



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2008Open to Public
Inspection**A** For the 2008 calendar year, or tax year beginning **JUL 1, 2008** and ending **JUN 30, 2009**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type: See Specific Instructions	C Name of organization ALEXANDER DAWSON FOUNDATION		D Employer identification number 22-6044616
		Doing Business As		E Telephone number 7027337880
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4045 SOUTH SPENCER ST. 312		G Gross receipts \$ 12,841,015.
		City or town, state or country, and ZIP + 4 LAS VEGAS, NV 89119		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer MARIO BORINI 4045 S. SPENCER, SUITE 312, LAS VEGAS, NV 8				
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ ADSRM.ORG DAWSONSCHOOL.ORG				
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ L Year of formation: 1957 M State of legal domicile: NV				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CO-EDUCATIONAL PREPARATORY SCHOOLS			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	5	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0	
	5 Total number of employees (Part V, line 2a)	5	440	
	6 Total number of volunteers (estimate if necessary)	6	410	
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.	
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
		9 Program service revenue (Part VIII, line 2g)	1,404,864.	1,736,936.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,879,243.	19,005,174.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,313,773.	-15,597,676.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,812,142.	7,602,087.	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		33,410,022.	12,746,521.	
14 Benefits paid to or for members (Part IX, column (A), line 4)		1,542,727.	1,768,191.	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)				
16a Professional fundraising fees (Part IX, column (A), line 11e)		10,805,978.	12,120,228.	
b Total fundraising expenses (Part IX, column (D), line 25)			14,586.	
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f, 24e)	18,524,721.	17,299,762.	
	18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	30,873,426.	31,202,767.	
	19 Revenue less expenses. Subtract line 18 from line 12	2,536,596.	-18,456,246.	
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
		21 Total liabilities (Part X, line 26)	245,371,875.	215,279,482.
		22 Net assets or fund balances - Subtract line 21 from line 20	67,956,083.	66,969,830.
			177,415,792.	148,309,652.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		
	Signature of officer: <i>Kimberley Johnston</i> Date: 05-14-2010 KIMBERLEY JOHNSTON, ASSISTANT TREASURER Type or print name and title		
Paid Preparer's Use Only	Preparer's signature: <i>[Signature]</i>	Date: 5-14-10	Check if self-employed: <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4: RSM MCGLADREY, INC. 300 SOUTH 4TH STREET, SUITE 600 LAS VEGAS, NV 89101	Preparer's identifying number (see instructions): 700528470	EIN: 41-1944416
		Phone no.: 702 759 4000	

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

☒ Yes ☐ No

SCANNED JUL 07 2010

0815 5

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: **SEE SCHEDULE O FOR CONTINUATION**
THE MISSION OF THE ALEXANDER DAWSON FOUNDATION IS TO ESTABLISH, OPERATE AND MAINTAIN AN EDUCATIONAL ORGANIZATION THAT WILL PROVIDE STUDENTS WITH THE HIGHEST QUALITY EDUCATION, NURTURE FUTURE LEADERS, PREPARE YOUNG ADULTS TO EXCEL IN COLLEGE AND SOCIETY, AND DEVELOP THE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ Yes ☐ No
 If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 8,239,123. including grants of \$ 709,925.) (Revenue \$ 8,182,321.)
THE ALEXANDER DAWSON SCHOOL IN BOULDER COUNTY, COLORADO, A \$33.3 MILLION FACILITY BUILT BY THE ALEXANDER DAWSON FOUNDATION IN 1970, PROVIDES A RIGOROUS, COLLEGE PREPARATORY EDUCATIONAL PROGRAM THAT CHALLENGES 420 STUDENTS IN KINDERGARTEN THROUGH GRADE 12 TO ACHIEVE EXCELLENCE IN MIND, BODY, AND CHARACTER.
DURING THE 2008-2009 SCHOOL YEAR, THE SCHOOL PROVIDED \$709,925 IN FINANCIAL AID TO 59 DESERVING AND TALENTED STUDENTS WHO OTHERWISE WOULD NOT HAVE BEEN ABLE TO AFFORD A DAWSON EDUCATION.
IN JUNE 2009, THE SCHOOL AWARDED DIPLOMAS TO 44 GRADUATES, WHO WERE ACCEPTED TO SUCH COLLEGES AS JOHNS HOPKINS, MIDDLEBURY, MOUNT HOLYOKE,

4b (Code:) (Expenses \$ 16,457,077. including grants of \$ 1,058,266.) (Revenue \$ 13,324,695.)
THE ALEXANDER DAWSON SCHOOL IN LAS VEGAS, NEVADA, A \$38.6 MILLION FACILITY BUILT BY THE ALEXANDER DAWSON FOUNDATION IN 2000, PROVIDES A RIGOROUS, COLLEGE PREPARATORY EDUCATIONAL PROGRAM THAT CHALLENGES 634 STUDENTS IN PRE-KINDERGARTEN THROUGH GRADE 8 TO ACHIEVE EXCELLENCE IN MIND, BODY, AND CHARACTER.
DURING THE 2008-2009 SCHOOL YEAR, THE SCHOOL PROVIDED \$1,058,266 IN FINANCIAL AID TO 87 DESERVING AND TALENTED STUDENTS WHO OTHERWISE WOULD NOT HAVE BEEN ABLE TO AFFORD A DAWSON EDUCATION.
IN JUNE 2009, THE SCHOOL GRADUATED 59 EIGHTH-GRADERS, WHO HAVE GONE ON TO ATTEND LOCAL PUBLIC AND INDEPENDENT HIGH SCHOOLS AS WELL AS SUCH

4c (Code:) (Expenses \$ 370,202. including grants of \$) (Revenue \$)
THE CENTER FOR EXCELLENCE IN TEACHING AND LEARNING INITIATED FREE ACADEMIC SUMMER PROGRAMS FOR HIGH ACHIEVING, PUBLIC SCHOOL STUDENTS IN LAS VEGAS, NEVADA AND BOULDER COUNTY, COLORADO. THE CENTER RECRUITED TOP EDUCATORS LOCALLY AND FROM ACROSS THE COUNTRY AND THE UNITED KINGDOM TO PRESENT ADVANCED, PROBLEM-BASED PROJECTS TO TALENTED JUNIOR HIGH SCHOOL STUDENTS RECOMMENDED BY LOCAL PUBLIC SCHOOL PRINCIPALS.
DURING JULY AND AUGUST 2009, 75 SIXTH AND SEVENTH GRADERS PARTICIPATED IN A SIX-WEEK PROGRAM IN LAS VEGAS AND APPROXIMATELY 50 SIXTH AND SEVENTH GRADERS PARTICIPATED OVER THE COURSE OF TWO TWO-WEEK SESSIONS IN BOULDER COUNTY, COLORADO. ALL OF THE PROGRAM'S COSTS WERE BORNE BY THE ALEXANDER DAWSON FOUNDATION; THERE WAS ABSOLUTELY NO COST TO THE

4d Other program services. (Describe in Schedule O)
 (Expenses \$ 2,210. including grants of \$) (Revenue \$ -10497431.)

4e **Total program service expenses** ▶ \$ 25,068,612. (Must equal Part IX, Line 25, column (B).)

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	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? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	X	
24a 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, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a 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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	68	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	N/A	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	440	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		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?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
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?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	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 N/A	12b	

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.)**Section A. Governing Body and Management**

	Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		
1a Enter the number of voting members of the governing body	5	
1b Enter the number of voting members that are independent	0	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?		X
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	X	
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		
16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed: **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ALEXANDER DAWSON FOUNDATION - 702-733-7880**
4045 S. SPENCER ST., STE 312,, LAS VEGAS, NV 89119

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

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

[illegible]

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total								711,987.	1,754,547.	209,318.

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

5

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization	0	

Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,550.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1734386.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			1,736,936.			
Program Service Revenue	2 a TUITION & FEES	Business Code	541900	19005174.	19005174.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			19005174.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			4,380,733.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross Rents		(i) Real	(ii) Personal				
b Less: rental expenses							
c Rental income or (loss)							
d Net rental income or (loss)				27,617.			27,617.
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)				-19978409.			-19978409
8 a Gross income from fundraising events (not including \$ 2,550. of contributions reported on line 1c). See Part IV, line 18							
b Less: direct expenses							
c Net income or (loss) from fundraising events				106,256.	106,256.		
9 a Gross income from gaming activities. See Part IV, line 19							
b Less: direct expenses							
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances							
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a LITIGATION PROCEEDS		900099	17949417.			17949417.	
b OTHER PROGRAM FEES		900099	849,811.	849,811.			
c INCOME FROM PARTNERSHI		900003	-11331014.			-11331014	
d All other revenue							
e Total. Add lines 11a-11d			7,468,214.				
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			12746521.	19961241.		0.-8951656.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,768,191.	1,768,191.		
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	1,548,630.		1,548,630.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	9,088,037.	8,905,336.	182,701.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	576,483.	519,462.	57,021.	
9 Other employee benefits				
10 Payroll taxes	907,078.	700,512.	206,566.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	196,115.		196,115.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	14,586.			14,586.
f Investment management fees				
g Other				
12 Advertising and promotion	38,327.		38,327.	
13 Office expenses				
14 Information technology	115,945.		115,945.	
15 Royalties				
16 Occupancy				
17 Travel	19,714.	11,215.	8,499.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	4,552,998.	4,552,998.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,409,398.	2,409,398.		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>INSURANCE</u>	1,355,181.	929,496.	425,193.	492.
b <u>FOOD</u>	1,025,698.	1,025,698.		
c <u>GENERAL INSTRUCT./INSTI</u>	1,003,682.		1,003,682.	
d <u>REPAIRS AND MAINTENANCE</u>	785,270.	768,394.	16,876.	
e <u>UTILITIES</u>	717,379.	717,379.		
f All other expenses	5,080,055.	2,760,533.	2,299,544.	19,978.
25 Total functional expenses. Add lines 1 through 24f	31,202,767.	25,068,612.	6,099,099.	35,056.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	1.
	2 Savings and temporary cash investments	12,225,265.	2	41,707,920.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	250,559.	4	434,446.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost basis	10a 72,000,844.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 27,618,821.		
		46,127,023.	10c	44,382,023.
	11 Investments - publicly traded securities	106,643,241.	11	68,104,011.
	12 Investments - other securities. See Part IV, line 11	65,054,351.	12	47,836,769.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	15,071,436.	15	12,814,312.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	245,371,875.	16	215,279,482.	
Liabilities	17 Accounts payable and accrued expenses	1,141,314.	17	1,710,378.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	55,791,089.	20	54,669,018.
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	11,023,680.	25	10,590,434.
	26 Total liabilities. Add lines 17 through 25	67,956,083.	26	66,969,830.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	177,083,067.	27	148,018,141.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets	332,725.	29	291,511.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	177,415,792.	33	148,309,652.
	34 Total liabilities and net assets/fund balances	245,371,875.	34	215,279,482.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☒ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the organizations the organization supports

