organization	i's first, second, the	rd, fourth, or fifth	tax year as a sect	on 501(c)(3) organi	zation,
check this box and stop here		·- · - · · · · · · · · · · · · · · · ·				▶∟
Section C. Computation of Publi	c Support P	ercentage	·		<del></del>	
15 Public support percentage for 2008 (li	ne 8, column (f)	divided by line 13,	column (f))		15	
16 Public support percentage from 2007	Schedule A, Par	rt IV-A, line 27g			16	
Section D. Computation of Inves	tment Incon	ne Percentage	<del>)</del>			
17 Investment income percentage for 200	08 (line 10c, colu	ımn (f) divided by l	ine 13, column (f))		17	
18 Investment income percentage from 2					18	
19a 33 1/3% support tests - 2008. If the				ne 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box ar						▶
b 33 1/3% support tests - 2007. If the						and
a aa mam auppoit teata - 2001. Il tile t						
line 18 is not more than 22 1/20/ should	ck this hav and .	etan hera. The ara	יאילולבייה מחולגלותגו	ייוים עורווחוורוע פויים		
line 18 is not more than 33 1/3%, chec 20 Private foundation. If the organization						' <b>[</b> ]

### Schedule D

(Form 990)

**Supplemental Financial Statements** 

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

	THE NATIONAL BOOK	FOUNDATION INC.	ļ	13-3347524
Par		ed Funds or Other Similar Funds	or Accoun	ts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iir	ne 6		
-		(a) Donor advised funds	(b) Funds	and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
	Aggregate value at end of year	-		
4	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds	· · · · · · · · · · · · · · · · · · ·
5	are the organization's property, subject to the organization's		ya rangs	Yes No
_	Did the organization inform all grantees, donors, and donor	<del>-</del>	used only	
6	for charitable purposes and not for the benefit of the donor	<u> </u>	-	Yes No
Par				
	Purpose(s) of conservation easements held by the organiza		urc 17, m10 7	
1			orically import	ant land area
	Preservation of land for public use (e.g., recreation or	Preservation of certifie	• •	
	Protection of natural habitat	Preservation of Certifie	d Historic Stru	ciure
_	Preservation of open space	de la lacación de la constanción de la constanci		
2	Complete lines 2a-2d if the organization held a qualified con	iservation contribution in the form of a cons	ervation easer	nent on the last day
	of the tax year			
			1	eld at the End of the Year
а	Total number of conservation easements		2a	
Ь	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic st		2c	
d	Number of conservation easements included in (c) acquired		_2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization o	during the taxable
	year ▶	_		
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, violations, an	ıd	
	enforcement of the conservation easements it holds?			Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting,		•	<del></del>
7	Amount of expenses incurred in monitoring, inspecting, and			
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(I	h)(4)(B)(ı)	
	and section 170(h)(4)(B)(ii)?			☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conserva			
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes t	the organizatio	n's accounting for
	conservation easements			~ <u>~</u>
Par	t III Organizations Maintaining Collections		ther Simila	r Assets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV, line 8		<del></del>
1a	If the organization elected, as permitted under SFAS 116, n			
	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pub	olic service, pr	ovide, in Part XIV, the text of
	the footnote to its financial statements that describes these	eitems		
b	If the organization elected, as permitted under SFAS 116, to	o report in its revenue statement and balanc	ce sheet works	s of art, historical treasures,
	or other similar assets held for public exhibition, education,	or research in furtherance of public service,	, provide the f	ollowing 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 tr	easures, or other similar assets for financial		
_	the following amounts required to be reported under SFAS		-	
а	Revenues included in Form 990, Part VIII, line 1	-	▶ \$	
b	Assets included in Form 990, Part X		<b>▶</b> \$	
~				

