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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1345-0047

2008

Open to Public
Inspection

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

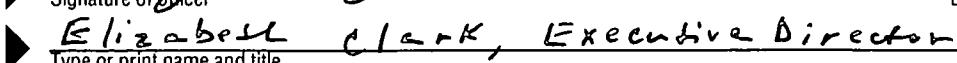
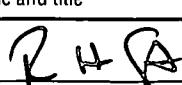
A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE NASW FOUNDATION, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) 750 FIRST STREET NE Room/suite 700 See Specific Instructions City or town, state or country, and ZIP + 4 WASHINGTON, DC 20002-4241	D Employer identification number 13-6128093	
		E Telephone number 202-336-8286	
		G Gross receipts \$ 2,025,028.	
		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		If "No," attach a list (see instructions)	
H(c) Group exemption number ►			
I Tax-exempt status. <input checked="" type="checkbox"/> 501(c)(3) (insert no) 4947(a)(1) or 527			
J Website: ► WWW.NASWFOUNDATION.ORG			
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			
L Year of formation: 1987 M State of legal domicile: DC			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ENHANCE THE WELL-BEING OF INDIVIDUALS BY STRENGTHENING THE SOCIAL WORK PROFESSION.	
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 6
	5 Total number of employees (Part V, line 2a)	5 0
	6 Total number of volunteers (estimate if necessary)	6 0
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a 0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b 0.
	Prior Year	
	Current Year	
Revenue	8 Contributions and grants (Part VIII, line 1h)	2,086,885. 932,250.
	9 Program service revenue (Part VIII, line 2g)	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<76,542. 124,982.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	886.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,011,229. 1,057,232.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	28,000. 201,266.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	653,666. 576,600.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	
	b Total fundraising expenses (Part IX, column (D), line 25) ► RECEIVED 14,482.	
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	756,523. 773,055.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,438,189. 1,550,921.
	19 Revenue less expenses. Subtract line 18 from line 12	573,040. <493,689. >
	Beginning of Year	
	End of Year	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	4,468,666. 3,435,299.
	21 Total liabilities (Part X, line 26)	470,169. 288,260.
	22 Net assets or fund balances Subtract line 21 from line 20	3,998,497. 3,147,039.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge				
Sign Here	 Signature of officer  Type or print name and title			
	Date 5/13/10			
Paid Preparer's Use Only	Preparer's signature ► 	Date 5/12/10	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 RAFFA, P.C. ► 1899 L ST, NW, SUITE 900 WASHINGTON, DC 20036			
	EIN ►			
	Phone no. ► 202-822-5000			

May the IRS discuss this return with the preparer shown above? (see instructions)

832001 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

THE EXEMPT PURPOSE OF THE NASW FOUNDATION IS TO ENHANCE THE WELL-BEING OF INDIVIDUALS, FAMILIES AND COMMUNITIES THROUGH THE ADVANCEMENT OF SOCIAL WORK PRACTICE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
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? Yes No
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)

4a (Code) (Expenses \$ 276,075. including grants of \$ 58,643.) (Revenue \$)
PUBLIC EDUCATION CAMPAIGN - PUBLIC EDUCATION CAMPAIGN IS A MULTI-YEAR PROGRAM TO INCREASE THE PUBLIC'S UNDERSTANDING OF THE SOCIAL WORK PROFESSION SO SOCIAL WORKERS CAN BETTER HELP THOSE IN NEED. NATIONAL MEDIA CAMPAIGN SHOWS HOW INDIVIDUALS, FAMILIES AND COMMUNITIES BENEFIT EVERY DAY FROM INTERACTION WITH SOCIAL WORKERS. THE RELATED WEBSITE, WWW.HELPSTARTSHERE.ORG, PROVIDES FREE INFORMATION AND EDUCATIONAL MATERIALS ON A WIDE RANGE OF TOPICS AFFECTING ALL PEOPLE.

