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### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

2008

| De<br>Int               | partment<br>ernal Rev                             | of the Treasury<br>venue Service           | ▶ 1                                | The organization may                        | have to use a copy of                                  | of this return to                    | satisfy state report                       | ing requirem                     | ents.                    | Open to  | o Public Insp                      | pection       |
|-------------------------|---|--|------------------------------------|---|--|--------------------------------------|--|----------------------------------|--------------------------|--|------------------------------------|---------------|
| _                       | For t   | he 2008 calendar                           | year, or ta                        | x year beginning                            | 7/01   | , 20                                 | 008, and endin                             | g 6/3                            | 0                        | , 2  | 2009                               |               |
| В                       | Check   | ıf applıcable                              |                                    |   |  |                                      |  |                                  | D Employ                 | yer Identifica                                   | tion Number                        |               |
|                         | - T   | Pte  | ease use THE                       | E NOTAH BEG                                 | GAY III FOU  | UNDATION                             |  |                                  | 20-                      | 187033   | 0                                  |               |
|                         | ΧN  |  | or type. 51                        | JEMEZ CANY                                  | ON DAM RD  |                                      |  |                                  | E Teleph                 | one number                                       | <del></del>                        |               |
|                         | $\vdash$  | - 1  | See BEI                            | RNALILLO, M                                 | M 87004  |                                      |  | ľ                                | 505                      | -867-0   | 775                                |               |
|                         | $\vdash$  | j tr                                       | nstruc-<br>tions.                  |   |  |                                      |  | Ī                                |                          |  |                                    |               |
|                         | 1   | mended return                              |                                    |   |  |                                      |  |                                  | G Gross r                | receints \$                                      | 1,643,                             | 852.          |
|                         | _ <del>                                    </del> | <del></del> -                              | Name and ad                        | dress of principal offic                    | er CRYSTAL   | ECHO HA                              | WK   | H(a) Is this a                   |                          |  |                                    | X No          |
|                         | Ш.  | , , , , ,                                  | ame As (                           |   |  |                                      |  | H(b) Are all a                   |                          |  | Yes                                | No            |
| T                       | Tax   | x-exempt status                            |                                    |   | ert no )   | 4947(a)(1) oi                        | 527  | If 'No,' a                       | ittach a list            | (see instruct                                    | tions)                             | _             |
| L.                      |   |  |                                    | OM/FOUNDAT                                  |  | 13 17 (4)(1) 51                      |  | H(c) Group e                     | xemotion n               | umber ►  |                                    |               |
| K                       |   |  | Corporation                        |   | ociation Other   |                                      | L Year of Format                           | _                                |                          | State of legal                                   | domicile NM                        |               |
|                         | art I   | Summary                                    |                                    | 7.55  | ocidilori   Ocio:                                      |                                      | 1 - 1001 011 011101                        | 2000                             | 1                        | otate or regar                                   | dominate 2122                      |               |
| ۰                       | 1   | Briefly describe                           |                                    | ation's mission of                          | or most significar                                     | nt activities                        | The miss                                   | ion of                           | the N                    | lotah B  | Begav III                          |               |
| •                       | ,   | Foundation                                 |                                    |   |  |                                      |  |                                  |                          |  |                                    |               |
| ğ                       |   | lives_of N                                 |                                    |   |  |                                      |  |                                  |                          |  |                                    |               |
| Ë                       |   |  |                                    |   |  |                                      |  |                                  |                          |  |                                    |               |
| Activities & Governance | 2   | Check this box                             |                                    |   |  |                                      | disposed of mo                             | re than 25                       | % of its                 | assets   |                                    |               |
| ن<br>مو                 | 3   | Number of voting                           |                                    |   |  |                                      |  | •                                |                          | 3  |                                    |               |
| ď                       | 3 4   | Number of indep                            |                                    |   |  | ody (Part VI,                        | line 1b)                                   |                                  |                          | 4  | ·                                  |               |
| <u> </u>                | 5   | Total number of                            |                                    |   |  | •                                    | •  |                                  |                          | 6  |                                    | 25            |
| Act                     | 6 73  | Total number of<br>Total gross unre        |                                    |   |  | 12 column (                          | ~)   |                                  | •                        | 7a   |                                    | 0.            |
|                         |   | Net unrelated bu                           |                                    |   |  |                                      |  |                                  | •                        | 7b   |                                    | 0.            |
| 2010                    | <del>                                     </del>  | 1100 01110101000 0                         |                                    |   |  |                                      |  | Dr                               | ior Year                 | <del>'                                    </del> | Current Ye                         |               |
| 32                      | 8   | Contributions an                           | d grants (P                        | art VIII line 1h)                           |  |                                      |  | F                                | ioi i ear                | 80.  |                                    | 405.          |
| R 1 8                   | 9   | Program service                            |                                    |   | ı  |                                      |  |                                  | 32,7                     |  |                                    | 735.          |
| <b>₹</b>                | 10  | Investment incor                           | -                                  |   |  | ) .                                  |  |                                  | 11,9                     |  |                                    | 712.          |
| ≃ #                     | 11  |  | •                                  |   |  | •                                    |  |                                  | <u>-</u> -               |  | 399,                               |               |
| MAR 1                   | 12  | Total revenue -                            |                                    |   |  |                                      | ), line 12)                                |                                  | 44,7                     | 730.   | 543,                               |               |
|                         | 13  | Grants and simil                           | ar artiquint                       | Dend Par X c                                | olumn (A), lines                                       | 1-3)                                 |  |                                  |                          |  |                                    |               |
| <u>u</u>                | 14  | Benefits paid to                           | or for mem                         | bers (Part IX, co                           | յարի (A), line 4՝                                      | )                                    |  |                                  |                          |  |                                    |               |
| SCANNED                 | 15  | Salaries, other                            | empensation                        | on, employee be                             | nents (Part IX, c                                      | olumn (A), lı                        | nes 5-10)                                  |                                  |                          |  | 28,                                | 954.          |
| SCAN                    | 16a   | Professional fun                           | graising fee                       | s (Part 1X, colur                           | πήΩΑ), line 11e)                                       | •                                    |  |                                  |                          |  |                                    |               |
|                         | į h   | Total fundraising                          |                                    |   |  |                                      | 70,694.                                    |                                  |                          |  |                                    |               |
| w i                     | 5   <sub>17</sub> "                               | Other expenses                             |                                    |   |  |                                      |  |                                  | 194,2                    | 227  | 301,                               | 753           |
|                         |   | Total expenses.                            |                                    |   |  |                                      | 5)   |                                  | 194,2                    |  | 330,                               |               |
|                         | 19  | Revenue less ex                            |                                    | •   | •  | 11 (A), IIIle 25                     |  |                                  | -149,4                   |  | 212,                               |               |
|                         |   | Revenue less ex                            | perises ou                         | ibtract line to he                          | 111 11110 12   |                                      | <del></del>                                |                                  |                          |  |                                    |               |
| Net Assets or           | 20  | Total assets (Pa                           | -t V June 16                       | 2)  |  |                                      |  | Begini                           | ing of Y                 |  | 2,158,                             |               |
| ¥.                      | 21  | Total liabilities (F                       | •                                  | •   | • •  |                                      | •  | <del></del>                      | 526,7                    |  | 2,065,                             |               |
| ž.                      | 5 2   | •  |                                    |   |  | •                                    |  |                                  |                          |  |                                    |               |
|                         | art II  | Net assets or fur Signature                |                                    | Subtract line 2                             | 1 from line 20   |                                      |  |                                  | -119,3                   | 525.]  | 93,                                | 155.          |
|                         | artii   |  |                                    |   |  |                                      |  |                                  |                          |  |                                    |               |
|                         |   | Under penalties of<br>true, correct, and c | perjury, I decla<br>complete Decla | ne that I have examination of preparer (oth | ed this return, including<br>ner than officer) is base | ig accompanying<br>ed on all informa | schedules and state<br>tion of which prepa | ements, and to<br>rer has any kr | o the best o<br>nowledge | if my knowled                                    | ige and belief, it                 | IS            |
| C:                      | ign   | <b>                                   </b> | $\gamma (A) V$                     | 7/1/10                                      | delle to   |                                      |  | 1                                |                          |  |                                    |               |
| H                       | ere   | Signature of of                            | A V W                              |   | 1100   |                                      |  | !<br>Date                        |                          | · · · · · · · · · · · · · · · · · · ·            |                                    |               |
| • • •                   | 0.0   | 1.   | L ECHO I                           | אווזענ                                      |  |                                      |  | Execu                            |                          | )i roc   |                                    |               |
|                         |   | Type or print in                           |                                    | TAMIX                                       |  | <del></del>                          |  | Execu                            | CTAG I                   | JITEC  |                                    |               |
| _                       |   |  |                                    |   |  | ·                                    | Date                                       | Che                              | ck if                    | Prepare  | er's identifying nu<br>structions) | umber         |
| P                       | aid   |  |                                    |   | Al land  |                                      | 1  | self                             |                          | (see in:   | structions)                        |               |
|                         | re-   | Preparer's signature                       | Chad W                             | . McKinney                                  | [!]_]¶!!!L_  | ~:                                   | 2/17/1                                     |                                  | oloyed P                 | □ <sub>N/A</sub>                                 |                                    |               |
| pa                      | arer's  |  |                                    | ey & Assoc                                  | lates, CPAs  | LLC                                  | 1-11-1111                                  | <b>/</b>                         | <del></del> -            | 121/12   |                                    |               |
|                         | se  | Firm's name (or yours if self-             |                                    |   | laza Lane S  |                                      | <u> </u>                                   | ──┤_,                            | ► N                      | /A   |                                    |               |
| O                       | nly   | employed),<br>address, and                 |                                    | erque, NM 8                                 |  | ATTE TO                              |  | EIN                              |                          |  | 896-3897                           | <del></del> 7 |
| M                       | av the I  | IRS discuss this r                         |                                    |   |  | instructions)                        |  |                                  | ile IIU                  |  | Yes                                | No            |
| 1416                    | انخانا وم   | 0.00000 1110 1                             | CLUITI WILL L                      | THE PROPERTY SING                           | ···· ADDAG. (366                                       |                                      |  | •                                |                          | 43   | -,                                 | 1             |