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

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

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

Schedule A (Form 990 or 990-EZ) 2008

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
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 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 instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2008

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

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

Schedule D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Attach to Form 990. To be completed by organizations that
answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the
organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

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

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

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Term endowment ► _____ %

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

- (i) unrelated organizations
 (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		9,211,249.		9,211,249.
b Buildings		56,648,201.	27,618,821.	29,029,380.
c Leasehold improvements				
d Equipment		6,141,394.		6,141,394.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c))				44,382,023.

Schedule D (Form 990) 2008

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,746,521.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	31,202,767.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-18,456,246.
4	Net unrealized gains (losses) on investments	4	-10,907,009.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	257,115.
9	Total adjustments (net). Add lines 4-8	9	-10,649,894.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-29,106,140.

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

1	Total revenue, gains, and other support per audited financial statements	1	12,746,521.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	12,746,521.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	12,746,521.

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

1	Total expenses and losses per audited financial statements	1	31,202,767.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	31,202,767.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	31,202,767.

Part XIV Supplemental Information

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

PART XI, LINE 8 - OTHER ADJUSTMENTS:

OTHER TAX PROVISION: 165339.

PROVISION FOR REPAIRS AND MAINTENANCE: 91776.

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

► To be completed by organizations that
answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain
- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?
- If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)
- 5 Does the organization discriminate by race in any way with respect to.
- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?
- If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)
- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- b Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement.
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

	YES	NO
1	X	
2	X	
3	X	
4a	X	
4b	X	
4c	X	
4d	X	
5a		X
5b		X
5c		X
5d		X
5e		X
5f		X
5g		X
5h		X
6a		X
6b		X
7	X	

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

Schedule E (Form 990 or 990-EZ) 2008

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.
 ► Attach to Form 990.

ALEXANDER DAWSON FOUNDATION

Employer identification number
22-6044616

☒ Yes ☐ No

Part II **Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any**

recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Use Part IV and Schedule I-1 (Form 990) if additional space is needed							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
N/A			0.	0.			
2 Enter total number of section 501(c)(3) and government organizations							
3 Enter total number of other organizations							

Schedule I (Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FINANCIAL AID - COLORADO	58	709,925.	0.	FMV	FINANCIAL AID IS OFFERED BASED UPON PROVEN NEED AND AVAILABLE FUNDS. THE SCHOOLS UTILIZE A STANDARD SUBMISSION FORMAT FOR
FINANCIAL AID - LAS VEGAS	87	1,058,266.	0.	FMV	FINANCIAL AID IS OFFERED BASED UPON PROVEN NEED AND AVAILABLE FUNDS. THE SCHOOLS UTILIZE A STANDARD SUBMISSION FORMAT FOR
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.					

(F) DESCRIPTION OF NON-CASH ASSISTANCE: FINANCIAL AID IS OFFERED BASED

UPON PROVEN NEED AND AVAILABLE FUNDS. THE SCHOOLS UTILIZE A STANDARD

SUBMISSION FORMAT FOR ALL FINANCIAL AID APPLICATIONS. THE SERVICE

PROVIDES A NEED-BASED FINANCIAL ANALYSIS SERVICE WHICH INCLUDES A

RECOMMENDATION OF WHAT A FAMILY SHOULD REASONABLY CONTRIBUTE TOWARD

TUITION. RESULTS ARE REVIEWED BY THE FINANCIAL AID COMMITTEE WHICH MAKES

RECOMMENDATIONS BASED ON THE YEAR'S BUDGET. UPON APPROVAL, FINANCIAL AID

OFFERS ARE EXTENDED TO THE FAMILIES.

Part IV Supplemental Information

(F) DESCRIPTION OF NON-CASH ASSISTANCE: FINANCIAL AID IS OFFERED BASED UPON PROVEN NEED AND AVAILABLE FUNDS. THE SCHOOLS UTILIZE A STANDARD SUBMISSION FORMAT FOR ALL FINANCIAL AID APPLICATIONS. THE SERVICE PROVIDES A NEED-BASED FINANCIAL ANALYSIS SERVICE WHICH INCLUDES A RECOMMENDATION OF WHAT A FAMILY SHOULD REASONABLY CONTRIBUTE TOWARD TUITION. RESULTS ARE REVIEWED BY THE FINANCIAL AID COMMITTEE WHICH MAKES RECOMMENDATIONS BASED ON THE YEAR'S BUDGET. UPON APPROVAL, FINANCIAL AID OFFERS ARE EXTENDED TO THE FAMILIES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

Part I Questions Regarding Compensation

	Yes	No								
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <table border="0"><tr><td><input type="checkbox"/> First-class or charter travel</td><td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td></tr><tr><td><input type="checkbox"/> Travel for companions</td><td><input type="checkbox"/> Payments for business use of personal residence</td></tr><tr><td><input type="checkbox"/> Tax indemnification and gross-up payments</td><td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td></tr><tr><td><input type="checkbox"/> Discretionary spending account</td><td><input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td></tr></table>	<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	<input checked="" type="checkbox"/>									
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	<input checked="" type="checkbox"/>									
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <table border="0"><tr><td><input type="checkbox"/> Compensation committee</td><td><input type="checkbox"/> Written employment contract</td></tr><tr><td><input type="checkbox"/> Independent compensation consultant</td><td><input checked="" type="checkbox"/> Compensation survey or study</td></tr><tr><td><input checked="" type="checkbox"/> Form 990 of other organizations</td><td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td></tr></table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a										
a Receive a severance payment or change of control payment?		<input checked="" type="checkbox"/>								
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		<input checked="" type="checkbox"/>								
c Participate in, or receive payment from, an equity-based compensation arrangement?		<input checked="" type="checkbox"/>								
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.										
Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.										
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:										
a The organization?		<input checked="" type="checkbox"/>								
b Any related organization?		<input checked="" type="checkbox"/>								
If "Yes," to line 5a or 5b, describe in Part III.										
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:										
a The organization?		<input checked="" type="checkbox"/>								
b Any related organization?		<input checked="" type="checkbox"/>								
If "Yes" to line 6a or 6b, describe in Part III.										
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		<input checked="" type="checkbox"/>								
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(e)(3)? If "Yes," describe in Part III		<input checked="" type="checkbox"/>								

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

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
MARIO P. BORINI	(i)	6,000.	0.	0.	0.	6,000.	0.
	(ii)	414,556.	0.	0.	0.	414,556.	0.
OSWALD GUTSCHE	(i)	6,000.	0.	0.	0.	6,000.	0.
	(ii)	388,058.	0.	20,500.	0.	466,138.	0.
JOHN D. O'BRIEN	(i)	6,000.	0.	0.	0.	6,000.	0.
	(ii)	430,713.	0.	0.	0.	430,713.	0.
JOSEPH C. BORINI	(i)	6,000.	0.	0.	0.	6,000.	0.
	(ii)	351,128.	0.	15,500.	0.	412,351.	0.
MICHAEL IMPERI	(i)	175,109.	0.	0.	0.	195,083.	0.
	(ii)	0.	0.	0.	0.	0.	0.
BRIAN JOHNSON	(i)	161,335.	0.	15,500.	0.	224,058.	0.
	(ii)	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.
Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

OMB No. 1545-0047
2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number
22-6044616

Part I Bond Issues (Required for 2008) SEE SCHEDULE O FOR COLUMN (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
						Yes	No	Yes	No
CLARK COUNTY NEVADA A ECONOMIC DEVELOPMENT		180858AS1	10/01/03	8,720,000.	FINANCE COSTS OF EXPANSION AND RENOV		X		X
CLARK COUNTY NEVADA B ECONOMIC DEVELOPMENT		180858AU6	07/01/06	32685000.	ADVANCE REFUND OF THE COUNTY'S OUTSTA		X		X
C									
D									
E									

Part II Proceeds (Optional for 2008)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Total proceeds of issue										
2 Gross proceeds in reserve funds										
3 Proceeds in refunding or defeasance escrows										
4 Other unspent proceeds										
5 Issuance costs from proceeds										
6 Working capital expenditures from proceeds										
7 Capital expenditures from proceeds										
8 Year of substantial completion										
9 Were the bonds issued as part of a current refunding issue?										
10 Were the bonds issued as part of an advance refunding issue?										
11 Has the final allocation of proceeds been made?										
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?										