4b (Code:) (Expenses \$ 181,353. including grants of \$ 34,000.) (Revenue \$)
BRISTOL MYERS I CAN V - BRIDGING CANCER CARE: BEST PRACTICES IN PSYCHOSOCIAL ONCOLOGY IN HUNGARY-THIS PROJECT WAS DESIGNED TO ADVANCE PSYCHOSOCIAL ONCOLOGY IN HUNGARY. THE MULTIPLE ACTIVITIES HELPED BUILD THE CAPACITY OF PSYCHOSOCIAL ONCOLOGY PROFESSIONALS AND CONSUMERS IN HUNGARY TO DELIVER HIGH QUALITY SERVICES TO THOSE DEALING WITH CANCER.

NASW FOUNDATION, CANCERCARE, AND THE UNIVERSITY OF DEBRECEN HOSTED A SUCCESSFUL BEST PRACTICES IN PSYCHOSOCIAL ONCOLOGY SUMMIT IN HUNGARY WITH THE GOAL OF EXCHANGING INFORMATION, EDUCATION, AND BEST PRACTICES IN PSYCHOSOCIAL ONCOLOGY WITH HEALTH AND PSYCHOSOCIAL PROFESSIONALS BETWEEN HUNGARY AND THE U.S. THE FINAL SUMMIT REPORT IS POSTED ONLINE. WE ALSO DEVELOPED A WEB COURSE, "UNDERSTANDING CANCER IN HUNGARY: THE

4c (Code:) (Expenses \$ 168,903. including grants of \$) (Revenue \$)
HIV/AIDS EDUCATION AND TRAINING IV - THE HIV/AIDS SPECTRUM PROJECT PROVIDES TRAINING, EDUCATION, AND TECHNICAL ASSISTANCE TO SOCIAL WORKERS WHO HELP OTHERS WITH THE MENTAL HEALTH ISSUES OF LIVING WITH HIV/AIDS. DIRECT TRAINING OF PRACTITIONERS IS DELIVERED THROUGH CONTINUING EDUCATION PROGRAMS OFFERED THROUGH COLLABORATION WITH NASW'S CHAPTERS, REGIONAL AIDS EDUCATION AND TRAINING CENTERS, OTHER PROFESSIONAL ASSOCIATIONS AND COMMUNITY-BASED AGENCIES.

4d Other program services (Describe in Schedule O)

(Expenses \$ 273,594. including grants of \$ 118,623.) (Revenue \$)

4e Total program service expenses ► \$ 899,925. (Must equal Part IX, Line 25, column (B))

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Part IV Checklist of Required Schedules

	Yes	No
1	X	
2	X	
3		X
4		X
5	N/A	
6		X
7		X
8		X
9		X
10	X	
11	X	
12	X	
13		X
14a		X
14b	X	
15		X
16	X	
17		X
18		X
19		X
20		X
21	X	
22		X
23	X	
24a		
24b		
24c		
24d		
25a		X
25b		X
26		X
27		X

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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:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	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
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	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	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

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Part 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 U.S. Information Returns. Enter -0- if not applicable	1a	0	
1b		1b	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered 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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank 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?	5b	X	
c	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 contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7a	X	
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	X	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	X	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7h	X	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	8		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	N/A		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	N/A		
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: N/A	10a		
a	Initiation fees and capital contributions included on Part VIII, line 12	10b		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	11a		
11	Section 501(c)(12) organizations. Enter: N/A	11b		
a	Gross income from members or shareholders	12a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	12b	
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			

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

Section 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	7
b Enter the number of voting members that are independent	1b	6
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	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 governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9a Does the organization have local chapters, branches, or affiliates?	9a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

Section 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 could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	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	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:		
a The organization's CEO, Executive Director, or top management official?	15a	X
b Other officers or key employees of the organization?	15b	X
Describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► AL, AK, AR, AZ, CA, CT, FL, GA, IL, KS, KY, MA, ND, RI, SD, VA, VT, WA, WI, WY
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 for public inspection. Indicate how you make these available. Check all that apply.
<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► THE FOUNDATION - 202-408-8600
750 FIRST STREET, NE, #700, WASHINGTON, DC 20002-4241