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

TEEA0112L 12/22/08

Form 990 (2008)

| Forn      | h 990 (2008) THE NOTAH BEGAY III FOUNDATION   | 20-1         | <u>.870330</u> |                | Page 2       |
|-----------|---|--------------|----------------|----------------|--------------|
| Par       | rt III Statement of Program Service Accomplishments (see instructions)  |              |                |                |              |
| 1         | Briefly describe the organization's mission   |              |                |                |              |
|           | The mission of the Notah Begay III Foundation is to reduce the  | incidenc     | es of d        | besit          | v            |
|           | and diabetes and advance the lives of Native American youth thr   |              |                |                | <i>1</i>     |
|           | wellness programming .  |              |                |                |              |
|           |   |              |                |                | ·            |
|           | Did the organization undertake any significant program services during the year which were not listed   | on the prior |                |                |              |
|           | Form 990 or 990-EZ?   | on the prior |                | es X           | Na           |
|           |   | • •          | Ц,             | es X           | No           |
| _         | If 'Yes,' describe these new services on Schedule O.  | •            | п,             | . 🗔            |              |
| 3         | Did the organization cease conducting, or make significant changes in how it conducts, any program  | services /   | י נו           | es X           | No           |
| _         | If 'Yes,' describe these changes on Schedule O.   |              |                |                |              |
| 4         | Describe the exempt purpose achievements for each of the organization's three largest program servi and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants   | ces by expen | ses. Secti     | on 501(c)      | (3)          |
|           | expenses, and revenue, if any, for each program service reported  | and anocatio | i is to other  | 3, 1110 101    | lai          |
|           |   |              |                |                |              |
|           |   |              |                |                |              |
| 4 a       | (Code) (Expenses \$ 240,714. including grants of \$   |              |                |                |              |
|           | See Schedule O  |              |                |                |              |
|           | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~   |              |                |                |              |
|           |   |              |                |                | <del>_</del> |
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|           |   |              |                |                |              |
| 4b        | (Code (Expenses \$  | _) (Revenue  | \$             |                | )            |
|           |   |              |                | . <b>– –</b> – |              |
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|           |   |              |                |                |              |
| 4 c       | : (Code) (Expenses \$ including grants of \$  | ) (Revenue   | \$             |                | )            |
|           |   |              |                | <b></b>        |              |
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|           |   |              |                |                |              |
| 4 d       | Other program services. (Describe in Schedule O.)   |              |                |                |              |
|           | (Expenses \$ including grants of \$) (Revenue   | \$           |                | )              |              |
| 4 e       | Total program service expenses ► \$ 240,714. (Must equal Part IX, Line 25, column   |              |                |                |              |
| _ <u></u> | many transfer and the many advanced and the party of the | <del></del>  |                |                |              |

### Part IV Checklist of Required Schedules

|          |   |      | Yes   | No   |
|----------|---|------|-------|------|
| 1        | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A   | 1    | x     |      |
| 2        | is the organization required to complete Schedule B, Schedule of Contributors?  | 2    | Х     |      |
| 3        | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I  | 3    |       | X    |
| 4        | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.   | 4    |       | Х    |
| 5        | Section 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III  | 5    |       |      |
| 6        | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I                   | 6    |       | Х    |
| 7        | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II                                       | 7    |       | 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   |       | Х    |
| 11       | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, 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     |      |
|          | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule $E$   | 13   |       | _X   |
| 14 a     | a Did the organization maintain an office, employees, or agents outside of the U.S.?  | 14a  |       | X    |
| t        | 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.? <i>If 'Yes,' complete Schedule F, Part I</i>                               | 14b  |       | Х    |
| 15       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II                                       | 15   |       | Х    |
|          | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III   | 16   |       | X    |
|          | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I  | 17   | Х     | Х    |
|          | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III            | 18   | ^     | Х    |
| 19<br>20 | · · · · · · · · · · · · · · · · · · ·   | 20   |       | X    |
| 21       |   | 21   |       | X    |
|          | 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   |       | Х    |
|          | Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J   | 23   |       | Х    |
| 24 a     | a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and                 |      |       |      |
|          | complete Schedule K. If 'No,'go to question 25 .  | 24a  |       | X    |
| Ŀ        | 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 any tax-exempt bonds?  | 24c  |       |      |
| C        | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?   | 24d  |       |      |
| 25 a     | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I   | 25a  |       | Х    |
| t        | 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  |       | Х    |
| 26       | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II .            | 26   |       | Х    |
| 27       | 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   |       | Х    |
|          |   | Carm | 000 / | 2000 |

### 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 Х **b** Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV . . . 28b Х 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 Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 30 X contributions? If 'Yes,' complete Schedule M X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part L. 31 32 32 Х 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 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 34 Х Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 Х 35 Part V, line 2. 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 36

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 BAA

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37

10.00

Page 5

| ra  | Statements Regarding Other IKS I lings and Tax Compliance   |         |       |        |
|-----|---|---------|-------|--------|
|     |   |         | Yes   | No     |
| 1   | a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns Enter -0- if not applicable   |         |       |        |
|     | b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  | 1       |       |        |
|     | c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  | 1 c     | X     | _1     |
| 2   | a 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   |         |       |        |
| 2   | b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  | 2b      |       |        |
|     | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)   |         |       |        |
| 3   | a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  | 3a      |       | Х      |
|     | b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q   | 3b      |       |        |
| 4   | a 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      |       | Х      |
|     | 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  |         | _     |        |
| 5   | a 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?  | 5 c     |       |        |
| 6   | a Did the organization solicit any contributions that were not tax deductible?  | 6a      |       | Х      |
|     | <b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? .  | 6b      |       |        |
| 7   | Organizations that may receive deductible contributions under section 170(c).   |         |       |        |
|     | a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?   | 7a      |       | Х      |
|     | b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?   | 7Ь      |       |        |
|     | c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  | 7с      |       | Х      |
|     | d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d  | 1       |       |        |
|     | e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   | 7 e     |       | X      |
|     | f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  | 7 f     |       | X      |
|     | g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  | 7g      |       | X      |
|     | h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?   | 7h      |       | Х      |
| 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? | 8       |       |        |
|     | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.   |         |       |        |
|     | a Did the organization make any taxable distributions under section 4966?   | 9a      |       | X      |
|     | <b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?   | 9Ь      |       | Х      |
|     | Section 501(c)(7) organizations. Enter.   |         |       |        |
|     | a Initiation fees and capital contributions included on Part VIII, line 12  |         |       |        |
|     | b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b  |         |       |        |
| 11  | Section 501(c)(12) organizations. Enter:  |         |       |        |
|     | a Gross income from other members or shareholders   |         |       |        |
|     | b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)   |         |       | <br>   |
|     | a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  | 12a     |       |        |
|     | b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b   | <u></u> | 000 / | (2000) |
| 3A/ |   | rorm    | 990 ( | (2008) |

100,000

BAA

Form 990 (2008)

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

| Sec      | tion A.                                    | Governing Body and Management   |   |              |         |            |
|----------|--|---|---|--------------|---------|------------|
|          | For each                                   | 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, s, or changes in Schedule O See instructions.   | describe the circumstances,                             |              | Yes     | No         |
| 1 a      | Enter the                                  | number of voting members of the governing body .  | 1a 4  | ]            |         | ,          |
| ŀ        | Enter the                                  | number of voting members that are independent .   | 1b 4  | ]            |         |            |
| 2        | Did any officer, d                         | officer, director, trustee, or key employee have a family relationship or a business re<br>irector, trustee or key employee?  | elationship with any other                              | 2            |         | <u></u>    |
| 3        | Did the o                                  | rganization delegate control over management duties customarily performed by or its, directors or trustees, or key employees to a management company or other person.     | under the direct supervision on?                        | 3            |         | Х          |
| 4        | Did the c                                  | rganization make any significant changes to its organizational documents  |   | 4            |         | X          |
|          | since the                                  | prior Form 990 was filed? .   | •   |              |         |            |
| 5        | Did the c                                  | rganization become aware during the year of a material diversion of the organizatio   | n's assets? .   | _ 5          |         | _X_        |
| 6        | Does the                                   | organization have members or stockholders?  |   | _6           |         | _X_        |
| 7 a      | Does the                                   | organization have members, stockholders, or other persons who may elect one or r ${\sf g}$ body?  | more members of the                                     | 7a           |         | x_         |
| t        | Are any                                    | decisions of the governing body subject to approval by members, stockholders, or of   | ther persons? .   | 7b           |         | X_         |
| 8        | Did the o                                  | rganization contemporaneously document the meetings held or written actions unde<br>ving.   | ertaken during the year by                              |              |         |            |
| a        | The gove                                   | rning body?   | • •   | 8a           | Х       |            |
| t        | Each cor                                   | nmittee with authority to act on behalf of the governing body?  |   | 8b           | X       |            |
| 9 a      | Does the                                   | organization have local chapters, branches, or affiliates?  | •   | 9a           |         | <u>X</u>   |
| t        | If 'Yes,' o<br>and bran                    | does the organization have written policies and procedures governing the activities of<br>thes to ensure their operations are consistent with those of the organization?  | of such chapters, affiliates,                           | 9ь           |         |            |
| 10       | Was a co                                   | py of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990 $$ S | i? All organizations must<br>ee Schedule 0              | 10           | х       |            |
| 11       | ls there a                                 | any officer, director or trustee, or key employee listed in Part VII, Section A, who callion's mailing address? If 'Yes,' provide the names and addresses in Schedule O   | nnot be reached at the                                  | 11           |         | Х          |
| Sec      | tion B.                                    | Policies  |   |              |         |            |
|          |  |   |   |              | Yes     | No         |
| 12 a     | Does the                                   | organization have a written conflict of interest policy? If 'No,' go to line 13   |   | 12a          | Х       |            |
| t        | Are office<br>to conflic                   | ers, directors or trustees, and key employees required to disclose annually interests ts?   | that could give rise                                    | 12b          | x_      |            |
| C        | Does the                                   | organization regularly and consistently monitor and enforce compliance with the position $0.000\mathrm{mm}$   | licy? If 'Yes,' describe in                             | 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 p<br>persons,                      | rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and dec      | approval by independent cision.                         |              |         |            |
| ā        | The orga                                   | nization's CEO, Executive Director, or top management official?   |   | 15 a         |         | <u>X</u>   |
| Ł        | Other off                                  | cers of key employees of the organization?  |   | 15 b         |         | X          |
|          | Describe                                   | the process in Schedule O (see instructions)  |   |              | İ       |            |
| 16 a     |  | rganization invest in, contribute assets to, or participate in a joint venture or similaring the year?  | arrangement with a taxable                              | 16a          |         | <u>X</u>   |
| t        | in joint v                                 | nas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard  | to evaluate its participation the organization's exempt | 16b          | ·       | i          |
| 500      | status wi                                  | th respect to such arrangements?  |   | 100          |         |            |
|          | tion C                                     | <u> </u>  |   |              |         |            |
| 17       | tion C.                                    | Disclosures   |   |              | _       |            |
|          | List the s                                 | Disclosures tates with which a copy of this Form 990 is required to be filed ► NM   |   |              |         |            |
|          | Section 6                                  | Disclosures tates with which a copy of this Form 990 is required to be filed ► NM   | nd 990-T (501(c)(3)s only) a                            | <br>vailable | e for p | <br>oublic |
| 18       | List the s<br>Section 6<br>inspectio       | Disclosures  tates with which a copy of this Form 990 is required to be filed ► NM  |   |              |         |            |
| 18<br>19 | Section 6 inspection Own Describe statemer | Disclosures tates with which a copy of this Form 990 is required to be filed ► NM   | nents, conflict of interest pol                         | icy, an      | d fina  |            |