Part III Private Business Use (Optional for 2008)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?										
2 Are there any lease arrangements with respect to the financed property which may result in private business use?										

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, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, lines 38a or 40b.

OMB No 1545-0047

2008

Open To Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

Part I 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.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$

Part II 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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
KEVIN L. CLOUD		X	18,000.	14,230.		X	X		X	
Total				▶ \$ 14,230.						

Part III Grants or Assistance Benefiting Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

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

Schedule L (Form 990 or 990-EZ) 2008

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

NonCash Contributions

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X		31,717.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for
the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,
describe in Part II

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number
22-6044616

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SELF-RESPECT, SELF-DISCIPLINE AND SELF-RELIANCE OF EACH STUDENT BY
STRESSING THE VALUE OF HARD WORK AND PERSONAL RESPONSIBILITY AND
RESPECT FOR AUTHORITY.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

THE FOUNDATION ESTABLISHED THE ALEXANDER DAWSON FOUNDATION CENTER FOR
EXCELLENCE IN TEACHING & LEARNING AT ITS TWO SCHOOLS TO PROVIDE FREE
EDUCATIONAL, AS OPPOSED TO RECREATIONAL, CLASSES TO PUBLIC, WORTHY
STUDENTS DURING THE SUMMER MONTHS.

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

NEW YORK UNIVERSITY, PRINCETON, RENSSELAER POLYTECHNIC INSTITUTE,
UNIVERSITY OF MICHIGAN, VASSAR, AND WESLEYAN AND WHO WERE OFFERED \$2.5
MILLION IN SCHOLARSHIPS. AMONG THE GRADUATES WERE THREE NATIONAL MERIT
FINALISTS, ONE OF WHOM WAS ALSO NAMED A BOETTCHER SCHOLAR.

IN ADDITION, THE SCHOOL OWNED AND OPERATED A SUMMER CAMP IN 2008 THAT
OFFERED INSTRUCTION AND ACTIVITIES IN MUSIC, SPORTS, ACADEMICS, ART,
DRAMA, TECHNOLOGY, ENGINEERING AND SCIENCE FOR 710 BOYS AND GIRLS.

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

BOARDING SCHOOLS AS CHOATE ROSEMARY HALL AND PHILIPS EXETER ACADEMY.

IN ADDITION, THE SCHOOL OWNED AND OPERATED A SUMMER CAMP IN 2008 THAT
OFFERED INSTRUCTION AND ACTIVITIES IN MUSIC, SPORTS, ACADEMICS, AND THE

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

ARTS FOR 189 BOYS AND GIRLS.

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

PARTICIPANTS.

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

THE FOUNDATION, A NEVADA CHARITABLE TRUST, WAS ORGANIZED AND IS
OPERATED EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES. ITS
MISSION IS TO ESTABLISH, OPERATE AND MAINTAIN AN EDUCATIONAL
ORGANIZATION THAT PROVIDES STUDENTS WITH THE HIGHEST QUALITY ACADEMIC
INSTRUCTION.

EXPENSES \$ 2210. INCLUDING GRANTS OF \$ 0. REVENUE \$ -10497431.

FORM 990, PART VI, SECTION A, LINE 2: MARIO BORINI, TRUSTEE AND JOSEPH
BORINI, TRUSTEE - "FAMILY RELATIONSHIP"

FORM 990, PART VI, SECTION A, LINE 10: THE RETURN IS PREPARED FROM DATA
GENERATED FROM THE AUDIT AND WITH ADDITIONAL INFORMATION PROVIDED BY THE
ORGANIZATION. THE CONTROLLER AND CHAIRMAN REVIEW THE RETURN PREPARED BY THE
TAX FIRM PRIOR TO FILING. COPIES OF THE FILED RETURN ARE MADE AVAILABLE TO
THE TRUSTEES.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS
REVIEWED AND UPDATED ANNUALLY. THE ADMINISTRATORS ADDRESS ANY ISSUES AS
THEY ARISE.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number

22-6044616

FORM 990, PART VI, SECTION B, LINE 15: DETERMINING COMPENSATION FOLLOWS A STUDY OF COMPARABLE DATA, COST OF LIVING, AND OTHER DATA. COMPENSATION IS A LARGE COMPONENT OF THE BUDGETING PROCESS AND IS DISCUSSED IN COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19: ORGANIZATIONAL DOCUMENTS ARE MADE AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST ONLY.

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: CLARK COUNTY NEVADA ECONOMIC DEVELOPMENT

(F) DESCRIPTION OF PURPOSE:

FINANCE COSTS OF EXPANSION AND RENOVATION OF EXISTING SCHOOL BUILDINGS

(A) ISSUER NAME: CLARK COUNTY NEVADA ECONOMIC DEVELOPMENT

(F) DESCRIPTION OF PURPOSE:

ADVANCE REFUND OF THE COUNTY'S OUTSTANDING ECONOMIC DEVELOPMENT BONDS

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

ALEXANDER DAWSON FOUNDATION

Employer identification number
22-6044616

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
ALEXANDER DAWSON SCHOOL, LLC - 94-3382726 4045 SPENCER STREET, SUITE 312 LAS VEGAS, NV 89119-5248	SCHOOL	NEVADA	9,164,386.	24896351.	ALEXANDER DAWSON FOUNDATION
ALEXANDER DAWSON SCHOOL AT RAINBOW MOUNTAIN, LLC - 94-3382725, 4045 SPENCER STREET, SUITE 312, LAS VEGAS, NV 89119-5248	SCHOOL	NEVADA	12657318.	30826299.	ALEXANDER DAWSON FOUNDATION

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
ALEXANDER DAWSON SCHOOL, LLC - 94-3382726 4045 SPENCER STREET, SUITE 312 LAS VEGAS, NV 89119-5248	SCHOOL	NEVADA	501(C)(3)	170(B)(1)(A)(I) FOUNDATION	ALEXANDER DAWSON FOUNDATION
ALEXANDER DAWSON SCHOOL AT RAINBOW MOUNTAIN, LLC - 94-3382725, 4045 SPENCER STREET, SUITE 312, LAS VEGAS, NV 89119-5248	SCHOOL	NEVADA	501(C)(3)	170(B)(1)(A)(I) FOUNDATION	ALEXANDER DAWSON FOUNDATION

