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DLN: 93492047008060

OMB No 1545-1150

2008

Form 990-EZ

Department of the Treasury

Internal Revenue Service

**Short Form 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)

 $\blacktriangleright$  Sponsoring organizations and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**Open to Public** Inspection

			or	tax year beginning 07-01-2008 , and ending 06-30-2009					
_		applicable Please		C Name of organization THE VERITAS FORUM INC	D Emp	loyer	identification number		
_		change use IRS	s		20-5	61694	<del>1</del> 1		
_		me change label or print or P O box, if mail is not delivered to street address) Room/suite E Telephone number  ONE BROADWAY 14TH FLOOR							
_		mination ONE BROADWAY 14TH FLOOR  type.  See (617) 491-2055							
_		Specifi		City or town, state or country, and ZIP + 4	<b>F</b> Grour	) Exer	mption		
_	Amended return  Application pending  Application pending  Amended return  Application pending  Application pending  Amended return  Instructions.  Cambridge, MA 021421187  Cambridge, MA 021421187  F Group Exemption  Number								
	pplicatio	on penaling							
<b>♦</b> Se	ction			ns and 4947(a)(1) nonexempt charitable trusts npleted Schedule A (Form 990 or 990-EZ).		Гc	ash 🔽 Accrual		
T W	aheit e	: WWW VERITAS (	OR	G H Check ► T			anızatıon		
				is <b>not</b> require					
		_		s not a section 509(a)(3) supporting organization <b>and</b> its gross receipts are			990-EZ, or 990-PF)		
				, but if the organization chooses to file a return, be sure to file a complete re		ny iii	ot more than		
L Add	l lines 5	5b, 6b, and 7b, to line 9 to	o de	etermine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ	<b> -</b>	\$	618,318		
Pa	rt I	Revenue, Exp	en	ses, and Changes in Net Assets or Fund Balances (See the Ir	structi	ons	for Part I)		
	1	Contributions, gifts,	, gr	ants, and similar amounts received		1	608,776		
	2	Program service rev	ver	nue including government fees and contracts		2	1,165		
	3	Membership dues a	nd	assessments	Ī	3			
	4	Investment income			.	4	8,377		
	-			le of assets other than inventory   5a	·		7,211		
a.	5a			· · · · · · · · · · · · · · · · · · ·					
Ĭ	b			sis and sales expenses					
Revenue	С	• •		e of assets other than inventory (Subtract line 5b from line 5a) (attach sche	´	5c			
č	6	Special events and check here	ac	tivities (complete applicable parts of Schedule G) If any amount is from <b>ga</b> i	ning,				
	а	Gross revenue (not	ınd	cluding \$ of contributions					
		reported on line 1)		6a					
	ь	Less direct expens	es	other than fundraising expenses 6b					
	-	·		rom special events and activities (Subtract line 6b from line 6a)					
	C	·	, 11	on special events and activities (Subtract fine ob nom fine oa)		6c			
	7a	Gross sales of inver	nto	ry, less returns and allowances	Ī				
	h	Less cost of goods	sc						
		_		rom sales of inventory (Subtract line 7b from line 7a)					
	C	• •	,,,	tom sales of inventory (Subtract file 7 b from file 7 a)	•	7c			
	8	Other revenue (des	c rı	be 📭	) [	8			
	9	•		es 1, 2, 3, 4, 5 c, 6 c, 7 c, and 8)		9	618,318		
	10			ounts paid (attach schedule)		10	<u>'</u>		
		Benefits paid to or fo		, ,	ŀ				
	11	•			ŀ	11	240027		
_	12	·		nsation, and employee benefits	٠,	12	210,927		
ę.	13	Professional fees ar	nd	other payments to independent contractors	•	13	23,489		
ě	14	Occupancy, rent, ut	tılıt	ies, and maintenance	. [	14	26,987		
Expenses	15	Printing, publication	ıs,	postage, and shipping		15			
	16	Other expenses (de	sc	ribe 🏲 💯	, [	16	411,784		
	17			nes 10 through 16)		17	673,187		
	18			the year (Subtract line 17 from line 9)	.	•	-54,869		
Net Assets		• •	•		L	18	1 .,		
4	19	Net assets or fund b	bal	ances at beginning of year (from line 27, column (A)) (must agree with	[				
<u>ه</u>		end-of-year figure re	ер	orted on prior year's return)		19	539,110		
_	20	Other changes in ne	et a	assets or fund balances (attach explanation) 🕏	.	20	2,037		
	21			ances at end of year (combine lines 18 through 20)	.	21	486,278		
Pa	rt II			-If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 9	90 ins		<u> </u>		
				ne instructions for Part II )  (A) Beginning of ye			(B) End of year		
22	Cash	, savings, and investr			т '	$\neg$	420,856		
		and buildings .		2,99	_	_	5,726		
		r assets (describe 🛌	· 第]	33,52	-	+	95,475		
			<u></u>		_	+	· · ·		
		assets		576,94 FI	-	+	522,057		
		liabilities (describe	_	,		+	35,779		
<u>27</u>	Net a	ssets or fund balance	es (	line 27 of column (B) <b>must</b> agree with line 21) . 539,13	.0 27		486,278		