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

### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

| (A)                          | (B)  | (c)                            |                       |                   |                |                              |          | (D)   | (E)   | <b>(F)</b>   |
|------------------------------|--|--------------------------------|-----------------------|-------------------|----------------|------------------------------|----------|---|---|--|
| Name and Title               | Average<br>hours<br>per week                     | individual trustee or director | Institutional trustee | (check<br>Officer | a Key employee | that employee                | Former   | Reportable compensation from the organization (W-2/1099-MISC) | Reportable<br>compensation from<br>related organizations<br>(W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
|                              |  | trustee                        | al trustee            |                   | oyee           | Highest compensated employee |          |   |   | organizations  |
| NOTAH BEGAY, III             |  |                                |                       |                   |                |                              |          |   |   |  |
| President                    | 0  | X                              |                       | Х                 |                |                              | -        | 0.  | 0.  | 0.   |
| WILSON PIPESTEM              | 1  |                                |                       | ١.,               |                |                              |          |   |   | •  |
| Chairman                     | 0  | X                              | -                     | Х                 |                | -                            |          | 0.  | 0.  | 0.   |
| CHAD MCKINNEY                | 1  | .,                             |                       | ٠,                |                |                              |          |   |   | 0  |
| Treasurer                    | 0  | X                              |                       | Х                 |                |                              | -        | 0.  | 0.  | <u> </u>   |
| CRYSTAL ECHO HAWK            | 40   |                                |                       |                   | v              |                              |          | 22 100  | 0.  | 0.   |
| Executive Direc JAI LAKSHMAN | 40   |                                | -                     |                   | Х              |                              | $\vdash$ | 23,188.   | U.  | <u> </u>   |
| Vice President               | 0  | X                              |                       | x                 |                |                              |          | 0.  | 0.  | 0.   |
| vice riesident               | <del>                                     </del> | <b>├</b> ^                     |                       | ^                 | -              | -                            | -        | 0.  | <u> </u>  |  |
|                              | -  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |
|                              |  |                                |                       |                   |                |                              |          |   |   |  |

| Part VII Section A. Officers, Directors, Trus   | iees, r  | ve y         | <u> </u>              | ipic         | Jyc          | <del>C</del> 3,                 | all      | u mgnest con                           | ipensaced Lim                            | noyees (com.)                |
|---|--|--------------|-----------------------|--------------|--------------|---------------------------------|----------|--|--|------------------------------|
| (A)   | (B)  |              |                       | (            | c)           |                                 |          | (D)                                    | (E)                                      | (F)                          |
| Name and Title  | Average<br>hours                                 |              |                       | (checl       | k all t      | hat a                           |          | Reportable compensation from           | Reportable compensation from             | Estimated<br>amount of other |
|   | per week   | 악교           | Inst                  | Officer      | é            | High                            | Former   | the organization                       | related organizations<br>(W-2/1099-MISC) | compensation<br>from the     |
|   |  | irec vidu    | T T                   | ğ            | епрюуее      | nest<br>Hoye                    | ner      | (W-2/1099-MISC)                        | (W-2/1095-WISC)                          | organization                 |
|   |  | Q =          | <u> </u>              |              | ploy         | con                             |          |  |  | and related<br>organizations |
|   |  | uste         | Institutional trustee |              | 8            | pen                             |          |  |  |                              |
|   |  | , o          | ee                    |              |              | Highest compensated<br>employee |          |  |  |                              |
|   |  |              |                       |              |              | à                               |          |  |  |                              |
|   |  |              | $\Box$                | 1            | Г            |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | i -  | İ            |                       |              | 1            |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | <u> </u>   |              |                       | <u> </u>     |              |                                 |          |  | #11#1 = 1                                |                              |
|   |  | ļ            |                       |              |              |                                 |          |  |  |                              |
|   | <del> </del>                                     |              |                       |              |              |                                 | <b></b>  |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | <u> </u>   |              |                       |              | <u> </u>     |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  | -            | -                     |              | <del> </del> |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | <del> </del>                                     |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | <del>                                     </del> |              |                       | -            |              |                                 |          | <u> </u>                               | <u> </u>                                 |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       | _            | -            |                                 |          |  |  | <del></del>                  |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | -  |              | -                     | -            | ┢            | -                               |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   | <u> </u>   |              |                       |              |              |                                 | <u> </u> | <u> </u>                               |  |                              |
|   |  | ļ            |                       |              |              |                                 |          |  |  |                              |
|   | 1  | <del> </del> | _                     |              |              |                                 |          |  | 1  |                              |
|   | 1  | 1            |                       |              |              |                                 |          |  |  |                              |
|   |  | <u> </u>     |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  | <u> </u>     | <u></u>               |              | <u> </u>     |                                 | Ļ        | 02.100                                 |  | ļ                            |
| 1 b Total   |  |              |                       |              |              |                                 | <u> </u> | 23,188.                                | 0.                                       | 0.                           |
| 2 Total number of individuals (including those in 1a)   | who rec  | eive         | d m                   | ore 1        | than         | \$10                            | 00,0     | 00 in reportable c                     | ompensation from                         | the                          |
| organization • 0  |  |              |                       |              |              |                                 |          |  |  | 1                            |
|   |  |              |                       |              |              |                                 |          |  |  | Yes No                       |
| 3 Did the organization list any former officer, director<br>on line 1a? If 'Yes,' complete Schedule J for such i  | or trust   | ee, l        | кеу                   | emp          | oloye        | ee, c                           | or hi    | ghest compensate                       | ed employee                              |                              |
| on line 1a? If 'Yes,' complete Schedule J for such i  | ndıvıdua   | al           |                       |              |              | _                               |          |  |  | 3 X                          |
| 4 For any individual listed on line 1a, is the sum of re<br>the organization and related organizations greater to | portable   | on or        | ກpe<br>ທາ             | nsa<br>If 'Y | tion         | and                             | loth     | ier compensation<br>e Schedule I for s | from<br>such                             |                              |
| individual  | nan wie  | ,0,00        | ,,                    |              |              | 00                              | pict     |  |  | 4 X                          |
| 5 Did any person listed on line 1a receive or accrue of   | omnens   | atio         | n fr                  | om a         | anv          | unre                            | alate    | ed organization for                    | Services                                 |                              |
| 5 Did any person listed on line 1a receive or accrue or<br>rendered to the organization? If 'Yes,' complete Sc    | hedule .   | for          | suc                   | h pe         | erso         | n                               | Jiate    | ·                                      | Scrvices                                 | 5 X                          |
| Section B. Independent Contractors  |  |              |                       |              |              |                                 |          |  |  |                              |
| 1 Complete this table for your five highest compensa  | ted inde   | pen          | dent                  | cor          | ntrac        | ctors                           | tha      | at received more t                     | han \$100,000 of                         |                              |
| compensation from the organization  |  |              |                       |              |              |                                 |          | <u> </u>                               | · · · · · · · · · · · · · · · · · · ·    |                              |
| (A)   | _  |              |                       |              |              |                                 |          | (B)                                    | )<br>of Convene                          | (C)                          |
| Name and business addres  | S  |              |                       |              |              |                                 |          | Description                            | of Services                              | Compensation                 |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          |  |  |                              |
|   |  |              |                       |              |              |                                 |          | <u> </u>                               |  |                              |
| 2 Total number of independent contractors (including  | those ii   | n 1)         | who                   | rec          | eive         | ed m                            | ore      | than \$100,000 in                      |  |                              |
| compensation from the organization ► 0  |  |              |                       |              |              |                                 |          |  |  |                              |

| Га   | t viii Statement of Revenue  |                             |   |  | T   |
|--|--|-----------------------------|---|--|---|
| 1                | ÷  | <b>(A)</b><br>Total revenue | <b>(B)</b> Related or exempt function revenue | <b>(C)</b><br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| <u>"</u>   | 1a Federated campaigns 1a  |                             |   |  |   |
| N S  | · · · · · · · · · · · · · · · · · · ·  |                             |   |  | t .   |
| & á  |  |                             |   |  |   |
| S, S   | c Fundraising events. 1c 7,415.  |                             |   |  | ,   |
| 투운   | d Related organizations . 1d   |                             |   |  | 1   |
| 3,≝  | e Government grants (contributions) 1e   |                             |   |  |   |
| S S  | 6 All albert and behaviors with another and  |                             |   |  |   |
| 불밀   | f All other contributions, gifts, grants, and similar amounts not included above 1f 71, 990. |                             |   |  |   |
| 풀질   | Noncash contribus included in lns 1a-1f: \$  |                             |   |  | <u>'</u>  |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS |  | 79,405.                     |   |  |   |
|  | h Total. Add lines 1a-1f  Business Code  | 73,403.                     |   |  | · · · · · · · · · · · · · · · · · · ·                         |
| ₹  |  | ··· 60 735                  | CO 735  |  | '   |
| <b>E</b>   | 2a JUNIOR GOLF & SOCCER PROG 900099  | 60,735.                     | 60,735.                                       | <u> </u>                                       |   |
| m<br>E   | b  |                             |   |  |   |
| 울  | c  |                             |   |  |   |
| SER  | d  |                             |   |  |   |
| ξ  | e  |                             |   |  | <u> </u>  |
| 8  | f All other program service revenue  | -                           |   |  |   |
| PROGRAM SERVICE REVENUE                                | g Total. Add lines 2a-2f   | 60,735.                     |   |  |   |
| _  |  | 20,10,31                    |   |  |   |
|  | 3 Investment income (including dividends, interest and other similar amounts)                | 3,712.                      |   |  | 3,712.  |
|  | 4 Income from investment of tax-exempt bond proceeds   | -/:                         |   |  |   |
|  |  |                             |   |  |   |
|  | 5 Royalties (i) Real (ii) Personal   |                             |   |  |   |
|  |  |                             |   |  |   |
|  | 6a Gross Rents   |                             |   |  |   |
|  | <b>b</b> Less: rental expenses   |                             |   |  | l i   |
|  | c Rental income or (loss)  |                             |   |  |   |
|  | d Net rental income or (loss) ▶  |                             |   |  |   |
|  | 7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other          |                             |   |  |   |
|  | <b>b</b> Less: cost or other basis and sales expenses  |                             |   |  |   |
|  | c Gain or (loss)   |                             |   |  |   |
|  | d Net gain or (loss)   |                             |   |  |   |
| UE   | 8a Gross income from fundraising events (not including \$                                    |                             |   |  | ı   |
| OTHER REVEN  | of contributions reported on line 1c)  |                             |   |  |   |
| RE   | See Part IV, line 18 a 1,500,000.  |                             |   | ·  | İ   |
| ĘR   | <b>b</b> Less direct expenses . <b>b</b> 1,100,665.  |                             |   |  | 1   |
| 6  | c Net income or (loss) from fundraising events   | 399,335.                    | 399,335.                                      |  |   |
|  |  | 333,333.                    | 333,333.                                      |  |   |
|  | 9a Gross income from gaming activities<br>See Part IV, line 19                               |                             |   |  | †<br>†  |
|  | b Less direct expenses b   |                             | - <del> </del>                                |  | i   |
|  | c Net income or (loss) from gaming activities  | _                           |   |  |   |
|  | 10a Gross sales of inventory, less returns and allowances a                                  |                             |   |  | 1   |
|  | <b>b</b> Less. cost of goods sold <b>b</b>   |                             |   |  |   |
|  | c Net income or (loss) from sales of inventory   |                             |   |  |   |
| į  | Miscellaneous Revenue Business Code  |                             |   |  |   |
|  | 11a  |                             |   |  |   |
|  | b  |                             |   |  |   |
|  |  |                             |   |  |   |
|  | d All other revenue .  |                             |   |  |   |
|  |  | <del></del>                 |   | <del></del> -                                  | <del></del>   |
|  | e Totali Add Illies Tra-Tru  |                             |   |  |   |
|  | 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e                    | 543,187.                    | 460,070.                                      | 0.   | 3,712.  |