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

Schedule R (Form 990) 2008

Part V Transactions With Related Organizations**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	PROGRAM SERVICES											
1	AUTOMOBILE	070199SL		10.0016		26,455.			26,455.	26,455.		0.
2	AUTOMOBILE	070605SL		10.0016		48,417.			48,417.	29,051.		9,683.
3	AUTOMOBILE	060801SL		10.0016		16,410.			16,410.	16,410.		0.
4	AUTOMOBILE	081502SL		10.0016		16,045.			16,045.	16,045.		0.
5	EQUIPMENT	080400SL		10.0016		127.			127.	127.		0.
6	EQUIPMENT	090600SL		10.0016		1,639.			1,639.	1,639.		0.
7	EQUIPMENT	092000SL		10.0016		989.			989.	989.		0.
8	EQUIPMENT	092000SL		10.0016		19,300.			19,300.	19,300.		0.
9	EQUIPMENT	092000SL		10.0016		3,215.			3,215.	3,215.		0.
10	EQUIPMENT	092000SL		10.0016		2,626.			2,626.	2,626.		0.
11	EQUIPMENT	092700SL		10.0016		795.			795.	795.		0.
12	EQUIPMENT	092900SL		10.0016		6,988.			6,988.	6,988.		0.
13	EQUIPMENT	100400SL		10.0016		3,280.			3,280.	2,916.		364.
14	EQUIPMENT	100400SL		10.0016		2,462.			2,462.	2,462.		0.
15	EQUIPMENT	100400SL		10.0016		896.			896.	896.		0.
16	EQUIPMENT	101100SL		10.0016		948.			948.	948.		0.
17	EQUIPMENT	101100SL		10.0016		5,159.			5,159.	4,608.		551.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
18	EQUIPMENT	102400	SL	10.00	16	1,786.			1,786.	1,786.		0.
19	EQUIPMENT	102400	SL	10.00	16	2,471.			2,471.	2,471.		0.
20	EQUIPMENT	102400	SL	10.00	16	5,468.			5,468.	5,468.		0.
21	EQUIPMENT	102400	SL	10.00	16	1,875.			1,875.	1,667.		208.
22	EQUIPMENT	102400	SL	10.00	16	926.			926.	926.		0.
23	EQUIPMENT	102400	SL	10.00	16	10,851.			10,851.	9,645.		1,206.
24	EQUIPMENT	102400	SL	10.00	16	1,294.			1,294.	1,294.		0.
25	EQUIPMENT	102400	SL	10.00	16	651.			651.	651.		0.
26	EQUIPMENT	110300	SL	10.00	16	1,058.			1,058.	1,058.		0.
27	EQUIPMENT	110800	SL	10.00	16	608.			608.	608.		0.
28	EQUIPMENT	110800	SL	10.00	16	2,430.			2,430.	2,160.		270.
29	EQUIPMENT	112800	SL	10.00	16	615.			615.	615.		0.
30	EQUIPMENT	121200	SL	10.00	16	2,534.			2,534.	2,534.		0.
31	EQUIPMENT	011701	SL	10.00	16	730.			730.	730.		0.
32	EQUIPMENT	020101	SL	10.00	16	2,934.			2,934.	2,934.		0.
33	EQUIPMENT	030701	SL	10.00	16	480.			480.	480.		0.
34	EQUIPMENT	060801	SL	10.00	16	900.			900.	900.		0.
35	EQUIPMENT	062501	SL	10.00	16	15,125.			15,125.	15,125.		0.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
36EQUIPMENT		102501SL		10.0016		3,695.			3,695.	3,695.		0.
37EQUIPMENT		080301SL		10.0016		882.			882.	882.		0.
38EQUIPMENT		080301SL		10.0016		2,954.			2,954.	2,954.		0.
39EQUIPMENT		080301SL		10.0016		1,654.			1,654.	1,654.		0.
40EQUIPMENT		080301SL		10.0016		7,156.			7,156.	7,156.		0.
41EQUIPMENT		082101SL		10.0016		2,263.			2,263.	2,263.		0.
42EQUIPMENT		082801SL		10.0016		1,275.			1,275.	1,275.		0.
43EQUIPMENT		091001SL		10.0016		24,909.			24,909.	24,909.		0.
44EQUIPMENT		091001SL		10.0016		7,779.			7,779.	7,779.		0.
45EQUIPMENT		091901SL		10.0016		1,049.			1,049.	1,049.		0.
46EQUIPMENT		091901SL		10.0016		249.			249.	249.		0.
47EQUIPMENT		091901SL		10.0016		28,333.			28,333.	28,333.		0.
48EQUIPMENT		091901SL		10.0016		6,723.			6,723.	6,723.		0.
49EQUIPMENT		091901SL		10.0016		45,267.			45,267.	45,267.		0.
50EQUIPMENT		091901SL		10.0016		45,267.			45,267.	45,267.		0.
51EQUIPMENT		091901SL		10.0016		20,369.			20,369.	20,369.		0.
52EQUIPMENT		091901SL		10.0016		9,331.			9,331.	9,331.		0.
53EQUIPMENT		091901SL		10.0016		1,046.			1,046.	1,046.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
54	EQUIPMENT	091901	SL	10.00	16	11,713.			11,713.	11,713.		0.
55	EQUIPMENT	100101	SL	10.00	16	430.			430.	430.		0.
56	EQUIPMENT	100101	SL	10.00	16	3,850.			3,850.	3,850.		0.
57	EQUIPMENT	101501	SL	10.00	16	825.			825.	825.		0.
58	EQUIPMENT	101501	SL	10.00	16	5,970.			5,970.	5,970.		0.
59	EQUIPMENT	110501	SL	10.00	16	664.			664.	664.		0.
60	EQUIPMENT	111601	SL	10.00	16	1,738.			1,738.	1,738.		0.
61	EQUIPMENT	112601	SL	10.00	16	2,038.			2,038.	2,038.		0.
62	EQUIPMENT	112901	SL	10.00	16	13,773.			13,773.	13,773.		0.
63	EQUIPMENT	121301	SL	10.00	16	754.			754.	754.		0.
64	EQUIPMENT	121301	SL	10.00	16	2,294.			2,294.	2,294.		0.
65	EQUIPMENT	121301	SL	10.00	16	2,198.			2,198.	2,198.		0.
66	EQUIPMENT	020402	SL	10.00	16	4,866.			4,866.	4,432.		434.
67	EQUIPMENT	042502	SL	10.00	16	1,780.			1,780.	1,621.		159.
68	EQUIPMENT	042902	SL	10.00	16	587.			587.	535.		52.
69	EQUIPMENT	051302	SL	10.00	16	5,255.			5,255.	4,786.		469.
70	EQUIPMENT	051302	SL	10.00	16	2,284.			2,284.	2,080.		204.
71	EQUIPMENT	052002	SL	10.00	16	2,116.			2,116.	1,927.		189.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
72	EQUIPMENT	061402	SL	10.00	16	1,023.			1,023.	932.		91.
73	EQUIPMENT	121302	SL	10.00	16	4,364.			4,364.	3,975.		389.
74	EQUIPMENT	121302	SL	10.00	16	2,414.			2,414.	2,199.		215.
86	EQUIPMENT	090104	SL	10.00	16	9,537.			9,537.	8,438.		1,099.
88	EQUIPMENT	070100	SL	10.00	16	7,675.			7,675.	7,675.		0.
89	EQUIPMENT	070100	SL	10.00	16	6,025.			6,025.	6,025.		0.
90	EQUIPMENT	070100	SL	10.00	16	3,500.			3,500.	3,500.		0.
91	EQUIPMENT	070100	SL	10.00	16	1,150.			1,150.	1,150.		0.
92	EQUIPMENT	070100	SL	10.00	16	290.			290.	290.		0.
93	EQUIPMENT	081800	SL	10.00	16	765.			765.	765.		0.
94	EQUIPMENT	081800	SL	10.00	16	15,190.			15,190.	15,190.		0.
95	EQUIPMENT	083100	SL	10.00	16	2,754.			2,754.	2,754.		0.
96	EQUIPMENT	090600	SL	10.00	16	8,820.			8,820.	8,820.		0.
97	EQUIPMENT	091800	SL	10.00	16	2,250.			2,250.	2,250.		0.
98	EQUIPMENT	091500	SL	10.00	16	66,450.			66,450.	66,450.		0.
99	EQUIPMENT	091500	SL	10.00	16	42,528.			42,528.	42,528.		0.
100	EQUIPMENT	092000	SL	10.00	16	12,515.			12,515.	12,515.		0.
101	EQUIPMENT	092000	SL	10.00	16	8,833.			8,833.	8,833.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
102EQUIPMENT		092000SL		10.0016		5,175.			5,175.	5,175.		0.
103EQUIPMENT		092000SL		10.0016		1,035.			1,035.	1,035.		0.
104EQUIPMENT		092000SL		10.0016		700.			700.	700.		0.
105EQUIPMENT		092000SL		10.0016		26,425.			26,425.	26,425.		0.
106EQUIPMENT		092700SL		10.0016		8,358.			8,358.	8,358.		0.
107EQUIPMENT		092900SL		10.0016		3,247.			3,247.	3,247.		0.
108EQUIPMENT		092900SL		10.0016		1,488.			1,488.	1,488.		0.
109EQUIPMENT		092900SL		10.0016		2,930.			2,930.	2,930.		0.
110EQUIPMENT		010400SL		10.0016		2,515.			2,515.	2,515.		0.
111EQUIPMENT		100400SL		10.0016		59,556.			59,556.	59,556.		0.
112EQUIPMENT		101200SL		10.0016		1,999.			1,999.	1,999.		0.
114EQUIPMENT		102400SL		10.0016		4,000.			4,000.	4,000.		0.
115EQUIPMENT		1110300SL		10.0016		11,248.			11,248.	11,248.		0.
117EQUIPMENT		1110800SL		10.0016		1,694.			1,694.	1,694.		0.
118EQUIPMENT		1111600SL		10.0016		816.			816.	816.		0.
120EQUIPMENT		1112100SL		10.0016		638.			638.	638.		0.
121EQUIPMENT		1112100SL		10.0016		5,000.			5,000.	5,000.		0.
122EQUIPMENT		0110301SL		10.0016		1,800.			1,800.	1,800.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
123	EQUIPMENT	011701SL		10.0016		4,065.			4,065.	4,065.		0.
124	EQUIPMENT	011701SL		10.0016		1,975.			1,975.	1,975.		0.
125	EQUIPMENT	012901SL		10.0016		66,450.			66,450.	66,450.		0.
128	EQUIPMENT	030701SL		10.0016		469.			469.	469.		0.
129	EQUIPMENT	030701SL		10.0016		551.			551.	551.		0.
130	EQUIPMENT	030701SL		10.0016		5,000.			5,000.	5,000.		0.
131	EQUIPMENT	032801SL		10.0016		1,011.			1,011.	1,011.		0.
137	EQUIPMENT	040901SL		10.0016		2,006.			2,006.	2,006.		0.
138	EQUIPMENT	042001SL		10.0016		2,090.			2,090.	2,090.		0.
139	EQUIPMENT	042001SL		10.0016		2,367.			2,367.	2,367.		0.
140	EQUIPMENT	042001SL		10.0016		750.			750.	750.		0.
141	EQUIPMENT	042001SL		10.0016		2,410.			2,410.	2,410.		0.
142	EQUIPMENT	042001SL		10.0016		3,303.			3,303.	3,303.		0.
143	EQUIPMENT	042501SL		10.0016		1,535.			1,535.	1,535.		0.
144	EQUIPMENT	050101SL		10.0016		5,175.			5,175.	5,175.		0.
145	EQUIPMENT	051501SL		10.0016		7,370.			7,370.	7,370.		0.
146	EQUIPMENT	070100SL		10.0016		117,638.			117,638.	117,638.		0.
147	EQUIPMENT	060801SL		10.0016		2,590.			2,590.	2,590.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
148	EQUIPMENT	060801SL		10.00	16	1,450.			1,450.	1,450.		0.
149	EQUIPMENT	060801SL		10.00	16	10,875.			10,875.	10,875.		0.
150	EQUIPMENT	062501SL		10.00	16	9,266.			9,266.	9,266.		0.
151	EQUIPMENT	062501SL		10.00	16	18,169.			18,169.	18,169.		0.
152	EQUIPMENT	062501SL		10.00	16	973.			973.	973.		0.
153	EQUIPMENT	063001SL		10.00	16	1,885.			1,885.	1,885.		0.
155	EQUIPMENT	063001SL		10.00	16	2,104.			2,104.	2,104.		0.
156	EQUIPMENT	063001SL		10.00	16	2,295.			2,295.	2,295.		0.
157	EQUIPMENT	063001SL		10.00	16	3,407.			3,407.	3,407.		0.
158	EQUIPMENT	063001SL		10.00	16	3,998.			3,998.	3,998.		0.
159	EQUIPMENT	063001SL		10.00	16	525.			525.	525.		0.
160	EQUIPMENT	063001SL		10.00	16	4,522.			4,522.	4,522.		0.
161	EQUIPMENT	100101SL		10.00	16	2,505.			2,505.	2,505.		0.
162	EQUIPMENT	102501SL		10.00	16	2,000.			2,000.	2,000.		0.
163	EQUIPMENT	120301SL		10.00	16	500.			500.	500.		0.
164	EQUIPMENT	080301SL		10.00	16	2,499.			2,499.	2,499.		0.
165	EQUIPMENT	080301SL		10.00	16	2,498.			2,498.	2,498.		0.
166	EQUIPMENT	082202SL		10.00	16	7,558.			7,558.	7,558.		0.