Part IIII Statement of Program	Service Accomplishn	nents (See the instruction	ns for Part III )		Expenses	
What is the organization's primary exempt	(Required for 501(c)(3) and (4) organizations and					
•	WE CREATE AND ENCOURAGE FORUMS, PRIMARILY ON UNIVERSITY CAMPUSES, TO CONNECT					
TODAY'S HARDEST QUESTIONS WITH T	HE PERSON AND STORY	OF JESUS CHRIST			7(a)(1) trusts, onal for others)	
Describe what was achieved in carrying out			•	Optio	onal for others )	
describe the services provided, the number	of persons benefited, or o	ther relevant informatio	n for each program			
title				<u> </u>		
${\bf 28}{\tt VERITAS}$ CAMPUS FORUMS - THE ${\tt VE}$	RITAS FORUM HELPS CR	EATE UNIVERSITY EV	/ENTS THAT			
ENGAGE STUDENTS AND FACULTY IN D		•				
RELEVANCE OF JESUS CHRIST TO ALL						
STUDENTS, PROFESSORS, AND MINIST			=			
VERITAS FORUM TEAM FROM JULY 200	•					
50 DIFFERENT CAMPUSES IN THE UNIT						
VERITAS FORUM ALSO ENCOURAGES E MEDIA	XPLORATION OF TRUE L	IFE THROUGH BOOKS	S AND ON-LINE			
	s amount includes foreign ç	grants chack hare	▶┌	20-	F24.6F6	
<del></del>	s amount metades foreign (	grants, check here .	· · •	28a	524,656	
29						
(Grants \$ ) Ifthi	s amount includes foreign ç	grants shock hare	<b>L</b> -			
(Grants \$ )	s amount includes loreign (	grants, check here .	• • •	29a		
30						
(0 , 1 + )			. —			
(Grants \$ ) If the	s amount includes foreign ç	grants, check here .	<u> ►                                 </u>	30a		
31 O ther program services (attach schedul	e)					
(Grants \$ ) If thi	s amount includes foreign 🤉	grants, check here .	▶ ┌	31a		
32 Total program service expenses (add line	es 28a through 31a) .		▶	32	524,656	
Part IV List of Officers, Directors, True	stees, and Key Employees.	List each one even if not co	mpensated (See the inst	tructions	s for Part IV )	
	(b) Title and average	(c) Compensation	(d) Contributions	to	(e) Expense	
(a) Name and address	hours per week	(If not paid,	employee benefit pl		account and	
(4, 1141110 4114 4441000	devoted to position	enter -0)	deferred compensa		other allowances	
	'	,	'			
See Additional Data Table						