Part IX | Statement of Functional Expenses

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

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

|     | not include amounts reported on lines  | (A) Total expenses | (B) Program service | (C) Management and                    | (D)<br>Fundraising                    |
|-----|--|--------------------|---------------------|---------------------------------------|---------------------------------------|
| 6b, | 7b, 8b, 9b, and 10b of Part VIII.  | Total expenses     | expenses            | general expenses                      | expenses                              |
| 1   | Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21  |                    |                     |                                       |                                       |
| 2   | Grants and other assistance to individuals in the U.S. See Part IV, line 22.   |                    |                     |                                       | i.                                    |
| 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   | 23,188.            | 18,550.             | 2,319.                                | 2,319.                                |
| 6   | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)                         | 0.                 | 0.                  | 0.                                    | 0.                                    |
| 7   | Other salaries and wages   |                    |                     |                                       |                                       |
| 8   | Pension plan contributions (include section 401(k) and section 403(b) employer contributions)  |                    |                     |                                       |                                       |
| 9   | Other employee benefits .  |                    |                     |                                       |                                       |
| 10  | Payroll taxes .  | 5,766.             | 4,612.              | 577.                                  | 577.                                  |
| 11  | Fees for services (non-employees)  |                    |                     |                                       |                                       |
| a   | Management .   |                    |                     |                                       |                                       |
| t   | Legal  | 1,575.             |                     | 1,575.                                |                                       |
| C   | : Accounting   | 5,098.             |                     | 3,950.                                | 1,148.                                |
| C   | Lobbying .   |                    |                     |                                       | · · · · · · · · · · · · · · · · · · · |
| e   | Prof fundraising svcs. See Part IV, In 17  |                    |                     |                                       |                                       |
| f   | Investment management fees .   |                    |                     |                                       |                                       |
| ç   | Other  |                    |                     | <u></u>                               |                                       |
| 12  | Advertising and promotion .  | 18,451.            | 18,451.             |                                       |                                       |
| 13  | Office expenses .  |                    |                     |                                       |                                       |
| 14  | Information technology .   |                    |                     |                                       |                                       |
| 15  | Royalties  |                    |                     |                                       | <u> </u>                              |
| 16  | Occupancy .  | 2,600.             | 2,600.              |                                       |                                       |
| 17  | Travel   | 9,851.             | 3,362.              | 6,489.                                |                                       |
| 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 .  |                    |                     |                                       |                                       |
|     | Insurance  | 491.               |                     | 491.                                  |                                       |
| 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   | CONTRACT SERVICES  | 108,090.           | 42,000.             |                                       | 66,090.                               |
|     | PROGRAM EXPENSES SOCCER  | 49,633.            | 49,633.             |                                       |                                       |
|     | PUBLIC RELATIONS   | 35,376.            | 35,376.             |                                       |                                       |
| c   | TRANSPORTATION   | 13,377.            | 13,377.             |                                       |                                       |
|     | Printing and Publications  | 11,783.            | 11,783.             |                                       |                                       |
|     | All other expenses   | 45,428.            | 40,970.             | 3,898.                                | 560.                                  |
|     | Total functional expenses. Add lines 1 through 24f   | 330,707.           | 240,714.            | 19,299.                               | 70,694.                               |
|     | Joint Costs. Check here ► If following   |                    |                     | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
|     | SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation           |                    |                     |                                       |                                       |
| BAA |  |                    |                     |                                       | Form <b>990</b> (2008)                |

|             |            |   | (A)<br>Beginning of year |        | (E<br>End o | <b>3)</b><br>f year | •           |
|-------------|------------|---|--------------------------|--------|-------------|---------------------|-------------|
|             | 1          | Cash — non-interest-bearing   | 10,765.                  | 1      |             | 8,0                 | 071.        |
|             | 2          | Savings and temporary cash investments  | 382,334.                 | 2      | 2,1         | 33,5                |             |
|             | 3          | Pledges and grants receivable, net  |                          | 3      |             |                     |             |
|             | 4          | Accounts receivable, net  | 14,353.                  | 4      |             | 15,0                | 000.        |
|             | 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))   |                          |        | 21 hrs. 12  |                     |             |
|             |            | and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L   |                          | 6      |             |                     |             |
| ASSETS      | 7          | Notes and loans receivable, net   |                          | 7      |             |                     |             |
| Ē           | 8          | Inventories for sale or use   |                          | 8      |             | _                   |             |
| Ś           | 9          | Prepaid expenses and deferred charges   |                          | 9      |             |                     |             |
|             | 10 a       | Land, buildings, and equipment cost basis . 10a 2,225.  |                          |        |             |                     |             |
|             | b          | Less accumulated depreciation Complete Part VI of   |                          |        |             |                     |             |
|             |            | Schedule D 10b  |                          | 10 c   | ·           | 2,2                 | 225.        |
|             | 11         | Investments – publicly-traded securities  |                          | 11     |             |                     |             |
|             | 12         | Investments – other securities. See Part IV, line 11  |                          | 12     |             |                     |             |
|             | 13         | Investments - program-related. See Part IV, line 11   |                          | 13     |             |                     |             |
|             | 14         | Intangible assets   |                          | 14     |             |                     |             |
|             | 15         | Other assets See Part IV, line 11   |                          | 15     |             |                     | _           |
|             | 16         | Total assets. Add lines 1 through 15 (must equal line 34)   | 407,452.                 | 16     |             | 58,8                |             |
|             | 17         | Accounts payable and accrued expenses   | 26,777.                  | 17     |             | 62 <i>,</i> 7       | <u>758.</u> |
|             | 18         | Grants payable .  |                          | 18     |             |                     |             |
|             | 19         | Deferred revenue  | 500,000.                 | 19     | 2,0         | 00,0                | <u>)00.</u> |
| L           | 20         | Tax-exempt bond liabilities .   |                          | 20     |             |                     |             |
| B           | 21         | Escrow account liability Complete Part IV of Schedule D   |                          | 21     |             |                     |             |
|             | 22         | Payables to current and former officers, directors, trustees, key employees,  |                          |        |             |                     |             |
| L<br>I<br>T |            | highest compensated employees, and disqualified persons Complete Part II  |                          | 22     |             |                     |             |
| E           | 22         | of Schedule L   | <del></del>              | 23     |             |                     |             |
| 5           | 23         | Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable .   | <del></del>              | 24     |             |                     |             |
|             | 24<br>25   | Other liabilities. Complete Part X of Schedule D  |                          | 25     |             | 2                   | 958.        |
|             | 26         | Total liabilities. Add lines 17 through 25.   | 526,777.                 | 26     | 2 0         | 65,7                |             |
|             | _20        | Organizations that follow SFAS 117, check here X and complete lines   | 520,777.                 |        | 2,0         | 00,                 |             |
| N<br>E<br>T |            | 27 through 29 and lines 33 and 34.  |                          |        |             |                     |             |
|             | 27         | Unrestricted net assets   | -119,325.                | 27     |             | 93,1                | L55.        |
| ASSET       | 28         | Temporarily restricted net assets   |                          | 28     |             |                     |             |
| Š           | 29         | Permanently restricted net assets   |                          | 29     |             |                     |             |
| Q<br>R      |            | Organizations that do not follow SFAS 117, check here ► 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, and equipment fund   |                          | 31     |             |                     |             |
| 田々し名えて匠の    | 32         | Retained earnings, endowment, accumulated income, or other funds  |                          | 32     |             | •                   |             |
| Ñ           | 33         | Total net assets or fund balances.  | -119,325.                | 33     |             | 93,1                | 55.         |
| Š           | 34         | Total liabilities and net assets/fund balances  | 407,452.                 | 34     | 2,1         | 58,8                | 371.        |
| Pa          | rt X       |   |                          |        |             |                     |             |
|             |            |   |                          |        |             | Yes                 | No          |
| 1           | Acc        | counting method used to prepare the Form 990: Cash X Accrual  | Other                    |        |             |                     |             |
| 2           | a We       | ere the organization's financial statements compiled or reviewed by an independent  | accountant?              |        | . 2a        |                     | X           |
|             |            | ere the organization's financial statements audited by an independent accountant?   |                          |        | . 2b        | Х                   |             |
|             |            | Yes' to 2a or 2b, does the organization have a committee that assumes responsibilities, or compilation of its financial statements and selection of an independent acco | y for oversight of the a | udıt,  |             |                     | _<br>       |
|             |            |   |                          |        | 2c          |                     | X           |
| 3           | a As<br>Δι | a result of a federal award, was the organization required to undergo an audit or audit Act and OMB Circular A-133?   | dits as set forth in the | Single | 3a          |                     | х           |
|             |            | Yes,' did the organization undergo the required audit or audits?  |                          |        | 3b          |                     |             |
| BA          |            | Too are are argumental arrange the required dealt of dualte   |                          |        |             | 990 (               | (2008)      |

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

**Public Charity Status and Public Support** 

OMB No 1545-0047 2008

Department of the Treasury Internal Revenue Service

To be completed by all section 501 (cχ3) organizations and section 4947(aχ1) nonexempt charitable trusts.