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Schedule D (Form 990) 2008

Sche	dule D (Form 990) 2008 THE NAT	IONAL BOOK	FOUN	OITAGN	N INC.			13-33	47524	* Page <b>2</b> *
	rt III Organizations Maintaining C									
3	Using the organization's accession and other									
	that apply)			_	· ·				•	
а	Public exhibition	d	, 🔲 L	oan or excl	hange progr	ams				
b	Scholarly research	е								
С	Preservation for future generations					_				
4	Provide a description of the organization's co	ollections and explai	n how the	ey further th	ne organizati	ion's exe	mpt purp	ose in Par	t XIV	
5	During the year, did the organization solicit or				-					
_	to be sold to raise funds rather than to be ma	aintained as part of t	the organ	ization's co	llection?				Yes	☐ No
Pai	rt IV Trust, Escrow and Custodial	Arrangements	Comple	te if organi	zation answ	ered "Ye	s" to Forn	n 990, Par	t IV, line 9,	or
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for c	ontribution	s or other as	ssets not	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing ta	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?		•				Yes	☐ No
	If "Yes," explain the arrangement in Part XIV									
Pai	Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10									
		(a) Current year	<b>(b)</b> Pr	ior year	(c) Two yea	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance	2,462,940.								
b	Contributions									<u> </u>
С	Investment earnings or losses	-834,891.								
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	-8,618.								
f	Administrative expenses							- ···		
g	-	1,619,431.							L	
2	Provide the estimated percentage of the year		as							
а	Board designated or quasi-endowment	85.00	%							
b	Permanent endowment ► 15.00	%								
С		6								
За	Are there endowment funds not in the posses	ssion of the organization	ation that	are held a	nd administe	ered for t	he organi	zation		
	by									es No
	(i) unrelated organizations								3a(i)	X
	(ii) related organizations								3a(ii)	X
	If "Yes" to 3a(ii), are the related organizations								3b	
4 Par	Describe in Part XIV the intended uses of the				D- 1 V 1	10				
Fai					· - · · · · · · · · · · · · · · · · · ·			<del></del>		
	Description of investment	(a) Cost or o basis (investing		(b) Cost basis (		(c) D	epreciation	on	(d) Book	value
	l and	Dasis (investi	nem,	Uasis (	(Ottlet)				<del></del>	
	Land .							<del></del>		<del></del>
	Buildings	-	+	2.5	7 255		206,2	00	ΕΛ	065
	Leasehold improvements	-			7,255.					<u>,965.</u>
d	Equipment	<del>                                     </del>		11	9,528.		113,0	00.	<u>_</u>	<u>,440.</u>
	Other  Add lines 1a-1e (Column (d) should equal Fo	rm 000 Port V 5=1	mn (B) +	00 10/011	L	L <u></u>		_	E 7	,405.
· utal	, muu mies ta te (Quiullili (U) silvulu equal FO	nn 330, rail A, COlu	(D). III	10(0)				_ 1	<i></i>	. 400.

Schedule D (Form 990) 2008

THE NATIONAL BOOK FOUNDATION INC.

13-3347524 'Page 3'

832053 12-23-08

Schedule D (Form 990) 2008

	dule D (Form 990) 2008 THE NATIONAL BOOK FOUNDATION			<u> 13-</u>	3347524 Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Financial S	<u>tatements</u>		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		812,177.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,163,760.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-351,583.
4	Net unrealized gains (losses) on investments		4		<u>-476,760.</u>
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		<u>-476,760.</u>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	-4- With D.	10	Date	-828,343.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts with Re	venue per		
1	Total revenue, gains, and other support per audited financial statements			1	345,188.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1	476 760		
а	Net unrealized gains on investments		476,760		
b	Donated services and use of facilities	2b	9,771	•	
С	Recoveries of prior year grants	2c		-	
d	Other (Describe in Part XIV)	2d		$\dashv$ $\Box$	166 000
е	Add lines 2a through 2d			2e	-466,989. $812,177.$
3	Subtract line 2e from line 1			3	012,177.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	14-1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a   4b		$\dashv$	•
b	Other (Describe in Part XIV)	40		4c	0.
c	Add lines 4a and 4b  Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	812,177.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With E	xpenses pe		
1	Total expenses and losses per audited financial statements			1	1,173,531.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	9,771		
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	9,771.
3	Subtract line 2e from line 1			3	1,163,760.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			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	0.
_5_	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	1,163,760.
	t XIV Supplemental Information			<del></del>	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II	l, lines 1a and	4, Part IV, lines	1b and	2b, Part V, line 4, Part
	irt XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b	ONT G T G T G	OB 5540	D ( 3 D	n
PAI	RT V, LINE 4: THE FOUNDATION'S ENDOWMENT CO	ONSISTS	OF TWO	BUAR	.ט
DEC	SIGNATED FUNDS ESTABLISHED FOR GENERAL SUP	אוז שם∩ם	ONE DO	NIOP -	DECTRICTEN
DE	SIGNATED FUNDS ESTABLISHED FOR GENERAL SUF	FORT AND	ONE DO	MOI	RESTRICTED
प्राप्त	ND FOR THE FOUNDATION'S LITERARIAN AWARD.				
101	AD TOK THE TOURDHITON & BITBLE THE THINKS			<u> </u>	
				Saba	dula D (Form 990) 2009

#### SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545,0047

**2008**Open To Public Inspection

Name of the organization						Employer ide	ntification number
THE NAT	IONAL BOOK FOUNDAT	NOI	IN	C.		13-3347	524
	Complete if the organization answer				ıne 1		
Part I Fundraising Activities.  1 Indicate whether the organization rais a Mail solicitations b Email solicitations c Phone solicitations d In-person solicitations  2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the (i) Name of individual or entity (fundraiser)	sed funds through any of the following Solicitar f Solicitar g Special Special sor oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) purs	ng acti tion of tion of fundra (includer) profession to e not re	vities non-g gover using o ding o ional f agree quirec	Check all that apply overnment grants nment grants events  fficers, directors, trust undraising services?	the fole	or Yes	(vi) Amount paid to (or retained by)
or entity (idiloraiser)		or con contrib	trol of utions?			ed in col (i)	organization
		Yes	No				
						,	
Tatal		<u>.                                    </u>	I				
Total  3 List all states in which the organization	on is registered or licensed to solicit	funds	or has	been notified it is ex	emp	from registrati	on or licensing
						•	
				-			
LHA For Privacy Act and Paperwork Re	eduction Act Notice, see the Instru	uctions	for F	orm 990.	Sche	dule G (Form 9	90 or 990-EZ) 2008

	Enter the state(s) in which the organization operates gaming activities  Is the organization licensed to operate gaming activities in each of these states?	9a		
	If "No," Explain			
	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  If "Yes," Explain	10a		
	Does the organization operate gaming activities with nonmembers?	_11		
2 	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		
	Schedule G (Form	1 990 or 95	り-ヒ乙	) 2008

Schedule G (Form 990 or 990-EZ) 2008 THE NATIONAL BOOK FOUNDATION INC.	13-334			ige 3
•		$\longrightarrow$	Yes	No
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	%			
b An outside facility	%			
14 Provide the name and address of the person who prepares the organization's gaming/special events books and	records			
Name				
Address >	<del></del>		i	i
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the a of gaming revenue retained by the third party ▶ \$	mount			
c If "Yes," enter name and address	1			
Name	·			
Address >	<del></del>			
16 Gaming manager information				
Name ▶	<del> </del>			
Gaming manager compensation ▶ \$				
Description of services provided				
☐ Director/officer ☐ Employee ☐ Independent contractor				
17 Mandatory distributions				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?		17a		
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations or spent in	the			
organization's own exempt activities during the tax year > \$		1		

Schedule G (Form 990 or 990-EZ) 2008

CHEDULE I orm 990)		Grants and Governr	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations uals in the U.S.	_		OMB NO.	OMB No. 1545-0047 2008
spartment of the Treasury Iernal Revenue Service	ŏ	<ul><li>Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.</li><li>Attach to Form 990.</li></ul>	on answered "Yes," on F	" on Form 990, Pa n 990.	ırt IV, lınes 21 or 22.		Open t	Open to Public Inspection
ame of the organization	e organization  THE NATIONAL BOOK General Information on Grants and Assistance	K FOUNDATION	INC.				Employer identification number	ntification number 3-3347524
Does the organ	Does the organization maintain records to substantiate the amount of the		or assistance, the	grantees' eligibility	for the grants or ass	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion	.
criteria used to	criteria used to award the grants or assistance?				)		X Yes	. <u>2</u>
2 Describe in Par	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	nonitoring the use of grant	funds in the United	States				
Part II Grants a	Grants and Other Assistance to Governments and Organization	s and Organizations ın the	e United States. Co	omplete if the orga	ınızatıon answered "Y	is in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	t IV, line 21, for any	[
recipient	. \$5.00 1.550	k this box if no one recipier	nt received more that	an \$5,000 Use Pa	rt IV and Schedule I-1	recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	nal space is needed	<b>▲</b>
1 (a) Name and $\epsilon$ or gr	1 (a) Name and address of organization (b) EIN or government	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	grant ce
į								
2 Enter total num 3 Enter total num	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nt organizations					<b>A A</b>	
1	For Privacy Act and Paperwork Reduction Act Notice, see the Instru	tice, see the Instructions	ctions for Form 990.				Schedule I (Form 990) 2008	m 990) 2008