	Other Taffer and the Market Handble and the American State of the Control of the		<b>W</b>	NI-		
Рā	<b>Other Information</b> (Note the statement requirements in the instructions for Part VI.)	1	Yes	No		
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		Νο		
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		No		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T					
а	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		Νο		
ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	35b				
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		N o		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 🕨 📗 37a					
Ь	Did the organization file Form 1120-POL for this year?	37ь		Νo		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were					
	any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		Νo		
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved .   38b					
39	501(c)(7) organizations. Enter					
	Initiation fees and capital contributions included on line 9					
	Gross receipts, included on line 9, for public use of club facilities					
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under					
	section 4911 ▶, section 4912 ▶, section 4955 ▶					
b	b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part  I.					
	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958					
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	40e		No		
41	List the states with which a copy of this return is filed 🏲 MA					
42a	The books are in care of DANIEL CHO Telephone no (617)	491-2	055			
	ONE BROADWAY 14TH FLOOR  Located at CAMBRIDGE, MA  ZIP + 4 202142					
b	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		Yes	No		
	account)?	42b		No		
	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.					
c	At any time during the calendar year, did the organization maintain an office outside of the U S $^\circ$	42c		No		
	If "Yes," enter the name of the foreign country 🕒					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		<b>▶</b>	<del>_</del>		
		_ [	Yes	No		
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of					
	Form 990-EZ.	44		Νο		
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990					
	must be completed instead of Form 990-EZ.	45		Νο		
		_ ^	^^ ==	12000		

		and						
	complete the tables for lin	nes 50 and 51.						
46	Did the organization engage in direct	or indirect political camp	aign activities on beha	lf of or in opp	osition to		Yes	No
	candidates for public office? If "Yes,"	complete Schedule C, P	art I			46		Νo
47	Did the organization engage in lobbyi	ng activities? If "Yes," co	omplete Schedule C, Pa	ırt II		47		No
48	Is the organization operating a schoo	l as described in section	170(b)(1)(A)(II)? If "ye	es," complete	Schedule E	48		Νo
49a	Did the organization make any transfe	ers to an exempt non-cha	ırıtable related organıza	ition?		49a		Νο
b	If "Yes," was the related organization	(s) a section 527 organiz	zation?			49b		
	Complete this table for the five higher received more than \$100,000 of com					employ	vees) w	ho
(a) N	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	employee b	ributions to penefit plans & ompensation	ac	e) Exper count a rallowa	and
N O N E	Ē							
Total	number of other employees paid over \$100,000 ►							
	Complete this table for the five higher compensation from the organization			ich received	more than \$100	0,000 c	f	
	(a) Name and address of each indepe	ndent contractor paid mo	re than \$100,000	<b>(b)</b> Type	ofservice	(c) C	ompens	sation
NONE	<b>.</b>							
Total	number of other independent contract	tors receiving over \$100	,000					
	Under penalties of perjury, I declare to and belief, it is true, correct, and com							
Pleas	1.	piece becaudion of preparer	(other than officer) is based	2009-:		LI IIGS GI	I, KIIOWIC	.ugc
Sign Here				Date				
пеге	DANIEL CHO EXECUTIVE DIRECTO Type or print name and title	PR .						
Paid	Preparer's signature JOSEPH B MORIARTY C		009-12-15 se	neck if If- npolyed 🕨 🦵	Preparer's PTIN (	See Gen	Inst X)	
Prepa Use O	the second of th	AMARA & MORIARTY LLP		-	EIN Þ			
USE U		NGTON STREET			Phone no 1 (7	Q1) 750	6300	
	NORWOOD	, MA 020622330			Phone no 🕨 (7	o1) /69-	0300	