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 compensate any officer, director, trustee, or key employee.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

1b Total

91,502. 361,099. 123,000.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Yes	No
	X
X	
	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

The organization	(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ► 0

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Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a 4,749.			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e 168,853.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 758,648.			
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f ►	932,250.			
Program Service Revenue	2 a	Business Code			
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f ►				
	3	Investment income (including dividends, interest, and other similar amounts) ►	115,005.		
4	Income from investment of tax-exempt bond proceeds ►				
5	Royalties ►				
6 a	Gross Rents	(i) Real	(ii) Personal		
b	Less: rental expenses				
c	Rental income or (loss)				
d	Net rental income or (loss) ►				
7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b	Less cost or other basis and sales expenses	977,773.			
c	Gain or (loss)				
d	Net gain or (loss) ►	9,977.			9,977.
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a			
b	Less: direct expenses	b			
c	Net income or (loss) from fundraising events ►				
9 a	Gross income from gaming activities See Part IV, line 19	a			
b	Less: direct expenses	b			
c	Net income or (loss) from gaming activities ►				
10 a	Gross sales of inventory, less returns and allowances	a			
b	Less: cost of goods sold	b			
c	Net income or (loss) from sales of inventory ►				
Miscellaneous Revenue		Business Code			
11 a					
b					
c					
d	All other revenue				
e	Total. Add lines 11a-11d ►				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ►	1,057,232.	0.	0.	124,982.

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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	175,266.	175,266.		
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	26,000.	26,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	121,845.	61,644.	60,201.	
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	340,326.	149,359.	190,967.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	50,226.	2,903.	47,323.	
9 Other employee benefits	33,197.	11,984.	21,213.	
10 Payroll taxes	31,006.	13,277.	17,729.	
11 Fees for services (non-employees):				
a Management	358,893.	320,768.	38,125.	
b Legal	5,392.	5,392.		
c Accounting	11,959.		11,959.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	4,617.	1,280.	3,337.	
g Other	68,027.	67,787.	240.	
12 Advertising and promotion	2,176.			2,176.
13 Office expenses	70,951.	45,212.	24,588.	1,151.
14 Information technology				
15 Royalties				
16 Occupancy	47,978.		47,978.	
17 Travel	165,534.	114,992.	49,667.	875.
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	1,376.		1,376.	
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.)				
a ADMINISTRATIVE OVERHEAD	12,801.		12,801.	
b LICENSES AND FEES	10,280.			10,280.
c SUBSCRIPTIONS AND BOOKS	5,735.	3,750.	1,985.	
d OTHER EXPENSE	3,084.		3,084.	
e OTHER EQUIPMENT	2,773.		2,773.	
f All other expenses	1,479.	<99,689.>	101,168.	
25 Total functional expenses. Add lines 1 through 24f	1,550,921.	899,925.	636,514.	14,482.
26 Joint Costs. Check here ► <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	2,196,889.	2	1,118,200.
	3 Pledges and grants receivable, net	211,500.	3	171,071.
	4 Accounts receivable, net	14,530.	4	39,515.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost basis	527,581.		
	b Less accumulated depreciation. Complete Part VI of Schedule D	10b 527,581.	0.	0.
	11 Investments - publicly traded securities	1,752,372.	11	1,679,881.
	12 Investments - other securities See Part IV, line 11	42,657.	12	386,728.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	250,718.	15	39,904.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	4,468,666.	16	3,435,299.
Liabilities	17 Accounts payable and accrued expenses	144,172.	17	117,813.
	18 Grants payable		18	
	19 Deferred revenue	51,407.	19	46,723.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	274,590.	25	123,724.
	26 Total liabilities. Add lines 17 through 25	470,169.	26	288,260.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	761,370.	27	476,730.
	28 Temporarily restricted net assets	2,155,202.	28	1,588,334.
	29 Permanently restricted net assets	1,081,925.	29	1,081,975.
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	3,998,497.	33	3,147,039.
	34 Total liabilities and net assets/fund balances	4,468,666.	34	3,435,299.