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

Open to Public Inspection

|        | if the organization   |   |  |                         |   |                  |  | ' '                          |  | ion number                   |                       |           |
|--------|---|---|--|-------------------------|---|------------------|--|------------------------------|--|------------------------------|-----------------------|-----------|
|        | NOTAH BEGAY I   |   |  |                         |   |                  |  |                              | 370330                                   |                              |                       | _         |
| Part   |   |   | s (All organizations   |                         |   |                  | part.)                                       | (see ı                       | nstruct                                  | ions)                        |                       |           |
| The o  |   |   | ise it is. (Please check o   |                         |   |                  |  |                              |  |                              |                       |           |
| 1      | A church, conventi  | on of churches or ass   | ociation of churches des   | cribed in               | section                                   | 170(b)           | (1)(A)(i)                                    | •                            |  |                              |                       |           |
| 2      |   |   | A)(ii). (Attach Schedule   |                         |   |                  |  |                              |  |                              |                       |           |
| 3      |   |   | e organization described   |                         |   |                  |  |                              |  |                              |                       |           |
| 4      | A medical research  | n organization operate  | d in conjunction with a h  | nospital (              | describe                                  | d in sec         | tion 17                                      | 0(b)(1)(A                    | XXIII). Er                               | iter the hos                 | spital's              |           |
|        | name, city, and sta   | ate   |  |                         |   |                  |  |                              |  |                              |                       |           |
| 5      | ☐ 170(b)(1)(A)(iv). ((  | Complete Part II.)  | of a college or universit  |                         |   |                  |  | nmental                      | unit des                                 | scribed in s                 | section               |           |
| 6<br>7 |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
| 8      | A community trust   | described in section  | 170(b)(1)(A)(vi). (Comple  | ete Part I              | 1)  |                  |  |                              |  | •                            |                       |           |
| 9      | from activities related investment income<br>June 30, 1975. See | ed to its exempt function<br>and unrelated busine<br>a <b>section 509(a)(2).</b> (C |  | eptions, a<br>section   | and (2) r<br>511 tax)                     | o more to from b | han 33-<br>usiness                           | 1/3 % of<br>es acqui         | its suppo<br>red by th                   | ort from gros<br>ne organiza | SS                    | r         |
| 10     |   |   | exclusively to test for pe   |                         |   |                  |  |                              |  |                              |                       |           |
| 11     | more publicly supr  | orted organizations o   | exclusively for the bene<br>lescribed in section 509(<br>zation and complete line                    | (a)(1) or               | section                                   | 509(a)(2         | ctions o<br>2). See                          | of, or car<br><b>section</b> | rry out th<br><b>509(a)(3</b><br>—       | ne purpose<br>). Check ti    | s of one<br>he box th | or<br>lat |
|        | <b>a</b> Type I   | <b>b</b> Type II  |  | II — Fund               |   |                  |  |                              | d 🗌                                      | Type III-                    |                       |           |
| е      |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
| f      | If the organization check this box                              |   | ermination from the IRS  |                         |   |                  |  | •                            | • •                                      |                              | n, [                  |           |
| g      | Since August 17, 2  | 2006, has the organiza  | ition accepted any gift of   | or contrib              | ution fr                                  | om any           | of the fo                                    | ollowing                     | persons                                  | ?                            |                       |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              | Yes N                 | lo        |
|        | (i) a person who  | directly or indirectly  | controls, either alone or  | together                | with pe                                   | rsons d          | escribe                                      | d in (ii) a                  | and (III)                                | 11 g (i)                     |                       |           |
|        |   |   | upported organization?   |                         | •   | • •              |  |                              |  | 11 g (ii)                    |                       |           |
|        | •                         | nber of a person desc   |  |                         | •   | •                | •  |                              | •  | . 11g (iii)                  | -                     |           |
|        | · · · · · · · · · · · · · · · · · · ·                           |   | n described in (i) or (ii) a   |                         |   | · ·              |  |                              |  |                              |                       |           |
| h      |   | 1   | the organizations the org  |                         |   |                  |  | 6.3.1                        |  | 6 u.D. A                     | 4 of Sugges           |           |
|        | (i) Name of Supported<br>Organization                           | (ii) EIN  | (iii) Type of organization<br>(described on lines 1-9<br>above or IRC section<br>(see instructions)) | organizat<br>(i) lister | Is the tion in cold in your trining ment? | the organ        | ou notify<br>ization in<br>(i) of<br>ipport? | l organizati                 | s the<br>ion in col<br>zed in the<br>S ? | (VII) Amour                  | nt of Suppor          |           |
|        |   |   |  | Yes                     | No  | Yes              | No   | Yes                          | No                                       |                              | · · ·                 |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        | <u></u> -   |   |  | <u> </u>                | <u></u>                                   |                  |  |                              |  |                              |                       |           |
|        |   |   |  |                         | ]   |                  |  |                              |  |                              |                       |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        |   |   |  | <del> </del>            |   | ļ                |  |                              |  | . <u>-</u> -                 |                       |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        |   |   |  | <b>†</b>                |   |                  |  |                              |  |                              |                       | _         |
| Total  |   |   |  |                         |   |                  |  |                              |  |                              |                       |           |
|        |   | <del></del>   |  |                         |   |                  |  |                              |  |                              |                       | _         |

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 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total (a) 2004 beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') 32,792. 279,928. 57,875. 49,121 140,140. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to 0. the public without charge. 0. 57,875. 49,121. 32,792 140,140 928. 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 0<u>.</u> shown on line 11, column (f) Public support. Subtract line 5 279,928. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2004 (c) 2006 (d) 2007 (e) 2008 (f) Total (b) 2005 beginning in) È 32,792 0 57,875. 49,121 140,140 279,928. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form 0. similar sources Net income form unrelated business activities, whether or not the business is regularly 0. carried on Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.) 0. Total support. Add lines 7 279,928. through 10 12 0. Gross receipts from related activities, etc. (see instructions) 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) ► X organization, check this box and stop here Section C. Computation of Public Support Percentage % 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 15 % 15 Public support percentage for 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 the line 14 is 33-1/3 % or more, check this box and 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. 17 a 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. 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. Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

1.00

Page 3

# Schedule A (Form 990 or 990-EZ) 2008 THE NOTAH BEGAY III FOUNDATION 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.)

| <u> </u>   | (Complete only if you che   | cked the box on i                      | ine 9 or raiti.)         |                     |  |                             |           |            |
|------------|---|--|--------------------------|---------------------|--|-----------------------------|-----------|------------|
|            | tion A. Public Support  | 4-> 0004                               | 45 0005                  | (4) 0000            | (4) 0007                                   | (=\ 000°                    | ,         | (6) T-1-1  |
| Caler<br>1 | ndar year (or fiscal yr beginning in) P<br>Gifts, grants, contributions and<br>membership fees received (Do<br>not include 'unusual grants')  | (a) 2004                               | <b>(b)</b> 2005          | (c) 2006            | (d) 2007                                   | <b>(e)</b> 2008             | 3         | (f) Total  |
| 2          | not include 'unusual grants ') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose |  |                          |                     |  |                             |           |            |
| 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   |  |                          |                     |  |                             |           |            |
|            | <b>Total.</b> Add lines 1-5. Amounts included on lines 1, 2, 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)   |  |                          |                     |  |                             |           |            |
| Sec        | tion B. Total Support   |  |                          |                     |  |                             | · · · · · |            |
|            | ndar year (or fiscal yr beginning in)   | (a) 2004                               | <b>(b)</b> 2005          | (c) 2006            | (d) 2007                                   | <b>(e)</b> 2008             | 3         | (f) Total  |
|            | Amounts from line 6   | \-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\- | \ , ,                    | ` ` ` ` -           | · · · · · · · · · · · · · · · · · · ·      |                             |           |            |
|            | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  |  |                          |                     |  |                             |           |            |
|            | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975   |  |                          |                     |  |                             |           |            |
|            | Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on   |  |                          |                     |  |                             |           |            |
| 12         | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  | _                                      |                          |                     |  |                             |           |            |
|            | Total support. (add ins 9, 10c, 11, and 12)<br>First five years. If the Form 990<br>organization, check this box and  | is for the organiz<br>stop here        | ation's first, secor     | nd, third, fourth,  | or fifth tax year as                       | s a section 5               | 01(c)(3)  | ▶ □        |
| Sec        | tion C. Computation of Pu   | blic Support F                         | Percentage               |                     |  |                             |           |            |
| 15         | Public support percentage for 20  | 008 (line 8, colum                     | n (f) divided by lir     | ne 13, column (f)   | ı <del>.</del>                             |                             | 15        | %_         |
|            | Public support percentage from  |  |                          |                     | •  |                             | 16        | %          |
|            | tion D. Computation of Inv  |  |                          |                     | · · · · · · · · · · · · · · · · · · ·      |                             |           |            |
| 17         | Investment income percentage f  |  |                          |                     | ımn (f)) .                                 |                             | 17        | %          |
| 18         | Investment income percentage f  |  |                          |                     |  | , [                         | 18        | %          |
|            | 33-1/3 support tests - 2008. If the omore than 33-1/3%, check this b  | organization did not                   | check the box on t       | ine 14, and line 15 | is more than 33-1/3<br>ublicly supported o | %, and line 13 organization | 7 is not  | ▶ []       |
| b          | <b>33-1/3 support tests</b> – <b>2007.</b> If the support test is not more than 33-1/3%, check  | this box and <b>sto</b>                | <b>p here.</b> The organ | ization qualifies   | as a publicly suppo                        | orted organia               | zation    | nd line 18 |
| 20         | Private foundation. If the organi   | zation did not che                     | eck a box on line        | 14, 19a, or 19b, o  | neck this box and                          | see instruc                 | lions     |            |