Page 2 Schedule I (Form 990) 2008 (f) Description of non-cash assistance (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed BOOKS LITERARIAN AWARD FOR OUTSTANDING SERVICE TO THE AMERICAN LITERARY COMMUNITY LINE 2: AWARD WINNERS FOR THE NATIONAL BOOK AWARDS ARE AMERICAN WRITERS AND RECRUITED BY THE NATIONAL BOOK FOUNDATION'S EXECUTIVE FROM WHICH Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information SELECTED BY FOUR PANELS OF FIVE JUDGES EACH. THE JUDGES ARE SUGGESTED BY DIRECTOR. PANEL DELIBERATIONS ARE THEN INDEPENDENT OF THE FOUNDATION. THE MEDAL FOR DISTINGUISHED CONTRIBUTION TO AMERICAN LETTERS AND THE ARE SUBMITTED BY PUBLISHERS ONLY. PANELS SELECT FIVE FINALISTS, Ö 0 (d) Amount of non-cash assistance 20 000 THE NATIONAL BOOK FOUNDATION INC. 57,000 (c) Amount of cash grant THEY CHOOSE ONE NATIONAL BOOK AWARD WINNER (b) Number of recipients DISTINGUISHED CONTRIBUTION TO AMERICAN LETTERS (a) Type of grant or assistance PART I, Schedule I (Form 990) 2008 NATIONAL BOOK AWARDS  $\overrightarrow{H}$ SCHEDULE Part IV Part III

832102 12-18-08

13-3347524

Schedule   (Form 990) 2008 THE NATIONAL BOOK FOUNDATION INC.  Part IV Supplemental Information	13-3347524 Page 2
Tart 14 Supplemental information	
ARE SELECTED BY THE FOUNDATION'S BOARD OF DIRECTORS FROM A	LIST OF NOMINEES
MADE BY AMERICAN WRITERS, PUBLISHERS, AND EDITORS.	

## SCHEDULE (Form 990)

#### **Compensation Information**

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

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

Employer identification number

THE NATIONAL BOOK FOUNDATION INC.

Part I Questions Regarding Compensation

13-3347524

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	İ		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	_1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
	·			
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply			
	Compensation committee			
	Independent compensation consultant Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
а	Receive a severance payment or change of control payment?	_4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III			
_	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of	_		
	The organization?	_5a_		X
b	Any related organization?	5b		<u> </u>
_	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			[
	contingent on the net earnings of	<b>C</b> -		<del></del>
	Š	_6a		X
D	Any related organization?	_6b		
_	If "Yes" to line 6a or 6b, describe in Part III.			]
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		v
_	not described in lines 5 and 6? If "Yes," describe in Part III	_ 7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			w
	initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	L	_X_

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

Schedule J (Form 990) 2008

THE NATIONAL BOOK FOUNDATION INC. Schedule J (Form 990) 2008 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

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

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

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(0)	(Q)	(E)	(F)
(A) Name	<b></b>	(t) Base compensation	(II) Bonus & incentive compensation	(III) Other compensation	Deferred compensation	Nontaxable benefits	Total of columns (B)(I)-(D)	Compensation reported in prior Form 990 or Form 990 EZ
	Ξ	202,552.	0	0	10,448.	3,400.	216,400.	0
HAROLD AUGENBRAUM	Ξ	0	0	0	0	1		0
	ε							
	(II)							
	Ξ							
	(II)							
	Ξ							
	3							
	Ξ							
	(ii)							
	( <u>i</u> )							
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				(			Schedule	Schedule J (Form 990) 2008

#### 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

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

2008
Open to Public Inspection

Name of the organization

THE NATIONAL BOOK FOUNDATION INC.

Employer identification number 13-3347524

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AMERICAN LITERATURE, TO EXPAND ITS AUDIENCE, AND TO ENHANCE THE
CULTURAL VALUE OF GOOD WRITING IN AMERICA. THE FOUNDATION'S STRATEGIES
INCLUDE RECOGNITION OF LITERARY EXCELLENCE THROUGH THE NATIONAL BOOK
AWARDS; EDUCATION THROUGH LITERARY PROGRAMS FOR THE SCHOOLCHILDREN,
COLLEGE STUDENTS, AND ADULTS; AND ADVOCACY THROUGH THE DISSEMINATION OF
INFORMATION ON BEST READING PRACTICES AND LITERATURE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EXCELLENCE THROUGH THE NATIONAL BOOK AWARDS; EDUCATION THROUGH LITERARY
PROGRAMS FOR THE SCHOOLCHILDREN, COLLEGE STUDENTS, AND ADULTS; AND
ADVOCACY THROUGH THE DISSEMINATION OF INFORMATION ON BEST READING
PRACTICES AND LITERATURE.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
INNOVATIONS IN READING, A PRIZE PROGRAM FOR INDIVIDUALS AND
ORGANIZATIONS THAT INSPIRE PEOPLE TO READ GOOD LITERATURE.
•
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS
LITERATURE.
LIFETIME ACHIEVEMENT AWARDS
IN 1988, IN ORDER TO RECOGNIZE A LIFETIME OF ACHIEVEMENT, THE
FOUNDATION'S BOARD OF DIRECTORS CREATED THE MEDAL FOR DISTINGUISHED
CONTRIBUTION TO AMERICAN LETTERS. AWARDED TO SUCH DIVERSE MEMBERS OF
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

2008
Open to Public Inspection

Name of the organization

THE NATIONAL BOOK FOUNDATION INC.