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
3a	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?	3a	X
b	If "Yes," did the organization undergo the required audit or audits?	3b	

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.

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

OMB No. 1545-0047

2008Open to Public
Inspection

Name of the organization

THE NASW FOUNDATION, INC.

Employer identification number

13-6128093**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)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
 4 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: _____
 5 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)
 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
 7 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)
 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
 9 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)
 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
 11 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.
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
 e 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).
 f 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
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?	(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No		Yes	No	
Total								

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

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1902889.	1974555.	2086084.	2086885.	932,200.	8982613.
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						
4 Total. Add lines 1 - 3	1902889.	1974555.	2086084.	2086885.	932,200.	8982613.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						535,893.
6 Public Support. Subtract line 5 from line 4						8446720.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1902889.	1974555.	2086084.	2086885.	932,200.	8982613.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	133,807.	137,163.	132,455.	127,429.	115,005.	645,859.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,871.	1,145.	2,172.	866.		8,054.
11 Total support. Add lines 7 through 10						9636526.
12 Gross receipts from related activities, etc (see instructions)					12	

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**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	87.65	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	83.85	%
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 stop here . The organization qualifies as a publicly supported organization	► <input checked="" type="checkbox"/>		
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	► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>		
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	► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5 000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Schedule D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

OMB No. 1545-0047

2008Open to Public
Inspection

Name of the organization

THE NASW FOUNDATION, INC.

Employer identification number

13-6128093

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 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)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

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
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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Schedule D (Form 990) 2008

832051
12-23-08

10360507 786783 NASWFDN

2008.05060 THE NASW FOUNDATION, INC. NASWFDN1

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,108,699.				
b Contributions	50.				
c Investment earnings or losses	<127,217.00>				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	981,532.				

2 Provide the estimated percentage of the year end balance held as.

a Board designated or quasi-endowment ► %

b Permanent endowment ► 100.00 %

c Term endowment ► %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by:

(i) unrelated organizations

(ii) related organizations

Yes	No
3a(i)	X
3a(ii)	X
3b	

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		15,996.	15,996.	0.
d Equipment		435,479.	435,479.	0.
e Other		76,106.	76,106.	0.

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c)) ► 0.

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
CERTIFICATES OF DEPOSIT	386,728.	END-OF-YEAR MARKET VALUE
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ►	386,728.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	►

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
OTHER LIABILITIES	4,274.
PAYABLE TO AFFILIATE	119,450.
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	► 123,724.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

832053
12-23-08

Schedule D (Form 990) 2008

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,057,232.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	1,550,921.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3	<493,689. >
4 Net unrealized gains (losses) on investments	4	<357,769. >
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	<357,769. >
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	<851,458. >

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	792,403.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments	2a	<357,769. >
b Donated services and use of facilities	2b	92,940.
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	<264,829. >
3 Subtract line 2e from line 1	3	1,057,232.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	0.
5 Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,057,232.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	1,643,861.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	92,940.
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	92,940.
3 Subtract line 2e from line 1	3	1,550,921.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1.		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	0.
5 Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,550,921.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b

PART V, LINE 4: THE FOUNDATION'S ENDOWMENT CONSISTS OF TWO

DONOR-RESTRICTED FUNDS, THE INTERNATIONAL RHODA G. SARNAT AWARD FUND AND
THE LEARNING SPRINGBOARD ENDOWMENT FUND. THE INTERNATIONAL RHODA G. SARNAT
AWARD FUND WAS ESTABLISHED TO PROVIDE MONETARY PRIZE TO AN INDIVIDUAL,
GROUP, OR ORGANIZATION THAT HAS SIGNIFICANTLY ADVANCED THE PUBLIC IMAGE OF
PROFESSIONAL SOCIAL WORK. THE LEARNING SPRINGBOARD ENDOWMENT FUND WAS
ESTABLISHED FOR THE PURPOSE OF GENERATING EARNINGS TO SUPPORT THE POSITION
OF A SOCIAL WORKER IN THE SAN FRANCISCO SCHOOL DISTRICT.