| Schedule A   | (Form 9          | 990 or 9         | 990-EZ                 | 2) 2008                | TH               | E NO               | TAH             | BEG              | AY          | III           | FOU            | NDAT]           | ON                |                        |                    |              | 0330               |                     | Page 4         |
|--------------|------------------|------------------|------------------------|------------------------|------------------|--------------------|-----------------|------------------|-------------|---------------|----------------|-----------------|-------------------|------------------------|--------------------|--------------|--------------------|---------------------|----------------|
| Part IV      | Suppl<br>Part II | emen<br>, line   | <b>tal In</b><br>17a d | <b>forma</b><br>or 17b | ition.<br>; or F | Comp<br>Part II    | olete<br>I, lın | this<br>e 12     | par<br>. Pr | t to<br>ovide | provi<br>e any | de the<br>other | explar<br>additio | nation re<br>onal info | equired<br>ormatic | by F         | art II,<br>ee inst | line 10<br>truction | );<br>1s)      |
| •            | _                |                  |                        |                        | -                |                    |                 | _                |             |               |                |                 |                   |                        |                    |              |                    |                     |                |
| <b></b> -    |                  |                  | · <del>-</del>         |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    |                     |                |
|              |                  | <b>-</b>         |                        |                        |                  | <del>-</del>       |                 |                  |             |               |                |                 |                   |                        | <b>_</b>           |              |                    |                     |                |
|              |                  |                  |                        |                        |                  | . – – <del>-</del> |                 |                  |             |               |                | - <b>-</b>      |                   |                        |                    |              | <b>-</b> -         |                     | <del>-</del> - |
|              | ·                | - <del>-</del> - |                        | <del>-</del>           |                  | . – – <del>-</del> |                 |                  |             |               |                |                 |                   |                        |                    |              | <b></b>            |                     |                |
| - <b></b>    |                  |                  |                        | <b>-</b>               |                  | . – – –            |                 |                  |             |               | - <del></del>  |                 |                   |                        |                    | <del>-</del> |                    |                     |                |
|              | . <b></b>        |                  |                        |                        |                  | <b></b> -          |                 |                  |             |               | <b>_</b> .     |                 |                   |                        | <b>-</b>           | <b>-</b>     |                    |                     | <del>_</del> - |
|              | . <b>-</b>       |                  | · <b>–</b> –           |                        |                  |                    |                 |                  |             |               | <b>-</b>       |                 |                   |                        |                    | <del>-</del> |                    |                     |                |
|              |                  |                  | · <b>-</b>             | - <b></b>              |                  |                    | - <b>-</b> -    |                  |             |               |                | <del>-</del>    |                   |                        |                    |              |                    |                     |                |
|              | <b>_</b> .       |                  |                        |                        |                  | <del>_</del>       |                 |                  |             |               |                |                 |                   |                        | <del>_</del>       |              |                    |                     |                |
| <del>-</del> |                  |                  |                        |                        |                  | <del>-</del>       |                 | <del>-</del>     |             |               | - <b>-</b>     |                 |                   |                        |                    |              |                    |                     |                |
| - <b></b>    | <b>_</b> .       |                  | . <b>_</b>             |                        |                  | <b></b> -          |                 |                  |             |               | - <b>-</b> -   |                 |                   |                        |                    |              |                    |                     |                |
|              |                  |                  | · <del>-</del>         |                        |                  | <del>_</del>       |                 |                  |             |               | - <b>-</b> -   |                 |                   |                        |                    | <del>-</del> |                    |                     | <del></del> -  |
|              |                  | <b>-</b>         |                        |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    |                     | <b>-</b> -     |
|              | . <b></b>        |                  |                        |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    |                     |                |
|              | . <b></b> .      |                  | . <del>-</del>         |                        |                  |                    |                 |                  |             |               | <b>_</b> .     |                 |                   |                        |                    |              |                    | <del>-</del> ·      |                |
|              | <del>_</del>     |                  | . <del>-</del>         |                        |                  | . <b></b> _        |                 |                  |             |               |                |                 |                   |                        |                    |              |                    | <b>-</b> -          |                |
|              | . <b></b> .      | <b></b> -        |                        | <del>-</del>           |                  | <b></b> -          |                 |                  |             |               |                |                 |                   |                        |                    |              |                    | <b></b>             |                |
|              | . <b>-</b>       |                  | <del>-</del>           |                        |                  |                    |                 |                  |             | -<br>         |                |                 |                   |                        | <del>-</del>       |              |                    |                     |                |
| <del>_</del> |                  |                  |                        |                        |                  |                    |                 | - <del>-</del> - |             |               | . <b></b> .    |                 |                   |                        |                    |              |                    | - <b></b> -         |                |
| <b></b> _    |                  | - <b>-</b> -     |                        |                        |                  | <del>-</del>       |                 |                  |             |               | . <b></b> .    | - <b>-</b> -    |                   |                        |                    |              |                    | <b></b>             |                |
|              |                  |                  |                        |                        |                  |                    |                 |                  |             |               | - <del>-</del> |                 |                   |                        |                    |              |                    | <del>-</del> -      |                |
|              |                  |                  |                        |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        | <b>_</b>           |              |                    | - <b>-</b>          |                |
|              |                  |                  |                        |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    |                     |                |
|              | . – – – .        |                  |                        |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    |                     |                |
|              |                  |                  |                        |                        |                  |                    |                 |                  |             |               |                |                 | <b>-</b>          |                        |                    |              |                    |                     |                |
|              | <i>_</i> .       |                  |                        |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        | <b>-</b>           |              |                    |                     |                |
|              | . – – – -        |                  | <b>-</b>               |                        |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    |                     | <b></b>        |
|              |                  | <b>-</b>         |                        | <del>-</del>           |                  |                    |                 |                  |             |               |                |                 |                   |                        |                    |              |                    | <del>-</del> -      |                |

### SCHEDULE'D (Form 990)

### **Supplemental Financial Statements**

OMB No 1545-0047

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, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer Identification number

| ΤH | E NOTAH BEGAY III FOUNDATION   |   |                                      | 20-1  | 870330                             |                             |
|----|--|---|--------------------------------------|---|------------------------------------|-----------------------------|
|    | rt I Organizations Maintaining Dono  | r Advised Funds or Other  | Similar Fund                         | ds or Accounts                                | Complete i                         | f                           |
|    | the organization answered 'Yes' to   | o Form 990, Part IV, line   | 5.                                   |   | •                                  |                             |
|    |  | (a) Donor advised fu  | nds                                  | (b) Funds ar                                  | d other accou                      | unts                        |
| 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 dor funds are the organization's property, subject  | nor advisors in writing that the a<br>to the organization's exclusive l   | ssets held in do<br>egal control?    | nor advised                                   | Yes                                | ☐ No                        |
| 6  | Did the organization inform all grantees, dono used only for charitable purposes and not for impermissible private benefit?                                  | rs, and donor advisors in writing<br>the benefit of the donor or dono     | that grant fund<br>r advisor or othe | ls may be<br>er                               | ∏Yes                               | □No                         |
| Da | rt II   Conservation Easements Comple  | ate if the organization ans   | wered 'Yes' t                        | o Form 990 Par                                |                                    |                             |
|    | Purpose(s) of conservation easements held by   |   |                                      | .0 1 01111 330, 1 ai                          | 117, 1116 /                        | <u> </u>                    |
| •  | Preservation of land for public use (e.g., r   |   | 3                                    | f an historically imp                         | ortant land ar                     | ea                          |
|    | Protection of natural habitat  | ecreation of picasure)  | 4                                    | f certified historic st                       |                                    | -u                          |
|    | Preservation of open space   | <u>L.</u>   | j. 1000. 101.01. 0                   | ,       |                                    |                             |
| 2  | Complete lines 2a-2d if the organization held of the tax year  | a qualified conservation contribu   | ition in the form                    | of a conservation e                           | asement on t                       | he last day                 |
|    |  |   |                                      | Held a  | t the End of t                     | he Year                     |
|    | a Total number of conservation easements   |   |                                      | 2 a   |                                    |                             |
|    | <b>b</b> Total acreage restricted by conservation easer  | ments   |                                      | 2 b   |                                    |                             |
|    | c Number of conservation easements on a certi-   | fied historic structure included in                                       | ı (a) .                              | 2c  |                                    |                             |
|    | <b>d</b> Number of conservation easements included i   |   | • •                                  | 2 d   |                                    | <del></del>                 |
| 3  | Number of conservation easements modified,   | transferred, released, extinguis  | ned, or terminat                     | ed by the organizati                          | on during the                      | taxable                     |
| A  | year ►Number of states where property subject to co  | ncaniation easement is located  | •                                    |   |                                    |                             |
|    | , , ,  |   |                                      |   |                                    |                             |
|    | Does the organization have a written policy re enforcement of the conservation easement it l   | holds?  |                                      | • • • •                                       | Yes                                | ☐ No                        |
|    | Staff or volunteer hours devoted to monitoring   |   |                                      |   |                                    |                             |
| 7  | Amount of expenses incurred in monitoring, in  | aspecting, and enforcing easem  | ents auring the y                    | year • \$                                     |                                    |                             |
|    | Does each conservation easement reported or 170(h)(4)(B)(ı) and 170(h)(4)(B)(ı)?   |   | •                                    |   | Yes                                | ☐ No                        |
| 9  | In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements                                   | s conservation easements in its re-<br>to the organization's financial st | venue and expens<br>atements that de | se statement, and bal<br>escribes the organiz | ance sheet, ar<br>ation's accou    | nd<br>nting for             |
| Pa | rt III Organizations Maintaining Colle   | ctions of Art, Historical T   | reasures, or                         | Other Similar A                               | ssets                              |                             |
|    | Complete if the organization ansi  | wered 'Yes' to Form 990,  | Part IV, line 8                      | <u> </u>                                      |                                    |                             |
| 1  | a If the organization elected, as permitted under<br>treasures, or other similar assets held for pub-<br>the text of the footnote to its financial statement | lic exhibition, education, or rese  | evenue stateme<br>arch in furtherar  | ent and balance she<br>nce of public service  | et works of ar<br>e, provide, in l | rt, historical<br>Part XIV, |
|    | b If the organization elected, as permitted under<br>treasures, or other similar assets held for pub-<br>amounts relating to these items.                    | r SFAS 116, not to report in its i<br>lic exhibition, education, or rese  | evenue stateme<br>arch in furtherai  | ent and balance she<br>nce of public service  | et works of ar<br>, provide the    | rt, historical<br>following |
|    | (i) Revenues included in Form 990, Part VIII,  | line 1  |                                      |   | \$                                 |                             |
|    | (ii) Assets included in Form 990, Part X   |   |                                      |   | \$                                 |                             |
|    | If the organization received or held works of a amounts required to be reported under SFAS   | 116 relating to these items   | •                                    | or financial gain, pro                        | vide the follo                     | wing                        |
|    | a Revenues included in Form 990, Part VIII, line   | :1  |                                      | . •   | \$                                 |                             |
|    | <b>b</b> Assets included in Form 990, Part X .   |   |                                      | •   | \$                                 |                             |