828102
04-25-08

(D) - Asset disposed

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

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
167	EQUIPMENT	092502	SL	10.00	16	2,107.			2,107.	2,107.		0.
168	EQUIPMENT	092502	SL	10.00	16	7,652.			7,652.	7,652.		0.
169	EQUIPMENT	100702	SL	10.00	16	44,136.			44,136.	44,136.		0.
170	EQUIPMENT	100702	SL	10.00	16	34,128.			34,128.	34,128.		0.
171	EQUIPMENT	100702	SL	10.00	16	29,424.			29,424.	29,424.		0.
172	EQUIPMENT	100702	SL	10.00	16	44,136.			44,136.	44,136.		0.
173	EQUIPMENT	111202	SL	10.00	16	811.			811.	811.		0.
174	EQUIPMENT	111802	SL	10.00	16	4,709.			4,709.	4,709.		0.
175	EQUIPMENT	063004	SL	10.00	16	28,102.			28,102.	25,049.		3,053.
176	EQUIPMENT	060304	SL	10.00	16	23,861.			23,861.	21,112.		2,749.
177	EQUIPMENT	063004	SL	10.00	16	9,319.			9,319.	8,245.		1,074.
178	EQUIPMENT	063004	SL	10.00	16	17,100.			17,100.	15,130.		1,970.
179	EQUIPMENT	090104	SL	10.00	16	6,984.			6,984.	6,180.		804.
180	EQUIPMENT	090104	SL	10.00	16	17,995.			17,995.	15,922.		2,073.
181	EQUIPMENT	090104	SL	10.00	16	27,338.			27,338.	24,189.		3,149.
182	EQUIPMENT	090104	SL	10.00	16	22,316.			22,316.	19,745.		2,571.
183	EQUIPMENT	020200	SL	10.00	16	209.			209.	209.		0.
184	EQUIPMENT	061600	SL	10.00	16	379.			379.	379.		0.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
185	EQUIPMENT	061900SL		10.0016		959.			959.	959.		0.
186	EQUIPMENT	061600SL		10.0016		959.			959.	959.		0.
187	EQUIPMENT	020200SL		10.0016		2,100.			2,100.	2,100.		0.
188	EQUIPMENT	090999SL		10.0016		2,300.			2,300.	2,300.		0.
189	EQUIPMENT	042600SL		10.0016		2,744.			2,744.	2,744.		0.
190	EQUIPMENT	061600SL		10.0016		3,104.			3,104.	3,104.		0.
191	EQUIPMENT	061600SL		10.0016		3,104.			3,104.	3,104.		0.
192	EQUIPMENT	061600SL		10.0016		6,875.			6,875.	6,875.		0.
193	EQUIPMENT	061600SL		10.0016		7,062.			7,062.	7,062.		0.
194	EQUIPMENT	050300SL		10.0016		11,045.			11,045.	11,045.		0.
195	EQUIPMENT	051800SL		10.0016		34,375.			34,375.	34,375.		0.
196	EQUIPMENT	072999SL		10.0016		5,253.			5,253.	5,253.		0.
197	EQUIPMENT	061900SL		10.0016		7,542.			7,542.	7,542.		0.
198	EQUIPMENT	061900SL		10.0016		199.			199.	199.		0.
199	EQUIPMENT	062600SL		10.0016		7,062.			7,062.	7,062.		0.
200	EQUIPMENT	062600SL		10.0016		7,445.			7,445.	7,445.		0.
201	EQUIPMENT	062600SL		10.0016		1,033.			1,033.	1,033.		0.
202	EQUIPMENT	062600SL		10.0016		665.			665.	665.		0.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
203	EQUIPMENT	062600	SL	10.00	16	4,860.			4,860.	4,860.		0.
204	EQUIPMENT	062600	SL	10.00	16	2,486.			2,486.	2,486.		0.
205	EQUIPMENT	062600	SL	10.00	16	1,243.			1,243.	1,243.		0.
206	EQUIPMENT	062600	SL	10.00	16	1,243.			1,243.	1,243.		0.
207	EQUIPMENT	062600	SL	10.00	16	1,243.			1,243.	1,243.		0.
208	EQUIPMENT	062600	SL	10.00	16	1,243.			1,243.	1,243.		0.
209	EQUIPMENT	062600	SL	10.00	16	1,243.			1,243.	1,243.		0.
210	EQUIPMENT	062600	SL	10.00	16	1,243.			1,243.	1,243.		0.
211	EQUIPMENT	062600	SL	10.00	16	697.			697.	697.		0.
212	EQUIPMENT	063000	SL	10.00	16	55.			55.	55.		0.
213	EQUIPMENT	063000	SL	10.00	16	55.			55.	55.		0.
214	EQUIPMENT	063000	SL	10.00	16	55.			55.	55.		0.
215	EQUIPMENT	063000	SL	10.00	16	55.			55.	55.		0.
216	EQUIPMENT	063000	SL	10.00	16	6,278.			6,278.	6,278.		0.
217	EQUIPMENT	070100	SL	10.00	16	3,014.			3,014.	3,014.		0.
218	EQUIPMENT	070100	SL	10.00	16	729.			729.	729.		0.
219	EQUIPMENT	071900	SL	10.00	16	1,500.			1,500.	1,500.		0.
220	EQUIPMENT	071900	SL	10.00	16	2,442.			2,442.	2,442.		0.

832102
04-25-08

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, G.O. Zone

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
221EQUIPMENT		080400SL		10.0016		99.			99.	99.		0.
222EQUIPMENT		081800SL		10.0016		1,085.			1,085.	1,085.		0.
223EQUIPMENT		091500SL		10.0016		2,385.			2,385.	2,385.		0.
224EQUIPMENT		091500SL		10.0016		453.			453.	453.		0.
225EQUIPMENT		091500SL		10.0016		2,424.			2,424.	2,424.		0.
226EQUIPMENT		091500SL		10.0016		577.			577.	577.		0.
227EQUIPMENT		092000SL		10.0016		270.			270.	270.		0.
228EQUIPMENT		100400SL		10.0016		753.			753.	753.		0.
229EQUIPMENT		100400SL		10.0016		459.			459.	459.		0.
230EQUIPMENT		100400SL		10.0016		2,740.			2,740.	2,740.		0.
231EQUIPMENT		101200SL		10.0016		1,679.			1,679.	1,679.		0.
232EQUIPMENT		102400SL		10.0016		439.			439.	439.		0.
233EQUIPMENT		110800SL		10.0016		497.			497.	497.		0.
234EQUIPMENT		112800SL		10.0016		80,782.			80,782.	80,782.		0.
235EQUIPMENT		112800SL		10.0016		2,038.			2,038.	2,038.		0.
236EQUIPMENT		122000SL		10.0016		149.			149.	149.		0.
237EQUIPMENT		010301SL		10.0016		2,084.			2,084.	2,084.		0.
238EQUIPMENT		011701SL		10.0016		20.			20.	20.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
239	EQUIPMENT	011701	SL	10.00	16	125.			125.	125.		0.
240	EQUIPMENT	022201	SL	10.00	16	39.			39.	39.		0.
241	EQUIPMENT	022201	SL	10.00	16	198.			198.	198.		0.
242	EQUIPMENT	032101	SL	10.00	16	384.			384.	384.		0.
243	EQUIPMENT	052501	SL	10.00	16	1,674.			1,674.	1,674.		0.
244	EQUIPMENT	053101	SL	10.00	16	753.			753.	753.		0.
245	EQUIPMENT	060801	SL	10.00	16	1,548.			1,548.	1,548.		0.
246	EQUIPMENT	060801	SL	10.00	16	2,277.			2,277.	2,277.		0.
247	EQUIPMENT	062501	SL	10.00	16	482.			482.	482.		0.
248	EQUIPMENT	062501	SL	10.00	16	2,403.			2,403.	2,403.		0.
249	EQUIPMENT	062501	SL	10.00	16	59.			59.	59.		0.
250	EQUIPMENT	062501	SL	10.00	16	4,700.			4,700.	4,700.		0.
251	EQUIPMENT	062501	SL	10.00	16	2,980.			2,980.	2,980.		0.
252	EQUIPMENT	062501	SL	10.00	16	648.			648.	648.		0.
253	EQUIPMENT	063001	SL	10.00	16	159.			159.	159.		0.
254	EQUIPMENT	063001	SL	10.00	16	2,480.			2,480.	2,480.		0.
255	EQUIPMENT	082801	SL	10.00	16	1,888.			1,888.	1,888.		0.
256	EQUIPMENT	091001	SL	10.00	16	83,948.			83,948.	83,948.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
257EQUIPMENT		102501SL		10.0016		12,951.			12,951.	12,951.		0.
258EQUIPMENT		121301SL		10.0016		1,887.			1,887.	1,887.		0.
259EQUIPMENT		121901SL		10.0016		2,238.			2,238.	2,238.		0.
260EQUIPMENT		021902SL		10.0016		1,253.			1,253.	1,253.		0.
261EQUIPMENT		070100SL		10.0016		311.			311.	311.		0.
262EQUIPMENT		070100SL		10.0016		520.			520.	520.		0.
263EQUIPMENT		070100SL		10.0016		520.			520.	520.		0.
264EQUIPMENT		070100SL		10.0016		565.			565.	565.		0.
265EQUIPMENT		080800SL		10.0016		9,593.			9,593.	9,593.		0.
266EQUIPMENT		080800SL		10.0016		6,088.			6,088.	6,088.		0.
267EQUIPMENT		080800SL		10.0016		17,860.			17,860.	17,860.		0.
268EQUIPMENT		080800SL		10.0016		9,576.			9,576.	9,576.		0.
269EQUIPMENT		081800SL		10.0016		8,928.			8,928.	8,928.		0.
270EQUIPMENT		091500SL		10.0016		58,132.			58,132.	58,132.		0.
271EQUIPMENT		092000SL		10.0016		3,399.			3,399.	3,021.		378.
272EQUIPMENT		111600SL		10.0016		14,303.			14,303.	14,303.		0.
273EQUIPMENT		112100SL		10.0016		2,510.			2,510.	2,231.		279.
274EQUIPMENT		112800SL		10.0016		1,335.			1,335.	1,187.		148.