Part XIV Supplemental Information (continued)

PART X: THE FOUNDATION HAS ELECTED TO DEFER THE APPLICATION OF
FIN 48 FOR THE YEAR ENDED JUNE 30, 2009.

**Schedule F
(Form 990)****Statement of Activities Outside the United States**

OMB No 1545-0047

2008Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service► Attach to Form 990. Complete if the organization answered "Yes" to
Form 990, Part IV, line 14b, line 15, or line 16.

Name of the organization

Employer identification number

THE NASW FOUNDATION, INC.

13-6128093

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EUROPE	0	0	PROVIDE SEED GRANTS TO ESTABLISH AND/OR STRENGTHEN CANCER SUPPORT BY SOCIAL WORKERS IN HUNGARY.		34,000.
Totals					34,000.

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

Schedule F (Form 990) 2008

832071
12-18-08

10360507 786783 NASWFDN

22
2008.05060 THE NASW FOUNDATION, INC. NASWFDN1

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.

||See Schedule E-1 (Form 990) if additional space is needed

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a

section 501(c)(3) equivalency letter

6

Schedule F (Form 990) 2008

Part II Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TO STRENGTHEN SOCIAL WORKER ROLE IN CANCER SUPPORT IN HUNGARY.	EUROPE	6	18,000.	WIRE TRANSFER	0.		
PROVIDE STIPENDS FOR TRAVEL AND PARTICIPATION IN CANCER SUPPORT CONFERENCE IN HUNGARY.	EUROPE	24	6,000.	N/A	0.		

Part IV Supplemental Information

Complete this part to provide the information required by Part I, line 2, and any other additional information

SCHEDULE F, PART I, LINE 2: THE NASW FOUNDATION MANAGES GRANT FUNDS IN-HOUSE, AND ALL REQUIREMENTS AS DEFINED BY THE FOUNDATION MUST BE MET BY THE GRANTEE BEFORE FUNDS ARE DISBURSED. THE GRANT MANAGER PROVIDED OVERSIGHT AND REVIEWS PAYMENTS FOR PROPRIETY AND CONFORMITY WITH PURPOSES OF GRANT FUNDS AND THE TERMS OF GRANT AGREEMENTS. ALL GRANT DISBURSEMENTS ARE REVIEWED AND APPROVED BY THE FOUNDATION DIRECTOR AND THE PRESIDENT OF THE FOUNDATION. THE GRANTEE MUST REPORT AT LEAST QUARTERLY ON THE USE OF THE GRANT FUNDS, OR AS STIPULATED BY THE GRANT AGREEMENT, AND THIS REPORT IS REVIEWED BY THE GRANT MANAGER, THE FOUNDATION DIRECTOR AND THE PRESIDENT OF THE FOUNDATION.

THE NASW FOUNDATION, INC.

Prerogative to Individuals in the United States Committee

Grants and Other Assistance to Individuals in the United States
Use Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance

Part IV **Supplemental Information** Complete this part to provide the information required in Part I line 2 and any other additional information

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FUNDS ARE DISBURSED. THE GRANT MANAGER PROVIDED OVERSIGHT AND REVIEWS

PAYMENTS FOR PROPRIETY AND CONFORMITY WITH PURPOSES OF GRANT FUNDS AND THE

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NOTEBOOKS OF THE HISTORICAL SOCIETY OF PENNSYLVANIA

THE GRANTEE MUST REPORT AT LEAST QUARTERLY ON THE USE OF THE GRANT FUNDS.

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees► Attach to Form 990. To be completed by organizations that
answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008Open to Public
Inspection

Name of the organization

THE NASW FOUNDATION, INC.

Employer identification number

13-6128093

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> 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

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?

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

<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a,

a Receive a severance payment or change of control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

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:

a The organization?

b Any related organization?

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:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X

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

Schedule J (Form 990) 2008

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2008.05060 THE NASW FOUNDATION, INC.