| Schedule D (Form 990) 2008 THE I                                       |   |  |   |                          | 20-187                   |                 | Page 2       |
|--|---|--|---|--------------------------|--------------------------|-----------------|--------------|
| Part III Organizations Mainta  | ining Collection                          | ns of Art, Hist                        | orical Treasure                             | es, or O                 | ther Similar Ass         | ets (con        | tınued)      |
| <ol> <li>Using the organization's accession that apply)</li> </ol>     | on and other record                       | s, check any of t                      | he following that a                         | re a signi               | ificant use of its colle | ection item     | s (check all |
| a Public exhibition  |   | <b>d</b> Loan                          | or exchange prog                            | rams                     |                          |                 |              |
| <b>b</b> Scholarly research  |   | e 🔲 Other                              | ·   |                          |                          |                 |              |
| c Preservation for future gener  |   |  |   |                          |                          |                 |              |
| 4 Provide a description of the orga<br>Part XIV                        |   |  |   |                          |                          | se in           |              |
| 5 During the year, did the organiza assets to be sold to raise funds r | ition solicit or receivather than to be m | ve donations of a<br>aintained as part | rt, historical treasi<br>of the organizatio | ires, or o<br>n's collec | ther similar<br>tion?    | Yes             | No           |
| Part IV   Trust, Escrow and Cu<br>IV, line 9, or reported              | istodial Arrange<br>an amount on I        | ements Comp<br>Form 990, Par           | lete if organiza<br>t X, line 21.           | tion ans                 | swered 'Yes' to F        | orm 990         | , Part       |
| 1 a Is the organization an agent, trus included on Form 990, Part X?   | stee, custodian, or                       | other intermediar                      | y for contributions                         | or other                 | assets not               | Yes             | No           |
| <b>b</b> If 'Yes,' explain the arrangement                             | in Part XIV and co                        | mplete the follow                      | ring table                                  | 1                        |                          |                 |              |
|  |   |  |   |                          |                          | Amount          |              |
| c Beginning balance .  |   |  |   |                          | 1 c                      |                 |              |
| <b>d</b> Additions during the year                                     |   |  |   |                          | 1 d                      |                 |              |
| e Distributions during the year  |   |  | •   |                          | 1 e                      |                 |              |
| f Ending balance   | • •                                       |  | •   |                          | 1f                       |                 |              |
| 2a Did the organization include an a                                   |   | 0, Part X, line 21                     | ? .   |                          | [                        | Yes             | ∐ No         |
| <b>b</b> If 'Yes,' explain the arrangement                             |   | <del></del>                            | <del></del>                                 |                          |                          |                 |              |
| Part V Endowment Funds Co  | mplete if organ                           | zation answe <u>r</u>                  |   |                          |                          | 1               |              |
|  | (a) Current year                          | (b) Prior yea                          | er (c) Two ye                               | ars back                 | (d) Three years back     | (e) Four        | years back   |
| 1 a Beginning of year balance  |   |  |   |                          |                          | ļ               |              |
| <b>b</b> Contributions   |   |  |   |                          |                          | <u> </u>        |              |
| c Investment earnings or losses  |   |  |   |                          |                          |                 | :            |
| <b>d</b> Grants or scholarships .                                      |   |  |   |                          |                          | -               |              |
| e Other expenditures for facilities<br>and programs                    |   |  |   |                          |                          |                 | <br>         |
| f Administrative expenses .  |   |  |   |                          |                          | ļ               |              |
| <b>g</b> End of year balance   |   |  |   |                          |                          | <u> </u>        |              |
| 2 Provide the estimated percentag                                      | <del>-</del>                              | alance held as                         |   |                          |                          |                 |              |
| a Board designated or quasi-endown                                     | vment •                                   |  |   |                          |                          |                 |              |
| <b>b</b> Permanent endowment ▶   | 8   |  |   |                          |                          |                 |              |
| c Term endowment ►   | <b>%</b>                                  |  |   |                          |                          |                 |              |
| 3a Are there endowment funds not organization by                       | in the possession o                       | f the organization                     | that are held and                           | l administ               | tered for the            | Y               | es No        |
| (i) unrelated organizations  | •   |  |   |                          |                          | 3a(i)           |              |
| (ii) related organizations   |   |  |   |                          |                          | 3a(ii)          |              |
| <b>b</b> If 'Yes' to 3a(II), are the related of                        |   |  |   |                          |                          | 3b              |              |
| 4 Describe in Part XIV the intended                                    |   |  |   |                          |                          | · · · · ·       |              |
| Part VI Investments-Land, B  | uildings, and E                           | <b>quipment.</b> Se                    | <u>e Form 990, Pa</u>                       | <u>art X, Iır</u>        | ne 10.                   |                 |              |
| Description of investment  |   | ost or other basis<br>(investment)     | (b) Cost or oth basis (other)               |                          | (c) Depreciation         | ( <b>d)</b> Boo | k Value      |
| <b>1 a</b> Land  |   |  |   |                          |                          |                 |              |
| <b>b</b> Buildings   |   |  |   |                          |                          |                 |              |
| c Leasehold improvements .   |   |  |   |                          |                          |                 |              |
| <b>d</b> Equipment   |   | 2,225.                                 |   |                          |                          |                 | 2,225.       |
| e Other  |   |  | <u></u>                                     |                          |                          |                 |              |
| Total. Add lines 1a-1e (Column (d) she                                 | ould equal Form 99                        | 0, Part X, columi                      | n (B), line 10(c) ).                        |                          | _ +                      |                 | 2,225.       |

BAA

2,225. Schedule **D** (Form 990) 2008

| Schedule D (Form 990) 2008 THE NOTAH BEGAY II                             | II FOUNDATION         | 20-1870330 Page 3  |
|---|-----------------------|--|
| Part VII Investments-Other Securities See Fo                              | orm 990, Part X, line |  |
| (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   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       | ·····  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
| Total. (Column (b) should equal Form 990 Part X, col (B) line 12)         |                       |  |
| Part VIII Investments-Program Related (See F                              | Form 990, Part X, lır | ne 13) N/A   |
| (a) Description of investment type  | (b) Book value        | (c) Method of valuation                                  |
|   |                       | Cost or end-of-year market value                         |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   | ·                     |  |
|   |                       | <u> </u>   |
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|   |                       |  |
|   |                       |  |
|   |                       |  |
| Total Column (b)(should equal Form 990, Part X, Col (B) line 13)          | ]                     |  |
| Part IX Other Assets (See Form 990, Part X, I                             |                       |  |
|   | scription             | (b) Book value   |
|   | <del></del>           |  |
|   |                       |  |
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|   |                       |  |
|   |                       |  |
| Total. Column (b) Total (should equal Form 990, Part X, col               |                       | <u></u>  |
| Part X Other Liabilities (See Form 990, Part 2                            | X, line 25)           |  |
| (a) Description of Liability  | (b) Amount            |  |
| Federal Income Taxes  |                       |  |
| PAYROLL TAXES PAYABLE   | 2,958                 |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       | 1  |
|   |                       | -  |
| Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25) | <b>2</b> ,958         | ·  |
| In Part XIV, provide the text of the footnote to the organization         |                       |  |
| positions under FIN 48  |                       | •                  |

| 2      | Total expenses (Form 990, Part IX, column (A), line 25)  | ļ                     | 330,707.                 |
|--------|--|-----------------------|--------------------------|
| 3      | Excess or (deficit) for the year Subtract line 2 from line 1   |                       | 212,480.                 |
| 4      | Net unrealized gains (losses) on investments   |                       |                          |
| 5      | Donated services and use of facilities   |                       |                          |
| 6      | Investment expenses  |                       |                          |
| 7      | Prior period adjustments   |                       |                          |
| 8      | Other (Describe in Part XIV)   |                       |                          |
| 9      | Total adjustments (net). Add lines 4-8   |                       |                          |
| 10     | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9   | -                     | 212,480.                 |
| Par    | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per F  | Return                |                          |
|        | Total revenue, gains, and other support per audited financial statements   | 1                     | 543,187.                 |
|        | Amounts included on line 1 but not on Form 990, Part VIII, line 12   |                       |                          |
| а      | Net unrealized gains on investments . 2a   | _                     |                          |
| b      | Donated services and use of facilities 2b  | ]                     |                          |
| c      | Recoveries of prior year grants  |                       |                          |
| d      | Other (Describe in Part XIV)   |                       |                          |
| е      | Add lines 2a through 2d.   | 2e                    |                          |
| 3      | Subtract line 2e from line 1   | 3                     | 543,187.                 |
| 4      | Amounts included on Form 990, Part VIII, line 12, but not on line 1.   | 1 1                   |                          |
| а      | Investments expenses not included on Form 990, Part VIII, line 7b.   | _                     |                          |
| b      | Other (Describe in Part XIV)   | _                     |                          |
| c      | Add lines 4a and 4b  | 4c                    |                          |
|        | Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)  | 5                     | 543,187.                 |
|        | t XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses pe  | r Return              |                          |
|        | Total expenses and losses per audited financial statements   | 1                     | 330,707.                 |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25   |                       |                          |
|        | Donated services and use of facilities   | -                     |                          |
|        | Prior year adjustments . 2b  | -                     |                          |
|        | Losses reported on Form 990, Part IX, line 25  | -                     |                          |
|        | Other (Describe in Part XIV)   |                       |                          |
|        | Add lines 2a through 2d.   | 2e                    | 220 707                  |
| _      | 1 1  | 3                     | 330,707.                 |
|        | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |                       |                          |
|        | Investments expenses not included on Form 990, Part VIII, line 7b  | $\dashv$ $\downarrow$ |                          |
|        | Other (Describe in Part XIV)   | 4c                    |                          |
| _      | Add lines 4a and 4b  | 5                     | 330,707.                 |
|        | Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)  t XIV   Supplemental Information  |                       | 330,707.                 |
|        |  |                       |                          |
| line 4 | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part I'4; Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. |                       |                          |
|        |  |                       |                          |
|        |  |                       |                          |
|        |  |                       |                          |
|        |  |                       |                          |
|        |  |                       |                          |
|        |  |                       |                          |
| BAA    | TEEA3304L 12/23/08   | Schedule              | <b>D</b> (Form 990) 2008 |

Schedule D (Form 990) 2008 THE NOTAH BEGAY III FOUNDATION

20-1870330

Page 4

| Scriedule D | (Form 990) 2008              |          |               |              | Page :         |
|-------------|------------------------------|----------|---------------|--------------|----------------|
| Part XIV    | Supplemental Information (co | ntınued) |               |              |                |
|             |                              |          |               |              |                |
| ·<br>       |                              |          |               |              |                |
|             |                              |          |               |              |                |
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## SCHEDULE G (Form 990 or 990-EZ)

## Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

► 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.