Employer identification number

THE NATIONAL BOOK FOUNDATION INC.   13-3347324
THE LITERARY COMMUNITY AS EDITOR AND PUBLISHER JASON EPSTEIN, POET
GWENDOLYN BROOKS, PLAYWRIGHT ARTHUR MILLER, AND NOVELIST JOHN UPDIKE,
THE RECIPIENT OF THE MEDAL IS A PERSON, WHO, IN THE OPINION OF THE
BOARD OF DIRECTORS OF THE NATIONAL BOOK FOUNDATION, HAS ENRICHED OUR
LITERARY HERITAGE OVER A LIFE OF SERVICE, OR CORPUS OF WORK. IN FISCAL
YEAR 2009, IT WAS PRESENTED TO MAXINE HONG KINGSTON. IN 2005, THE BOARD
ESTABLISHED THE LITERARIAN AWARD FOR OUTSTANDING SERVICE TO THE
AMERICAN LITERARY COMMUNITY, WHICH IN FISCAL YEAR 2009 WAS PRESENTED TO
BARNEY ROSSET, FORMER PUBLISHERS OF GROVE PRESS.
BOOKUPNYC
IN FISCAL YEAR 2009, THE FOUNDATION CONTINUED BOOKUPNYC, A MODEL
AFTER-SCHOOL PROGRAM DEVELOPED WITH FUNDING FROM BLOOMBERG, BASED ON
RESEARCH THAT SHOWS THAT MIDDLE-SCHOOLERS RECEIVE THE FEWEST
EDUCATIONAL RESOURCES IN THREE NEW YORK CITY SETTLEMENT HOUSES ONCE A
WEEK TO SHARE THEIR ENTHUSIASM FOR READING LITERARY BOOKS. THE PROGRAM
INCLUDED FIELD TRIPS TO VARIOUS NEW YORK CITY LITERARY SITES AND GIFT
CERTIFICATES TO LOCAL BOOKSTORES.
FORM 990, PART VI, SECTION A, LINE 8B: THERE EXISTS NO COMMITTEE WITH
AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 10: THE 990 IS REVIEWED BY THE BOARD

THE CHAIRMAN OF THE BOARD.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
832211
12-18-08

FINANCE COMMITTEE, WHICH INCLUDES THE TREASURER,

Schedule O (Form 990) 2008

THE INVESTMENT CHAIR, AND

#### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

2008
Open to Public Inspection

Name of the organization

THE NATIONAL BOOK FOUNDATION INC.

Employer identification number 13-3347524

FORM 990, PART VI, SECTION B, LINE 12C: EMPLOYEES ARE REQUIRED TO DIVULGE
ALL OUTSIDE EMPLOYMENT AND/OR VOLUNTEER WORK THAT MAY CONFLICT OR OVERLAP
WITH THE GOALS OF THE NATIONAL BOOK FOUNDATION. JUDGES ARE REQUIRED TO
DIVULGE ALL PERSONAL AND PROFESSIONAL RELATIONSHIPS THAT MAY CONFLICT OR
OVERLAP WITH THE GOALS OF THE NATIONAL BOOK FOUNDATION.
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.
FORM 990, PART XI, LINE 2C
CHANGE FRON PRIOR YEAR
THERE HAS BEEN NO CHANGE IN THE PROCESS SINCE THE PRIOR YEAR.

Current Year Deduction	•	353	1,985	2,338		25,482	25,482	27,820.	
Current Sec 179	-			0	_		0	0	
Accumulated Depreciation		63,051.	47,699.	110,750.		180,808.	180,808.	291,558.	
Basis For Depreciation		64,109.	55,419.	119,528.		257,255.	257,255.	376,783.	
Reduction In Basis				0			0.	0	
Bus % Excl									
Unadjusted Cost Or Basis	-	64,109.	55,419.	119,528.		257,255.	257,255.	376,783.	
en o		16	16			16			
Life	·	7.00	5.00	_		10.001			
Method		SI	SSL			SI			
Date Acquired		/ARIES	VARIESSL			VARIESSL			
Description	MACHINERY & EQUIPMENT	1FURNITURE AND FIXTURESVARIESSI	20FFICE EQUIPMENT * 000 DAGE 10 DOWAT	CHINERY &	OTHER	3CAPITAL IMPROVEMENTS	HER HER	CGRAND TOTAL 990 FAGE 10 DEPR	
Asset No		17	• •			**/			

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

## 4562

Department of the Treasury Internal Revenue Service (99) **Depreciation and Amortization** (Including Information on Listed Property)

990	2008

2008

► See separate instructions. ► Attach

► Attach to your tax return.