NASWFDN1

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

(A) Name	(B) Breakdown of W2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
ELIZABETH CLARK	(i) 12,200.	0.	0.	1,026.	2,031.	15,257.	0.
	(ii) 212,312.	0.	0.	35,487.	38,865.	286,664.	0.
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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

THE NASW FOUNDATION, INC.

Employer identification number
13-6128093

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

SOCIAL WORKER'S ROLE" FOR PSYCHOSOCIAL ONCOLOGY PROFESSIONALS IN

HUNGARY. NASWF ALSO AWARDED 6 SEED GRANTS (\$3,000 PER GRANTEE) TO

HEALTH AND PSYCHOSOCIAL ONCOLOGY PROFESSIONALS IN HUNGARY TO DEVELOP

AND IMPLEMENT INNOVATIVE PROJECTS TO IMPROVE PSYCHOSOCIAL ONCOLOGY

CARE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SUPPORT FOR VARIOUS OTHER PROJECTS

EXPENSES \$ 273594.. INCLUDING GRANTS OF \$ 118623. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 10: FOLLOWING THE PREPARATION OF THE

990 BY THE TAX PREPARER, THE RETURN IS SENT TO THE CONTROLLER FOR REVIEW.

THE CONTROLLER REVIEWS THE RETURN IN DETAIL WITH THE DIRECTOR OF THE

FOUNDATION. ONCE THIS REVIEW IS COMPLETE, THE CONTROLLER AND THE FOUNDATION

DIRECTOR PRESENT IT TO THE CHIEF EXECUTIVE OFFICER (CEO) AND THE CHIEF

OPERATING OFFICER (COO) FOR REVIEW. ONCE REVIEW BY ALL PARTIES IS

COMPLETED, AND THE CEO HAS APPROVED DISTRIBUTION OF THE FORM, THE DRAFT

COPY IS SENT TO ALL MEMBERS OF THE BOARD OF DIRECTORS. THE BOARD REVIEWS

THE RETURN, AFTER WHICH TIME THE RETURNS ARE FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: ON AN ANNUAL BASIS, MEMBERS OF THE

NASW FOUNDATION BOARD OF DIRECTORS ARE REQUIRED TO REVIEW THE FOUNDATION'S

CONFLICT OF INTEREST POLICY AND SIGN A DOCUMENT STATING THAT THEY ARE IN

COMPLIANCE WITH THE POLICY. THEY ARE ALSO RESPONSIBLE FOR RECUSING

THEMSELVES FROM ANY BOARD BUSINESS THAT MAY CONFLICT WITH THEIR OTHER

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

832211
12-18-08

Schedule O (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 additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

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Inspection

Name of the organization

THE NASW FOUNDATION, INC.

Employer identification number
13-6128093

INTERESTS, AND ARE NOT ALLOWED TO ACT AS PAID CONSULTANTS TO THE NASW FOUNDATION OR ANY OF ITS AFFILIATES. THE POLICY ALSO COVERS OFFICERS.

FORM 990, PART VI, SECTION B, LINE 15: THE NASW FOUNDATION HAS A COMPENSATION POLICY THAT COVERS COMPENSATION OF THE CHIEF EXECUTIVE OFFICER AND KEY EMPLOYEES. KEY EMPLOYEES ARE SPECIFICALLY DEFINED AS INDIVIDUALS MEETING A DEFINED SALARY THRESHOLD AS WELL AS RESPONSIBILITY CRITERIA.

FOR THE CHIEF EXECUTIVE OFFICER AND KEY EMPLOYEES, THE NASW COMPENSATION COMMITTEE OF THE NASW BOARD OF DIRECTORS IS REQUIRED TO REVIEW COMPARABILITY DATA, INCLUDING BUT NOT LIMITED TO: EXPERT COMPENSATION STUDIES BY INDEPENDENT FIRMS; WRITTEN JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS; AND INFORMATION OBTAINED FROM IRS FILINGS OF SIMILAR ORGANIZATIONS. THE COMPENSATION COMMITTEE MUST DOCUMENT HOW IT REACHED ITS DECISION REGARDING COMPENSATION. THE DOCUMENTATION MUST INCLUDE THE TERMS OF THE COMPENSATION AND THE DATE IT WAS APPROVED; THE MEMBERS OF THE APPROVAL COMMITTEE OR BOARD WHO WERE PRESENT DURING THE DISCUSSIONS REGARDING COMPENSATION THAT WAS APPROVED AND THOSE WHO VOTED ON IT; THE COMPARABILITY DATA OBTAINED AND RELIED ON, AND HOW THE DATA WAS OBTAINED; AND ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION ON THE COMPENSATION BY ANYONE ON THE APPROVAL BODY WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE DECISION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AK, AR, AZ, CA, CT, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