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| Name of the organization Employer identification number  |                                     |                          |  |   |                      |  |   |              |  |
|--|-------------------------------------|--------------------------|--|---|----------------------|--|---|--------------|--|
| THE NOTAH BEGAY III FOUNDATION 20-1870330  |                                     |                          |  |   |                      |  |   |              |  |
| Part I   Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.  |                                     |                          |  |   |                      |  |   |              |  |
| Indicate whether the organization raised funds through any of the following activities. Check all that apply  Mail solicitations  Email solicitations  Phone solicitations  X Special fundraising events |                                     |                          |  |   |                      |  | <del></del>                                 |              |  |
| In-person solicitations  |                                     |                          |  |   |                      |  |   |              |  |
| 2a Did the organization have written of employees listed in Form 990, Par  | t VII) or entity                    | ın connect               | tion with p                              | rofessional fundraising                           | services             | ,7   | Yes   | XNo          |  |
| b If 'Yes,' list the ten highest paid in<br>compensated at least \$5,000 by the  | dividuals or en<br>le organization. | tities (func<br>Form 990 | iraisers) p<br>)F7 filers :              | ursuant to agreements<br>are not required to com- | under w<br>olete thi | nich the fundra<br>s table                                 | iser is to be                               |              |  |
| (i) Name of individual or entity (fundraiser)  | (ii) Activity                       | (iii) Did                | fundraiser<br>dy or control<br>ibutions? | (iv) Gross receipts                               | (v) An<br>(or r      | nount paid to<br>etained by)<br>aiser listed in<br>col (i) | (vi) Amount p<br>(or retained<br>organizati | by)          |  |
|  |                                     | Yes                      | No                                       |   |                      |  |   |              |  |
|  |                                     |                          |  |   |                      |  |   |              |  |
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|  |                                     |                          |  |   | · · · ·              |  |   |              |  |
| Total  |                                     |                          | <b>&gt;</b>                              |   |                      |  |   | 0.           |  |
| 3 List all states in which the organization licensing.   |                                     |                          |  |   |                      |  |   |              |  |
|  |                                     | - <b>-</b>               |  |   |                      | <b></b>  |   |              |  |
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|                 |       | reported more than \$15,000 on F   | form 990-EZ, line 6         | a. List events with                                 | gross receipts gre           | ater than            | \$5,000.                           |              |
|-----------------|-------|--|-----------------------------|---|------------------------------|----------------------|------------------------------------|--------------|
| -               | ,     |  | (a) Event #1 GOLF TOURNAMEN | <b>(b)</b> Event #2                                 | (c) Other Events             | (d) Tota<br>(Add col | al Events<br>(a) through           | _<br>า       |
| В               |       |  | (event type)                | (event type)  | (total number)               | COI                  | (c))                               |              |
| REVEZUE         | 1     | Gross receipts .   | 1,500,000.                  |   |                              | 1,                   | 500,000                            | <u>.</u>     |
| Ē               | 2     | Less Charitable contributions  |                             |   |                              |                      |                                    |              |
|                 | _     | Less Charlable Contributions   |                             |   |                              |                      |                                    | _            |
|                 | 3     | Gross revenue (line 1 minus line 2)  | 1,500,000.                  |   |                              | 1,                   | 500,000                            | ÷            |
|                 | 4     | Cash prizes .  |                             |   |                              |                      |                                    |              |
| DIRECT          | 5     | Non-cash prizes  |                             |   | - ·· -                       |                      | · <del>=</del>                     |              |
|                 | 6     | Rent/facility costs  |                             |   |                              |                      |                                    | _            |
| EXPENSES        | 7     | Other direct expenses  | 1,100,665.                  |   |                              | 1,:                  | L00,665                            | ÷            |
| E<br>S          | 8     | Direct expense summary Add lines 4- tl   | hrough 7 in column (d)      |   | •                            | 1,3                  | 100,665                            | •            |
|                 | 9     |  |                             |   | <u> </u>                     | ·                    | 399,335                            |              |
| Par             | t III | <b>Gaming.</b> Complete if the organiza \$15,000 on Form 990-EZ, line 6a   | ation answered 'Ye          | s' to Form 990, Pai                                 | rt IV, line 19, or re        | ported m             | ore than                           | _            |
| REVENUE         |       |  | (a) Bingo                   | (b) Pull tabs/Instant<br>bingo/progressive<br>bingo | (c) Other gaming             | (Add col.            | al gaming<br>(a) througl<br>. (c)) | 1<br>        |
| Ü               | _     | _  |                             |   |                              |                      |                                    |              |
|                 | 1     | Gross revenue  |                             |   |                              |                      | <del></del> -                      | _            |
| F               | 2     | Cash prizes  |                             |   |                              |                      |                                    | _            |
| D I R E S C T S | 3     | Non-cash prizes  |                             |   |                              |                      |                                    | _            |
| C S<br>T E<br>S | 4     | Rent/facility costs  |                             |   |                              |                      |                                    | _            |
|                 | 5     | Other direct expenses  |                             |   |                              |                      |                                    |              |
|                 |       |  | Yes%                        | Yes%  | Yes%                         |                      |                                    |              |
|                 | 6     | Volunteer labor  | No                          | No  | No                           |                      |                                    | _            |
|                 | 7     | Direct expense summary. Add lines 2 thr  | rough 5 in column (d)       |   |                              |                      |                                    | _            |
|                 | 8     | Net gaming income summary. Combine   | lines 1 and 7 in column     | (d)   | •                            |                      |                                    |              |
|                 |       |  |                             |   |                              |                      | YES NO                             | <u></u>      |
| 9               |       | er the state(s) in which the organization of   |                             |   |                              |                      |                                    |              |
|                 |       | ne organization licensed to operate gaming<br>lo,' Explain   | g activities in each of the | nese states /                                       |                              | 92                   |                                    | -            |
|                 | , 11  |  |                             |   |                              |                      |                                    |              |
|                 |       |  | <b> </b>                    | - <b></b>   |                              |                      |                                    |              |
|                 |       | e any of the organization's gaming license<br>'es,' Explain.   | es revoked, suspended       | or terminated during the                            | e tax year <sup>?</sup>      | 10 a                 |                                    | _            |
|                 | <br>  |  |                             |   |                              |                      |                                    |              |
|                 |       | s the organization operate gaming activitions or the organization a grantor, beneficiary or trainingter charitable gaming? |                             |   | <br>or other entity formed t | 0 11                 |                                    | <del>-</del> |
|                 | adm   | ninister charitable gaming?  |                             |   |                              | 12                   | <u> </u>                           | _            |

| Schedule G (Form 990 or 990-EZ) 2008 THE NOTAH BEGAY III FOUNDATION   | 20-1870330                 |        | age <b>3</b> |
|---|----------------------------|--------|--------------|
| 13 Indicate the percentage of gaming activity operated in:  a The organization's facility  b An outside facility  13b  14 Provide the name and address of the person who prepares the organization's gaming/special events book  Name   | :                          | YES    | NO           |
| Address.   15 a Does the organization have a contact with a third party from whom the organization receives gaming reve  b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and to  of gaming revenue retained by the third party \$  c If 'Yes,' enter name and address: | enue? . <b>15</b>          | 5 a    |              |
| Name   Address   Gaming manager information  Name   |                            |        |              |
| Gaming manager compensation   \$  Description of services provided:   Director/officer   Employee   Independent contractor  |                            |        |              |
| a Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license?   | pent in the                |        |              |
| BAA TEEA3703L 07/18/08 Sched  | lule <b>G</b> (Form 990 or | 990-EZ | 2008         |

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

Department of the Treasury Internal Revenue Service **Transactions with Interested Persons** 

➤ Attach to Form 990 or Form 990-EZ.
➤ To be completed by organizations that answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

2008

Open to Public Inspection

Schedule L (Form 990 or 990-EZ) 2008

Employer identification number Name of the organization 20-1870330 THE NOTAH BEGAY III FOUNDATION Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (b) Description of transaction 1 (a) Name of disqualified person Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under Ś Ś 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (f) Approved by board or committee? (b) Loan to or from the organization? (c) Original principal amount (g) Written agreement? (a) Name of interested person and purpose (d) Balance due (e) In default? Yes No Yes No Yes No Τo From Total Grants or Assistance Benefitting Interested Persons. Part III To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (c) Amount of grant or type of assistance (a) Name of interested person Business Transactions Involving Interested Persons. Part IV To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship between interested person and the organization (c) Amount of transaction \$ (d) Description of transaction (a) Name of interested person organization's revenues? Yes No 12,600 CONTRACT SERVICES FAMILY MEMBER Х NOTAH BEGAY, JR

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

### SCHEDULE O (Form 990)

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

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

| Name of the organization   | Employer identification number  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| THE NOTAH BEGAY III FOUNDATION   | 20-1870330  |  |  |  |  |  |  |
| Form 990, Part III, Line 4a - Program Service Accomplishments                |   |  |  |  |  |  |  |
| The Foundation's activities are focused on the development of model and      |   |  |  |  |  |  |  |
| evidence-based_sports_and_wellness_programs, primarily_in_the_f              | evidence-based_sports_and_wellness_programs, primarily_in_the_forms_of_golf_and |  |  |  |  |  |  |
| soccer, for Native American Youth.   |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| The NB3 Foundation soccer program served 160 youth through its               | fall, spring and  |  |  |  |  |  |  |
| summer programming. This is approximately a 20% increase from t              | the previous year.  |  |  |  |  |  |  |
| Participating youth achieved over 200 minutes of physical activ              | rity_per_week_through_  |  |  |  |  |  |  |
| their engagement in our 24 weeks of soccer programming throughout            | out the year.   |  |  |  |  |  |  |
|  | ·   |  |  |  |  |  |  |
| The NB3 Foundation's Junior Arrowhead Gold Program served 45 years           | outh through its  |  |  |  |  |  |  |
| regular_school-year_and_summer_programming. This is a 10% incre              | ease from the previous _  |  |  |  |  |  |  |
|  | aly increasing the golf   |  |  |  |  |  |  |
| knowledge and skills of the participating youth but provided in              | portant_lifeskills  |  |  |  |  |  |  |
| instruction and activities.  | . <b></b>   |  |  |  |  |  |  |
| Form 990, Part VI, Line 10 - Form 990 Review Process                         | ·   |  |  |  |  |  |  |
| FORM 990 WAS REVIEWED BY THE BOARD AT OUR REGULAR MONTHLY MEETI              | NG  |  |  |  |  |  |  |
| Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available | <b></b>   |  |  |  |  |  |  |
| THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCE             | CIAL STATEMENTS ARE   |  |  |  |  |  |  |
| DISCLOSED TO THE GENERAL PUBLIC UPON WRITTEN REQUEST.                        |   |  |  |  |  |  |  |
|  | <b></b> _   |  |  |  |  |  |  |
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