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49

No

Yes

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93492047008060

Employer identification number

OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

2008

Open to Public
Inspection

THE V	ERITAS	FORUM INC									
Do		t I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)									
	rt I			ation because it is (Please					111Sti uct	10115)	
1	/ ga			nurches, or association of ch					Δ \/ i \		
2	<u>'</u>	•		t <b>ion 170(b)(1)(A)(ii).</b> (Attac			Section 1	170(1)(1)(	A )(1).		
3	<u>'</u>			e hospital service organizati		•	tion 170/k	-\/1\/A\/:	ii) // ++>c	h Cahadul	a U )
4	<u>'</u>	•	·				-				•
4	ı		-	zation operated in conjunctiv	on with a r	iospitai de	escribea ii	Section	170(B)(1)	(A)(III). E	nter the
_	_	· ·	name, city, and					l b			
5	ı			or the benefit of a college or	university	y owned o	roperated	i by a gove	ernmentai	unit desc	ribea in
_	_			(Complete Part II )			-ti 170/	/L\/4\/A\	( <b>)</b>		
6	<u>'</u>	•	· -	overnment or governmental							and a subdivi
7	ı			ally receives a substantial p <b>p)(1)(A)(vi)</b> (Complete Par		support fro	om a govei	rnmentai t	init or fron	n the gene	rai public
8	$\vdash$		-	oed in <b>Section 170(b)(1)(A)</b>	•	nlete Pari	+ T T \				
9	<u> </u>		•	ally receives (1) more than		•	-	ontribution	s mamba	rchin faac	and arose
9	1*	_		lated to its exempt functions							· -
		•		estment income and unrelate	-		·		•		
			-	on after June 30, 1975 See			,			() II OIII Du	Sillesses
10	$\vdash$		· •	and operated exclusively to			•		•	a a une true	tions \
11	<u>'</u>			and operated exclusively to							
	'		•	orted organizations describe		, ,			,	•	
				type of supporting organiza						_	
		аГ⊺	ype I <b>b</b>	Type II c	Type III	- Functior	nally Integ	grated	d	Гтуре	III - Other
e	Γ	•		rtify that the organization is			•				•
		other than section 50		agers and other than one or	more publ	icly suppo	orted orga	nizations	described	in section	1509(a)(1) or
f				d a written determination fro	m the IRS	that it is	a Type I.	Type II o	r Tvpe III	supportir	ng organization.
-		check this					,	. , , ,	, , ,		
g				as the organization accepted	d any gift o	or contribi	utıon from	any of the	!		
		following pe		r indirectly controls, either a	olona orto	anthoryu	th narcane	doceribo	d in (ii)		V N-
			•	ng body of the the supported		_	in persons	describe	u III (II)	11g	Yes No
				erson described in (i) above	_	LIOII.				11g(	
			•	• •		20402					
h		(iii) a 35% controlled entity of a person described in (i) or (ii) above?  Provide the following information about the organizations the organization supports									
••		Trovide the	. lollowing illion	nation about the organization	ns the org	amzation	Supports				
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did v	ou notify	(vi) I	s the	(vii) A mount of
Supported (described on lines 1-9 organization in the organization organization							support?				
Organization above or IRC section col (i) listed in in col (i) of your col (i) organized											
	(See Instructions)) your governing support? in the U.S.?  document?										
					Yes	No	Yes	No	Yes	No	-
					162	110	162	140	162	140	

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15								
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.	check 1	this box	
	and <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

# Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	ction A. Public Support	ted the box o	il lille 5 of Fai	(1.)				
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(0)	2008	(f) Total
1	Gifts, grants, contributions, and	<u>(a) 2004</u>	(6) 2003	(6) 2000	(u) 2007	(e)	2008	(I) I otal
-	membership fees received (Do not	1			530,840		608,776	1,139,616
	include any "unusual grants ")	1					· I	. ,
2	Gross receipts from admissions,							
	merchandise sold or services performed,	1						
	or facilities furnished in any activity that	1						
	ıs related to the organızatıon's tax-	1						
	exempt purpose	<del> </del>						
3	Gross receipts from activities that are	1						
	not an unrelated trade or business under	1						
	section 513							
4	Tax revenues levied for the	1						
	organization's benefit and either paid to	1						
_	or expended on its behalf The value of services or facilities	i						
5	furnished by a governmental unit to the	1						
	organization without charge	1						
6	Total Add lines 1-5				530,840		608,776	1,139,616
_	Amounts included on lines 1, 2, and 3	<u> </u>			,		· •	
/a	received from disqualified persons	1			279,125		402,500	681,625
h	A mounts included on lines 2 and 3	 						
_	received from other than disqualified	1						
	persons that exceed the greater of 1% of	1						
	the total of lines 9, 10c, 11, and 12 for	1						
	the year or \$5,000							
c	Total of lines 7a and 7b	1			279,125		402,500	681,625
8	Public Support (Substract line 7c from							457,991
	line 6)	I						437,991
To	tal Support							
Cale	<b>ndar year</b> (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
9	A mounts from line 6				530,840		608,776	1,139,616
10a	Gross income from interest, dividends,	1						
	payments received on securities loans,	1			6,434		8,377	14,811
	rents, royalties and income from similar	1			,		′	,
	sources							
Ь	Unrelated business taxable income (less	1						
	section 511 taxes) from businesses	1						
_	acquired after 30 June, 1975 Add lines 10a and 10b				6,434		8,377	14,811
C	Net income from unrelated business	ı			0,434		0,577	14,011
11		1						
	activities not included in line 10b, whether or not the business is regularly	1						
	carried on	1						
12	Other income Do not include gain or loss	 ]						
	from the sale of capital assets	I						
	(Explain in Part IV )	<u> </u>						
13	Total Support (Add lines 9, 10c, 11 and	1						1,154,427
	12)							
14	First Five Years If the Form 990 is for the o	rganızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 50	01(c)(:	3) organız	
	check this box and <b>stop here</b>							►✓
	manufaction of Bublic Compact Days							
	mputation of Public Support Perce		d	-1 (5)		T		
15	Public Support Percentage for 2008 (line 8			olumn (f))		15		
16	Public Support Percentage for 2007 Sched	ule A, Part IV -	A, lıne 27g			16		
_Co	mputation of Investment Income	Percentage						
17	Investment Income Percentage for <b>2008</b> (In			ne 13 column (f	<u> </u>	17		
18	Investment Income Percentage from 2007	Schedule A . Pa	rt IV-A, line 27	h		18		
	33 1/3% Tests - 2008. If the organization d	·	·		more than 33 1/3		l d line	
1.7a	17 is not more than 33 1/3%, check this bo							ı ▶□

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

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

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)						
	Facts and Circumstances Test						

Schedule A (Form 990 or 990-EZ) 2008

### **Additional Data**

Software ID: Software Version:

**EIN:** 20-5616941

Name: THE VERITAS FORUM INC

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
KELLY MONROE KULLBERG   2615 HENTHORN ROAD COLUMBUS, OH 43214	DIR PROJ DEV 20	35,035		
KURT KEILHACKER 50 10 MEADOW LANE ATHERTON,CA 94027	TRUSTEE 2	0		
DANIEL CHO 20 254 CONCORD AVENUE CAMBRIDGE, MA 02138	EXECUTIVE DI 40	115,000	15,569	
KATIE SMITH MILWAY 🕏 10 LAUREL TERRACE WELLESLEY, MA 02481	TRUSTEE 2	0		
JOHN KINGSTON   16 CHESTNUT STREET WINCHESTER, MA 01890	TRUSTEE 2	0		
ALFRED CALLAHAN   204 FAYERWEATHER STREET CAMBRIDGE, MA 02138	TRUSTEE 2	0		
MARK CAMPISANO 🕏 20 BENEDICT PLACE PELHAM,NY 10803	TRUSTEE 2	0		
REBECCA MCLAUGLIN   50 SPRING STREET APT 2 CAMBRIDGE, MA 02141	DIR OF FORUM 40	55,538	3,667	