Attachment Sequence No 67

Name(s) shown on return			Busin	ess or activity to will	cu this form relate	S	identifying number
THE NATIONAL BOOK FOU	NDATION II	NC.	FOF	RM 990 PA	AGE 10		13-3347524
Part   Election To Expense Certain Proper						V before you	
Maximum amount. See the instructions						1	250,000.
2 Total cost of section 179 property place	•					2	
3 Threshold cost of section 179 property	· ·	-				3	800,000.
4 Reduction in limitation Subtract line 3 i			.O.			4	
5 Dollar limitation for tax year Subtract line 4 from line		•		a instructions		5	
6 (a) Description of pro		-o- ii mamed iiiiii	(b) Cost (busin		(c) Elected		
	<u></u>		<del></del>				
				·			
					···		
2 Lested property Enter the amount from	line 20			7			
7 Listed property Enter the amount from		.m. aakmm (a)	lines 6 and			$\neg$	
8 Total elected cost of section 179 prope	•	in column (c)	, intes o and	1 7		8	
9 Tentative deduction Enter the smaller		07 F 450	0			9	
10 Carryover of disallowed deduction from	•					10	
11 Business income limitation. Enter the si		- •		•		11	
12 Section 179 expense deduction Add In					<del></del>	12	
13 Carryover of disallowed deduction to 20				▶ 13	<del></del>		
Note: Do not use Part II or Part III below for	<del></del>						<del></del>
Part II Special Depreciation Allowa	nce and Other De	epreciation (L	o not inclu	de listed propei	rty)		
14 Special depreciation for qualified prope	rty (other than list	ed property) p	placed in se	rvice during the	tax year	14	
15 Property subject to section 168(f)(1) ele	ction					15	
16 Other depreciation (including ACRS)						16	27,820.
Part III   MACRS Depreciation (Do no	t include listed pro	<del></del>		)			
		Sec	tion A				
17 MACRS deductions for assets placed in	n service in tax ye	ars beginning	before 200	8		_ 17	
18 If you are electing to group any assets placed in serv	ice during the tax year i	nto one or more g	eneral asset acc	counts, check here	<u> </u>	<u> </u>	
Section B - Assets	Placed in Service	e During 200	8 Tax Year	Using the Gene	eral Deprecia	tion Syster	<u>m</u>
(a) Classification of property	(b) Month and year placed in service	(c) Basis for o (business/inv only - see in	estment use	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property							
b 5-year property	1						
c 7-year property	1 1						
d 10-year property	1 1		·	ļ			· · · · · · · · · · · · · · · · · · ·
e 15-year property	† †						
f 20-year property	† †	*		<u> </u>			<del></del>
05	1 1			25 yrs		S/L	
g 25-year property	<del>                                     </del>			27 5 yrs	ММ	S/L	
h Residential rental property				T	MM	S/L	
- <u>"- "- "- "- "- "- "- "- "- "- "- "- "- "</u>	<del>                                     </del>			27 5 yrs	_		
<ul> <li>Nonresidential real property</li> </ul>	<del></del>			39 yrs	MM	S/L	
Section C - Assets P	lead in Service	During 2000	Tay Voor II	aina tha Altara	MM Donros	S/L	
·	laced in Service	During 2008	Tax Tear U	Sing the Aitern	ative Deprec		em
20a Class life	┨ ┣				<del> </del>	S/L	<del>-</del>
b 12-year	<del> </del>		**	12 yrs		S/L	
c 40-year		· <del></del>		40 yrs	MM	S/L	
Part IV   Summary (See instructions )							<del></del>
21 Listed property Enter amount from line						21	
22 Total. Add amounts from line 12, lines							<b>^-</b>
Enter here and on the appropriate lines	-	•	· ·	tions - see instr		22	<u>27,820.</u>
23 For assets shown above and placed in	-	current year,	enter the				
portion of the basis attributable to secti	on 263A costs			23			

LHA For Paperwork Reduction Act Notice, see separate instructions.