828102
04-25-08

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, § 50 Zone

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
275	EQUIPMENT	122000	SL	10.00	16	1,848.			1,848.	1,848.		0.
276	EQUIPMENT	011701	SL	10.00	16	1,167.			1,167.	1,167.		0.
277	EQUIPMENT	041701	SL	10.00	16	164.			164.	164.		0.
278	EQUIPMENT	050101	SL	10.00	16	23,269.			23,269.	23,269.		0.
279	EQUIPMENT	121200	SL	10.00	16	4,256.			4,256.	4,256.		0.
280	EQUIPMENT	022301	SL	10.00	16	1,430.			1,430.	1,430.		0.
281	EQUIPMENT	032801	SL	10.00	16	1,516.			1,516.	1,516.		0.
282	EQUIPMENT	070100	SL	10.00	16	507,246.			507,246.	507,246.		0.
283	EQUIPMENT	110900	SL	10.00	16	169,500.			169,500.	169,500.		0.
284	EQUIPMENT	060801	SL	10.00	16	3,400.			3,400.	3,400.		0.
285	EQUIPMENT	063001	SL	10.00	16	198.			198.	198.		0.
286	EQUIPMENT	100101	SL	10.00	16	1,114.			1,114.	1,114.		0.
287	EQUIPMENT	100101	SL	10.00	16	2,400.			2,400.	2,400.		0.
288	EQUIPMENT	101801	SL	10.00	16	4,601.			4,601.	4,601.		0.
289	EQUIPMENT	063004	SL	10.00	16	157,299.			157,299.	125,991.		31,308.
290	EQUIPMENT	063004	SL	10.00	16	9,537.			9,537.	6,983.		851.
291	EQUIPMENT	092205	SL	10.00	16	28,671.			28,671.	12,287.		4,096.
292	EQUIPMENT	093006	SL	10.00	16	9,894.			9,894.	1,979.		989.

832102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
293	EQUIPMENT	022207	SL	10.00	16	24,761.			24,761.	1,650.		1,651.
294	EQUIPMENT	022207	SL	10.00	16	1,375.			1,375.	275.		275.
295	EQUIPMENT	020200	SL	10.00	16	730.			730.	730.		0.
296	EQUIPMENT	091500	SL	10.00	16	1,995.			1,995.	1,995.		0.
297	EQUIPMENT	092000	SL	10.00	16	1,222.			1,222.	1,222.		0.
298	EQUIPMENT	092000	SL	10.00	16	491.			491.	491.		0.
299	EQUIPMENT	092700	SL	10.00	16	2,872.			2,872.	2,872.		0.
300	EQUIPMENT	100400	SL	10.00	16	823.			823.	823.		0.
301	EQUIPMENT	120900	SL	10.00	16	267.			267.	267.		0.
302	EQUIPMENT	100400	SL	10.00	16	1,259.			1,259.	1,119.		140.
303	EQUIPMENT	102400	SL	10.00	16	92.			92.	92.		0.
304	EQUIPMENT	110300	SL	10.00	16	19,049.			19,049.	19,049.		0.
305	EQUIPMENT	111600	SL	10.00	16	1,516.			1,516.	1,348.		168.
306	EQUIPMENT	112100	SL	10.00	16	800.			800.	711.		89.
307	EQUIPMENT	092100	SL	10.00	16	3,477.			3,477.	3,477.		0.
308	EQUIPMENT	010301	SL	10.00	16	1,405.			1,405.	1,405.		0.
309	EQUIPMENT	021301	SL	10.00	16	6,953.			6,953.	3,669.		410.
310	EQUIPMENT	022201	SL	10.00	16	5,100.			5,100.	2,691.		301.

828102
04-25-08

(D) - Asset disposed

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

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
311	EQUIPMENT	022201	SL	10.00	16	5,500.			5,500.	2,901.		325.
312	EQUIPMENT	063001	SL	10.00	16	929.			929.	490.		55.
313	EQUIPMENT	063001	SL	10.00	16	3,180.			3,180.	1,678.		188.
314	EQUIPMENT	042902	SL	10.00	16	1,068.			1,068.	501.		63.
315	EQUIPMENT	051302	SL	10.00	16	6,479.			6,479.	3,036.		382.
316	EQUIPMENT	051302	SL	10.00	16	29,862.			29,862.	13,992.		1,763.
317	EQUIPMENT	063004	SL	10.00	16	32,993.			32,993.	11,286.		2,171.
318	EQUIPMENT	080103	SL	10.00	16	13,317.			13,317.	5,432.		808.
319	EQUIPMENT	110404	SL	10.00	16	5,350.			5,350.	1,830.		352.
320	EQUIPMENT	010605	SL	10.00	16	5,350.			5,350.	1,439.		391.
328	LAND	063000	L			2111267.			2111267.			0.
329	LAND	063001	L			444,734.			444,734.			0.
330	LAND	063001	L			5,900.			5,900.			0.
331	LAND	063001	L			21,930.			21,930.			0.
332	LAND	063004	L			67,184.			67,184.			0.
333	LAND IMPROVEMENTS	082300	SL	20.00	16	15,200.			15,200.	8,685.		1,086.
334	LAND IMPROVEMENTS	080801	SL	20.00	16	4,485.			4,485.	2,366.		265.
335	LAND IMPROVEMENTS	090401	SL	20.00	16	2,260.			2,260.	1,193.		133.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
336	LAND IMPROVEMENTS	090401SL		20.00	16	3,613.			3,613.	1,907.		213.
337	LAND IMPROVEMENTS	091001SL		20.00	16	245.			245.	130.		14.
338	LAND IMPROVEMENTS	101201SL		20.00	16	20,000.			20,000.	10,552.		1,181.
339	LAND IMPROVEMENTS	101801SL		20.00	16	86,499.			86,499.	46,860.		4,805.
340	LAND IMPROVEMENTS	101801SL		20.00	16	22,917.			22,917.	12,091.		1,353.
341	LAND IMPROVEMENTS	110201SL		20.00	16	10,025.			10,025.	5,289.		592.
342	LAND IMPROVEMENTS	032002SL		20.00	16	4,140.			4,140.	1,940.		244.
343	LAND IMPROVEMENTS	061802SL		20.00	16	1,080.			1,080.	506.		64.
344	LAND IMPROVEMENTS	111601SL		20.00	16	3,423.			3,423.	1,806.		202.
345	LAND IMPROVEMENTS	011802SL		20.00	16	14,000.			14,000.	6,559.		827.
346	LAND IMPROVEMENTS	090402SL		20.00	16	30,612.			30,612.	14,343.		1,808.
347	LAND IMPROVEMENTS	092502SL		20.00	16	48,143.			48,143.	22,557.		2,843.
348	LAND IMPROVEMENTS	063004SL		20.00	16	2,676.			2,676.	916.		176.
349	LAND IMPROVEMENTS	063004SL		20.00	16	23,832.			23,832.	8,152.		1,568.
350	LAND IMPROVEMENTS	063004SL		20.00	16	32,642.			32,642.	11,166.		2,148.
351	LAND IMPROVEMENTS	090104SL		20.00	16	195,362.			195,362.	66,829.		12,853.
352	LAND IMPROVEMENTS	090104SL		20.00	16	24,000.			24,000.	8,210.		1,579.
353	LAND IMPROVEMENTS	090104SL		20.00	16	1,071.			1,071.	367.		70.