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DLN: 93492047008060

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

# **Depreciation and Amortization** (Including Information on Listed Property)

Attachment

See separate instructions. ► Attach to your tax return. Sequence No 67 Identifying number Name(s) shown on return Business or activity to which this form relates THE VERITAS FORUM INC INDIRECT DEPRECIATION 20-5616941 Part I Election To Expense Certain Property Under Section 179 **Note:** If you have any listed property, complete Part V before you complete Part I. 250,000 **1** Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 800,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 **8** Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 2,261 tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 **16** Other depreciation (including ACRS) 3 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 1,113 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property 2,261 5 0 НΥ 200 DB 452 **b** 5-year property **c** 7-ye<u>ar property</u> d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs h Residential rental 27 5 yrs ММ S/L property 27 5 yrs ΜМ S/L i Nonresidential real 39 yrs ΜМ S/L property ΜМ S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year S/L S/L **c** 40-year **Summary** (See instructions) Part IV 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 3,829 and on the appropriate lines of your return Partnerships and S corporations—see instr 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form 4562 (2008) Page 2 Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) basis service use period use only) cost percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 4 Vehicle 1 Vehicle 3 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal(noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use No No Yes No No No Yes Yes Yes Yes Yes No during off-duty hours? . . . 35 Was the vehicle used primarily by a more than 5% owner or related person? . . . . . **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? . . . . . . 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) Date (a) A mortization A mortizable Code A mortization for Description of costs amortization period or amount section this year

#### 42 A mortization of costs that begins during your 2008 tax year (see instructions) WEBSITE DEVELOPMENT 2009-03-01 16,500 616 150 367 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44 367

percentage

begins

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# **TY 2008 Compensation Explanation**

Name: THE VERITAS FORUM INC

Person Name	Explanation
KELLY MONROE KULLBERG	
KURT KEILHACKER	
DANIEL CHO	
KATIE SMITH MILWAY	
JOHN KINGSTON	
ALFRED CALLAHAN	

Person Name	Explanation
MARK CAMPISANO	
REBECCA MCLAUGLIN	

### **TY 2008 Other Assets Schedule**

Name: THE VERITAS FORUM INC

Description	Beginning of Year Amount	End of Year Amount
ACCOUNTS RECEIVABLE	28,000	68,000
PREPAID EXPENSES AND DEFERRED CHARGES	3,628	8,642
WEBSITE DEVELOPMENT		16,133
DEPOSITS	1,900	2,700
	33,528	95,475

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# **TY 2008 Other Changes in Net Assets Schedule**

Name: THE VERITAS FORUM INC

Description	Amount
BOOK / TAX DEPREC DIFFERENCE	2,037

# **TY 2008 Other Expenses Schedule**

Name: THE VERITAS FORUM INC

Description	Amount
EXPENSES	
TRAVEL - AIRFARE	16,844
TRAVEL - AUTO	1,788
TRAVEL - GROUND TRANSPORTATIO	11,248
TRAVEL - HOTEL	11,178
TRAVEL - DOMESTIC REG COACH	11,830
CONFERENCES/SEMINARS	1,483
FORUM EXPENSES	108,452
DIRECT NATIONAL GRANTS	5,100
DIRECT INTERNATIONAL GRAN	23,271
POSTAGE AND DELIVERY	3,916
BOOK EXPENSE	16,051
CONTRACT LABOR	103,103
MARKETING	10,247
PAYROLL EXPENSES	1,488
MEALS	7,517
SPECIAL EVENTS	20,937
BANK SERVICE CHARGES	200
COMPUTER EXPENSES	1,418
DUES AND SUBSCRIPTIONS	1,595
FILING FEES	1,220
INSURANCE - LIABILITY	637
INTERNET SERVICES	19,811
OFFICE EXPENSE	7,477
OFFICE EQUIPMENT	5,366
CONSULTING	2,249
CONTRACT LABOR - TEMPORAR	11,848
ADMIN FEES - 401(K)	149
SPECIAL PROJECTS	2,399
MOVING EXPENSE	2,962

### **TY 2008 Other Liabilities Schedule**

Name: THE VERITAS FORUM INC

Description	Beginning of Year Amount	End of Year Amount
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	17,834	15,446
ACCRUED EXPENSES	20,000	20,333
	37,834	35,779