recreation, or a	amusement)	•							·					
through (c) of	Section A, all	l of Section B	and Sec	standar ction C i	o mileag f applica	able	ueau	curry reast	expens	se, comp	nete on	y 24a, 2	40, Colui	nns (a)
Section A - Depreciation a	and Other In	formation (C	aution: 🤄	See the	ınstructı	ions for li	mits fo	r passeng	er autoi	nobiles )				
24a Do you have evidence to	support the bu	siness/investm	ent use cl	aimed?	Y	es 🗀	No	24b If "Y	es," is t	he evide	nce writ	ten?	] Yes [	No
(a)	(b) Date	(c) Business	,	(d)	Ba	(e)		(f)	*	(g)	1	h)		(i)
Type of property (list vehicles first )	Type of property			Cost or ther basis	l /bu	Basis for deprecia (business/investri use only)		Recovery period	Method/ Convention		Depreciation deduction		Elected section 179 cost	
25 Special depreciation all	owance for q	ualified listed	property	y placed	ın servi	ice durin	g the t	ax year ar	d					
used more than 50% in										25	<u> </u>		<u> </u>	
26 Property used more that	an 50% in a c	ualified busin	ness use											
	<u> </u>		%										<u> </u>	
	<del> </del>		%					ļ	<u> </u>				ļ	
			% ]					L	<u> </u>		l		L	
27 Property used 50% or I	ess in a quali								ı——		Т			
	<del> </del>		%						S/L				ł	
	<del> </del>		%						S/L·					
	<u> </u>		%			<del></del>			S/L		<b></b>		}	
28 Add amounts in column	,	J				, page 1				28	L	T		
29 Add amounts in column	n (i), line 26. E												L	
			Section											
Complete this section for ve If you provided vehicles to y those vehicles												ng this :	section f	or
				a)		(b)	Γ	(c)		'd\	-	e)		
30 Total business/investment	miles driven d	uring the	(a) Vehicle		1	hicle	ĺν	'ehicle	(d) Vehicle		(e) Vehicle		(f) Vehicle	
year (do not include com		g			"		<del>                                     </del>		1				1	10.0
31 Total commuting miles		the vear			<b>—</b> —									
32 Total other personal (no	_	-			ļ								<del></del>	
driven		,,	1				1		1					
33 Total miles driven durin	a the vear													
Add lines 30 through 32														
34 Was the vehicle availab		al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
during off-duty hours?														
35 Was the vehicle used p	rimarily by a	more												
than 5% owner or relate	ed person?		L	<u> </u>	l	}		<u> </u>				<u> </u>	l	1
36 Is another vehicle availa	able for perso	onal				_								
use?						ļ	<u> </u>			1_	<u></u>			
Answer these questions to		- Questions you meet an e	•	-					_			re not n	nore that	า 5%
owners or related persons														<del></del> -
37 Do you maintain a writte	en policy stat	tement that p	rohibits a	all perso	nal use	of vehicle	es, inc	luding cor	nmuting	ı, by you	r		Yes	No
employees?														<del></del> -
38 Do you maintain a writte		•	•				•			your				
employees? See the ins			-		Micers, o	directors	, or 1%	or more	owners				-	+
39 Do you treat all use of v	-												<u> </u>	<del> </del>
40 Do you provide more th		•			ınforma	tion from	your	employee	s about					
the use of the vehicles,							_							<del> </del>
41 Do you meet the require														┿
Note: If your answer to	<u>37, 38, 39, 4</u>	0, or 41 is "Ye	es," do n	ot comp	lete Sec	ction B fo	or the c	covered ve	hicles					
Part VI Amortization			/h\	Γ	(0)			(4)		(0)	<del></del>			
			(b) e amortization		(C) Amortiza	ble		(d) (e) Code Amortiz		ation Ami		(f) mortization		
An American of a constitution			begins	<u> </u>	amoun	11		section		period or per	centage		or this year	
42 Amortization of costs th	iai oegins du	ning your 200	o tax yea	ar"										
				$\vdash$										
42 Amortization of accts th	ot began be	fore very 200	Q tou	L							43			
43 Amortization of costs th			_		·						44			
44 Total. Add amounts in o	COMMITTED DE	e uie iiiStruc	OUNS TOF	where to	J ISPOR						1 44			