8328102
04-25-08

(D) Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
354	BUILDINGS	070100SL		40.0016		21983834.			21983834.	6287296.		984,607.
355	BUILDINGS	080201SL		40.0016		50,120.			50,120.	12,962.		1,518.
356	BUILDINGS	080301SL		40.0016		4,643.			4,643.	1,200.		141.
357	BUILDINGS	090401SL		40.0016		5,898.			5,898.	1,511.		179.
358	BUILDINGS	090401SL		40.0016		11,138.			11,138.	2,855.		337.
359	BUILDINGS	090401SL		40.0016		2,544.			2,544.	652.		77.
360	BUILDINGS	090401SL		40.0016		44,643.			44,643.	11,441.		1,352.
361	BUILDINGS	090401SL		40.0016		2,879.			2,879.	738.		87.
362	BUILDINGS	090401SL		40.0016		18,107.			18,107.	4,641.		548.
363	BUILDINGS	090401SL		40.0016		736.			736.	189.		22.
364	BUILDINGS	090401SL		40.0016		23,437.			23,437.	6,006.		710.
365	BUILDINGS	090401SL		40.0016		3,938.			3,938.	1,009.		119.
366	BUILDINGS	090401SL		40.0016		4,230.			4,230.	1,084.		128.
367	BUILDINGS	090401SL		40.0016		16,947.			16,947.	4,343.		513.
368	BUILDINGS	101801SL		40.0016		12,142.			12,142.	3,083.		368.
369	BUILDINGS	101801SL		40.0016		10,596.			10,596.	2,691.		321.
370	BUILDINGS	101801SL		40.0016		10,436.			10,436.	2,650.		316.
371	BUILDINGS	101801SL		40.0016		7,072.			7,072.	1,796.		214.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
372	BUILDINGS	101801	SL	40.00	16	8,765.			8,765.	2,226.		265.
373	BUILDINGS	101901	SL	40.00	16	162,869.			162,869.	41,363.		4,931.
374	BUILDINGS	113001	SL	40.00	16	70,000.			70,000.	17,615.		2,119.
375	BUILDINGS	010402	SL	40.00	16	50,000.			50,000.	12,350.		1,513.
376	BUILDINGS	013002	SL	40.00	16	4,092.			4,092.	1,011.		124.
377	BUILDINGS	020102	SL	40.00	16	35,000.			35,000.	8,563.		1,059.
378	BUILDINGS	111601	SL	40.00	16	7,323.			7,323.	1,842.		222.
379	BUILDINGS	112601	SL	40.00	16	5,860.			5,860.	1,475.		177.
380	BUILDINGS	070101	SL	40.00	16	12,000.			12,000.	3,131.		364.
381	BUILDINGS	090402	SL	40.00	16	97,034.			97,034.	22,165.		2,931.
382	BUILDINGS	111802	SL	40.00	16	9,525.			9,525.	2,131.		288.
383	BUILDINGS	063004	SL	40.00	16	5756732.			5756732.	1034279.		173,202.
384	BUILDINGS	063004	SL	40.00	16	22,320.			22,320.	4,010.		672.
385	BUILDINGS	063004	SL	40.00	16	72,101.			72,101.	12,954.		2,169.
386	BUILDINGS	063004	SL	40.00	16	69,301.			69,301.	12,451.		2,085.
387	BUILDINGS	063004	SL	40.00	16	503,525.			503,525.	90,465.		15,150.
388	BUILDINGS	090104	SL	40.00	16	1073151.			1073151.	185,331.		32,271.
389	BUILDINGS	090104	SL	40.00	16	9,091.			9,091.	1,570.		273.

828102
04-25-08

(D) - Asset disposed

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

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
390	BUILDINGS	090104SL		40.0016		15,540.			15,540.	2,684.		467.
393	BUILDING IMPROVEMENTS	120103SL		40.0016		45,720.			45,720.	37,560.		4,080.
394	BUILDING IMPROVEMENTS	091406SL		40.0016		12,818.			12,818.	2,296.		1,282.
395	BUILDING IMPROVEMENTS	032107SL		40.0016		15,290.			15,290.	1,453.		1,511.
399	EQUIPMENT ADMINISTRATIVE	063001SL		10.0016		71,764.			71,764.	71,764.		0.
400	AUTOMOBILE	063087SL		10.0016		15,000.			15,000.	15,000.		0.
401	AUTOMOBILE	063092SL		10.0016		39,976.			39,976.	39,976.		0.
403	AUTOMOBILE	063093SL		10.0016		14,560.			14,560.	14,560.		0.
404	AUTOMOBILE	063096SL		10.0016		24,728.			24,728.	24,728.		0.
405	AUTOMOBILE	063096SL		10.0016		18,800.			18,800.	18,800.		0.
406	AUTOMOBILE	063096SL		10.0016		7,000.			7,000.	7,000.		0.
407	AUTOMOBILE	063096SL		10.0016		8,325.			8,325.	8,325.		0.
408	AUTOMOBILE	063097SL		10.0016		52,513.			52,513.	52,513.		0.
409	AUTOMOBILE	063097SL		10.0016		52,513.			52,513.	52,512.		0.
410	AUTOMOBILE	063097SL		10.0016		56,500.			56,500.	56,500.		0.
412	AUTOMOBILE	063099SL		10.0016		32,850.			32,850.	32,850.		0.
413	AUTOMOBILE	063099SL		10.0016		32,850.			32,850.	32,850.		0.
414	AUTOMOBILE	063099SL		10.0016		32,850.			32,850.	32,850.		0.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
415	AUTOMOBILE	063099SL		10.0016		32,850.			32,850.	32,850.		0.
416	AUTOMOBILE	063099SL		10.0016		34,000.			34,000.	34,000.		0.
417	AUTOMOBILE	063099SL		10.0016		34,000.			34,000.	34,000.		0.
418	AUTOMOBILE	063099SL		10.0016		56,500.			56,500.	50,850.		5,650.
419	AUTOMOBILE	063002SL		10.0016		1,125.			1,125.	1,125.		0.
420	AUTOMOBILE	043005SL		5.0016		33,387.			33,387.	21,702.		6,677.
421	AUTOMOBILE	043005SL		5.0016		33,387.			33,387.	21,702.		6,677.
422	AUTOMOBILE	010406SL		10.0016		71,721.			71,721.	17,930.		7,172.
450	EDUCATIONAL EQUIPMENT	063088SL		10.0016		832.			832.	832.		0.
456	EDUCATIONAL EQUIPMENT	063090SL		10.0016		740.			740.	740.		0.
458	EDUCATIONAL EQUIPMENT	063090SL		10.0016		2,110.			2,110.	2,110.		0.
459	EDUCATIONAL EQUIPMENT	063090SL		10.0016		1,660.			1,660.	1,660.		0.
460	EDUCATIONAL EQUIPMENT	063090SL		10.0016		3,374.			3,374.	3,374.		0.
461	EDUCATIONAL EQUIPMENT	063090SL		10.0016		2,979.			2,979.	2,979.		0.
462	EDUCATIONAL EQUIPMENT	063091SL		10.0016		1,819.			1,819.	1,819.		0.
474	EDUCATIONAL EQUIPMENT	063094SL		10.0016		26,434.			26,434.	26,434.		0.
475	EDUCATIONAL EQUIPMENT	063096SL		10.0016		8,787.			8,787.	8,787.		0.
477	EDUCATIONAL EQUIPMENT	063097SL		10.0016		43,600.			43,600.	43,600.		0.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
478	EDUCATIONAL EQUIPMENT	063097SL		10.00	16	64,538.			64,538.	64,538.		0.
479	EDUCATIONAL EQUIPMENT	063097SL		10.00	16	4,800.			4,800.	4,800.		0.
480	EDUCATIONAL EQUIPMENT	063098SL		10.00	16	25,274.			25,274.	25,274.		0.
481	EDUCATIONAL EQUIPMENT	063098SL		10.00	16	3,307.			3,307.	3,307.		0.
482	EDUCATIONAL EQUIPMENT	063098SL		10.00	16	4,949.			4,949.	4,949.		0.
484	EDUCATIONAL EQUIPMENT	063001SL		10.00	16	1,399.			1,399.	1,399.		0.
485	EDUCATIONAL EQUIPMENT	063001SL		10.00	16	12,600.			12,600.	12,600.		0.
486	EDUCATIONAL EQUIPMENT	063001SL		10.00	16	3,715.			3,715.	3,715.		0.
487	EDUCATIONAL EQUIPMENT	063001SL		10.00	16	14,303.			14,303.	14,303.		0.
488	EDUCATIONAL EQUIPMENT	063001SL		10.00	16	41,000.			41,000.	41,000.		0.
490	EDUCATIONAL EQUIPMENT	063002SL		10.00	16	6,523.			6,523.	6,523.		0.
491	EDUCATIONAL EQUIPMENT	063002SL		10.00	16	3,850.			3,850.	3,850.		0.
492	EDUCATIONAL EQUIPMENT	063002SL		10.00	16	4,093.			4,093.	4,093.		0.
493	EDUCATIONAL EQUIPMENT	063002SL		10.00	16	3,859.			3,859.	3,859.		0.
494	EDUCATIONAL EQUIPMENT	063002SL		10.00	16	2,694.			2,694.	2,694.		0.
498	EDUCATIONAL EQUIPMENT	063003SL		10.00	16	58,567.			58,567.	58,567.		0.
499	EDUCATIONAL EQUIPMENT	063003SL		10.00	16	3,102.			3,102.	3,102.		0.
501	EDUCATIONAL EQUIPMENT	123103SL		3.00	16	17,000.			17,000.	17,000.		0.