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

Schedule O (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 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

THE NASW FOUNDATION, INC.

Employer identification number
13-6128093

FORM 990, PART VI, SECTION C, LINE 19: THE NASW FOUNDATION MAKES ITS AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, GOVERNING DOCUMENTS AND TAX RETURNS AVAILABLE AT ITS NATIONAL HEADQUARTERS AT 750 FIRST ST. NE, WASHINGTON, DC UPON REQUEST. THERE ARE TWO WAYS FOR A PERSON TO REVIEW THE MATERIALS: BY VISITING THE OFFICE AND REVIEWING THEM THERE, OR BY WRITTEN REQUEST. UPON RECEIPT OF A WRITTEN REQUEST, THE NASW FOUNDATION WILL PROVIDE THE REQUESTED ITEMS TO THE REQUESTOR.

PART XI, LINE 2C: THE FOUNDATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AUDITOR. THERE WERE NO CHANGES IN THESE PROCESSES FROM THE PRIOR YEAR.

PART VII, COLUMN B

ALL EMPLOYEES LISTED ON THIS 990 ARE SHARED BETWEEN THE NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC. AND THE NASW FOUNDATION. THE TOTAL HOURS FOR AN AVERAGE WORK WEEK WERE INCLUDED ON BOTH 990'S TO PREVENT CONFUSION.

Part III Identification of Related Organizations Taxable as a Partnership

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
POLITICAL ACTION FOR CANDIDATE ELECTION - 52-1066364							
750 FIRST ST., NE, SUITE 700	SUPPORT POLITICAL CANDIDATES	DC	NASW	C CORP	0.	0.	100%
WASHINGTON, DC 20002-2041	DEFRAY LEGAL COSTS TO NASW MEMBERS	DC	NASW	TRUST	0.	0.	100%

Part V Transactions With Related Organizations**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to other organization(s)
- c Gift, grant, or capital contribution from other organization(s)
- d Loans or loan guarantees to or for other organization(s)
- e Loans or loan guarantees by other organization(s)
- f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
- h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- l Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- o Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.	M	116,078.
(2) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.	N	422,482.
(3) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.	O	1,036,716.
(4)		
(5)		
(6)		

Part VI Unrelated Organizations Taxable as a Partnership

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

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ►
- Note. Only complete Part II if you have already been granted an automatic 3 month extension on a previously filed Form 8868
- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).		
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization NATIONAL ASSOCIATION OF SOCIAL WORKERS, INTERNATIONAL CHAPTER	Employer identification number 52-1234233
	Number, street, and room or suite no. If a P.O. box, see instructions. 750 FIRST STREET, NW	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions WASHINGTON, DC 20002	

Check type of return to be filed (File a separate application for each return):

<input type="checkbox"/> Form 990	<input checked="" type="checkbox"/> Form 990 EZ	<input type="checkbox"/> Form 990 T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990 T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THE ORGANIZATION

- The books are in the care of ► **750 FIRST STREET, NW - WASHINGTON, DC 20002**
- Telephone No. ► **202.408.8600** FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **MAY 15, 2010**
- For calendar year **JUL 1, 2008**, or other tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**
- If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

- State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

- 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
- If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.
- 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 instructions.

8a	\$
8b	\$
8c	\$
	N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► R. H. SA Title ► CPA Date ► 2/12/10
Form 8868 (Rev. 4-2009)