816252 11-08-08

Form	8868 (Re; 4-2009)	·		Page 2
• If	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check t	his box		$\triangleright \mathbf{x}$
Note	. Only complete Part II if you have already been granted an automatic 3 month extension on a previously	filed Forn	n 8868.	
• If :	you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Pa	rt II Additional (Not Automatic) 3-Month Extension of Time. Only file the original	(no copies	needed)	
Туре	Name of Exempt Organization	Em	ployer iden	tification number
print	THE NATIONAL BOOK FOUNDATION INC.		13-334	7524
extend due da	led Number, street, and room or suite no. If a P.O. box, see instructions are for 195 MADISON AVENUE - SUITE 709	For	IRS use onl	y
filing to return instruc	See   City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
	ck type of return to be filed (File a separate application for each return):  Form 990  Form 990-EZ  Form 990-T (sec. 401(a) or 408(a) trust)  Form 990-BL  Form 990-PF  Form 990-T (trust other than above)  Form 4720		Form 5227 Form 6069	Form 8870
STO	PI Do not complete Part II if you were not already granted an automatic 3-month extension on a pr	eviously fi	led Form 88	368.
	HAROLD AUGENBRAUM  ne books are in the care of  95 MADISON AVE-SUITE 709 - NEW YORK,	NY 1	0016	
	elephone No. ► <u>212-685-0261</u> FAX No. ►			. —
	the organization does not have an office or place of business in the United States, check this box			. ▶ []
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			
box 4	Lift it is for part of the group, check this box Light and attach a list with the names and EINs I request an additional 3-month extension of time until MARCH 15, 2010.	of all mem	pers the ext	ension is for.
5		ına API	R 30,	2009
6	If this tax year is for less than 12 months, check reason. Initial return Final return	9		accounting period
7	State in detail why you need the extension		onango m	accounting polica
•	ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATIO	N		
	NECESSARY TO COMPLETE THE RETURN.			
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		}	
	nonrefundable credits. See instructions.	8a	\$	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated		<sup>,</sup>	
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid		<u>.</u>	
	previously with Form 8868.	8b	\$	<del></del>
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	:	}	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruct	ions. 8c		<u> </u>
	Signature and Verification			
Under it is tr	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and ue, correct, and completenand that I am authoxized to prepare this form.	to the best	of my knowle	dge and belief,
Signa	assume and a contraction	Dat	e > /2	14109
				8868 (Rev. 4-2009)

Form **886**% (Rev. April 2009)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

• If you a	re filing for an Automatic 3-Month Extension, complete only Part I and check this box			► X
-	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 or	this form)		
	mplete Part II unless you have already been granted an automatic 3-month extension on a previou			
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corpora	ion required to file Form 990-T and requesting an automatic 6-month extension - check this box and	complete		
Part I only				
	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reque me tax returns	st an exte	nsion of tim	e
noted belo (not autori you must :	E Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extended (months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite of submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronication of the forms and click on e-file for Chanties & Nonprofits.	tronically in consolid	f (1) you wa lated Form	ant the additional 990-T. Instead,
Type or	Name of Exempt Organization	Emp	oloyer iden	tification number
print	THE NATIONAL BOOK FOUNDATION INC.	1	3-334	7524
File by the due date for filing your return See	Number, street, and room or suite no. If a P O. box, see instructions.  95 MADISON AVENUE - SUITE 709			
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW YORK, NY 10016			
Check tyr	e of return to be filed (file a separate application for each return).			
Form	n 990-BL	m 4720 m 5227 m 6069 m 8870		
	HAROLD AUGENBRAUM  oks are in the care of ▶ 95 MADISON AVE-SUITE 709 - NEW YORK,	NY 10	016	
-	ne No. ► <u>212-685-0261</u> FAX No ►			, 🗀
	ganization does not have an office or place of business in the United States, check this box for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	lf thus is fo		
_	If it is for part of the group, check this box  and attach a list with the names and EINs of the group, check this box.			-
is for	uest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time $\frac{DECEMBER}{15}$ , $\frac{2009}{2009}$ , to file the exempt organization return for the organization name the organization's return for: $\frac{1}{1000}$ calendar year $\frac{1}{1000}$ or $\frac{1}{1000}$ tax year beginning $\frac{1}{1000}$ MAY $\frac{1}{1000}$ , $\frac{1}{10000}$ and ending $\frac{1}{10000}$ APR $\frac{1}{100000}$	ed above.	The extens	sion
2 If the	s tax year is for less than 12 months, check reason: Initial return		Change in	accounting period
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	efundable credits. See instructions	3a	<b> _\$</b>	<del></del>
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated	21-		
	ayments made Include any prior year overpayment allowed as a credit nce Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	3b	<b>\$</b>	<del></del>
depo	sit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			N/A
OHO.	nstructions	3c	\$	TM \ \

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.