828102
04-25-08

(D) - Asset disposed

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

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
502	EDUCATIONAL EQUIPMENT	043006SL		3.00	16	7,600.			7,600.	5,911.		1,689.
503	FARM EQUIPMENT	053178SL		10.00	16	1,500.			1,500.	1,500.		0.
504	FARM EQUIPMENT	063099SL		10.00	16	35,000.			35,000.	35,000.		0.
505	FARM EQUIPMENT	053104SL		3.00	16	9,880.			9,880.	9,880.		0.
506	FARM EQUIPMENT	063004SL		3.00	16	12,300.			12,300.	12,300.		0.
511	OPERATION EQUIPMENT	063090SL		10.00	16	1,348.			1,348.	1,348.		0.
513	OPERATION EQUIPMENT	063094SL		10.00	16	5,100.			5,100.	5,100.		0.
514	OPERATION EQUIPMENT	103104SL		3.00	16	6,295.			6,295.	6,295.		0.
515	OPERATION EQUIPMENT	063005SL		3.00	16	9,620.			9,620.	9,620.		0.
516	BUILDINGS	063079SL		40.00	16	59,926.			59,926.	59,926.		0.
517	BUILDINGS	063079SL		40.00	16	60,598.			60,598.	60,598.		0.
518	BUILDINGS	063080SL		40.00	16	83,262.			83,262.	83,262.		0.
519	BUILDINGS	063080SL		40.00	16	63,408.			63,408.	63,408.		0.
520	BUILDINGS	063080SL		40.00	16	61,339.			61,339.	61,339.		0.
521	BUILDINGS	063080SL		40.00	16	61,114.			61,114.	61,114.		0.
522	BUILDINGS	063080SL		40.00	16	61,821.			61,821.	61,821.		0.
523	BUILDINGS	063080SL		40.00	16	66,181.			66,181.	66,181.		0.
524	BUILDINGS	063072SL		40.00	16	80,000.			80,000.	80,000.		0.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
525	BUILDINGS	062000	SL	45.00	16	345,626.			345,626.	69,220.		7,487.
526	BUILDINGS	063000	SL	45.00	16	357,443.			357,443.	71,487.		7,746.
527	BUILDINGS	063000	SL	45.00	16	366,487.			366,487.	73,297.		7,942.
528	BUILDINGS	063097	SL	45.00	16	272,660.			272,660.	69,680.		5,984.
529	BUILDINGS	063082	SL	40.00	16	189,322.			189,322.	189,322.		0.
530	BUILDINGS	063076	SL	40.00	16	90,053.			90,053.	75,746.		1,807.
531	BUILDINGS	063071	SL	45.00	16	162,761.			162,761.	162,761.		0.
532	BUILDINGS	063079	SL	45.00	16	8858363.			8858363.	2871867.		373,823.
533	BUILDINGS	063093	SL	45.00	16	1997823.			1997823.	604,239.		46,582.
534	BUILDINGS	063094	SL	45.00	16	797,676.			797,676.	301,261.		16,056.
535	BUILDINGS	063073	SL	45.00	16	34,366.			34,366.	27,106.		732.
536	BUILDINGS	063097	SL	40.00	16	2527980.			2527980.	718,825.		62,564.
537	BUILDINGS	063097	SL	45.00	16	3514808.			3514808.	896,381.		77,202.
538	BUILDINGS	063098	SL	45.00	16	2604916.			2604916.	582,960.		57,905.
539	BUILDINGS	063097	SL	45.00	16	755,446.			755,446.	193,059.		16,581.
540	BUILDINGS	063098	SL	45.00	16	33,677.			33,677.	8,231.		729.
541	BUILDINGS	063099	SL	20.00	16	16,991.			16,991.	8,497.		778.
542	BUILDING IMPROVEMENTS	053185	SL	40.00	16	46,367.			46,367.	46,367.		0.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
559	BUILDING IMPROVEMENTS	063095SL		40.0016		8,825.			8,825.	8,825.		0.
560	BUILDING IMPROVEMENTS	063095SL		40.0016		25,038.			25,038.	25,038.		0.
561	BUILDING IMPROVEMENTS	063095SL		40.0016		5,700.			5,700.	5,700.		0.
563	BUILDING IMPROVEMENTS	063096SL		40.0016		5,568.			5,568.	5,568.		0.
567	BUILDING IMPROVEMENTS	063097SL		40.0016		8,051.			8,051.	8,051.		0.
575	BUILDING IMPROVEMENTS	063098SL		40.0016		1,290.			1,290.	1,290.		0.
576	BUILDING IMPROVEMENTS	063098SL		40.0016		4,427.			4,427.	4,427.		0.
578	BUILDING IMPROVEMENTS	063098SL		10.0016		63,480.			63,480.	63,480.		0.
580	BUILDING IMPROVEMENTS	063000SL		40.0016		3,675.			3,675.	3,675.		0.
581	BUILDING IMPROVEMENTS	063000SL		40.0016		2,875.			2,875.	2,875.		0.
582	BUILDING IMPROVEMENTS	063000SL		40.0016		19,342.			19,342.	19,342.		0.
583	BUILDING IMPROVEMENTS	063000SL		40.0016		20,533.			20,533.	20,533.		0.
584	BUILDING IMPROVEMENTS	063000SL		40.0016		19,835.			19,835.	19,835.		0.
585	BUILDING IMPROVEMENTS	063000SL		40.0016		18,320.			18,320.	18,320.		0.
586	BUILDING IMPROVEMENTS	063000SL		40.0016		20,172.			20,172.	20,172.		0.
591	FURNISHINGS	093099SL		10.0016		2,188.			2,188.	2,188.		0.
598	FURNISHINGS	063099SL		10.0016		1,830.			1,830.	1,830.		0.
599	FURNISHINGS	063099SL		10.0016		98,892.			98,892.	98,892.		0.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
601	FURNISHINGS	063099SL		10.0016		322,718.			322,718.	322,718.		0.
602	FURNISHINGS	063099SL		10.0016		11,351.			11,351.	11,351.		0.
603	FURNISHINGS	063099SL		10.0016		5,325.			5,325.	5,325.		0.
604	FURNISHINGS	063099SL		10.0016		4,717.			4,717.	4,717.		0.
605	FURNISHINGS	063099SL		10.0016		1,729.			1,729.	1,729.		0.
606	FURNISHINGS	063099SL		10.0016		11,530.			11,530.	11,530.		0.
607	FURNISHINGS	063099SL		10.0016		44,390.			44,390.	44,390.		0.
608	FURNISHINGS	063099SL		10.0016		2,212.			2,212.	2,212.		0.
609	FURNISHINGS	063099SL		10.0016		46,242.			46,242.	46,242.		0.
610	FURNISHINGS	063099SL		10.0016		9,750.			9,750.	9,750.		0.
611	FURNISHINGS	063099SL		10.0016		5,654.			5,654.	5,654.		0.
612	FURNISHINGS	063099SL		10.0016		8,131.			8,131.	8,131.		0.
613	FURNISHINGS	063099SL		10.0016		5,680.			5,680.	5,680.		0.
614	FURNISHINGS	063099SL		10.0016		7,509.			7,509.	7,509.		0.
615	FURNISHINGS	063099SL		10.0016		22,633.			22,633.	22,633.		0.
616	FURNISHINGS	063099SL		10.0016		372,007.			372,007.	372,007.		0.
618	FURNISHINGS	063099SL		10.0016		13,015.			13,015.	13,015.		0.
619	FURNISHINGS	063099SL		10.0016		4,063.			4,063.	4,063.		0.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
620	FURNISHINGS	063099SL		10.0016		251,903.			251,903.	251,903.		0.
621	FURNISHINGS	063099		10.0016		10,600.			10,600.	10,600.		0.
622	FURNISHINGS	063002		10.0016		24,525.			24,525.	24,525.		0.
623	LAND IMPROVEMENTS	063078		20.0016		8,272.			8,272.	8,272.		0.
626	LAND IMPROVEMENTS	063099		20.0016		7,683.			7,683.	7,683.		0.
627	LAND IMPROVEMENTS	063080		20.0016		78,142.			78,142.	78,142.		0.
629	LAND IMPROVEMENTS	063099		20.0016		30,734.			30,734.	30,734.		0.
630	LAND IMPROVEMENTS	063097SL		10.0016		215,610.			215,610.	215,610.		0.
631	LAND IMPROVEMENTS	063072SL		20.0016		1,698.			1,698.	1,698.		0.
632	LAND IMPROVEMENTS	022873SL		20.0016		864.			864.	864.		0.
633	LAND IMPROVEMENTS	043073SL		20.0016		370.			370.	370.		0.
634	LAND IMPROVEMENTS	073173SL		20.0016		189.			189.	189.		0.
635	LAND IMPROVEMENTS	073173SL		20.0016		725.			725.	725.		0.
636	LAND IMPROVEMENTS	103184SL		20.0016		651.			651.	651.		0.
637	LAND IMPROVEMENTS	063090SL		20.0016		13,349.			13,349.	12,682.		348.
638	LAND IMPROVEMENTS	063090SL		20.0016		4,340.			4,340.	4,340.		0.
639	LAND IMPROVEMENTS	063093SL		20.0016		9,760.			9,760.	9,760.		0.
640	LAND IMPROVEMENTS	063089SL		20.0016		32,140.			32,140.	32,140.		0.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
641	LAND IMPROVEMENTS	063090SL		20.0016		6,925.			6,925.	6,694.		231.
642	LAND IMPROVEMENTS	063090SL		20.0016		1,980.			1,980.	1,914.		66.
644	LAND IMPROVEMENTS	063090SL		20.0016		10,368.			10,368.	10,368.		0.
647	LAND IMPROVEMENTS	063091SL		20.0016		11,024.			11,024.	11,024.		0.
652	LAND IMPROVEMENTS	063093SL		20.0016		1002207.			1002207.	800,063.		41,114.
653	LAND IMPROVEMENTS	063093SL		20.0016		30,000.			30,000.	30,000.		0.
654	LAND IMPROVEMENTS	093094SL		20.0016		4,625.			4,625.	4,625.		0.
656	LAND IMPROVEMENTS	063097SL		10.0016		192,000.			192,000.	192,000.		0.
657	LAND IMPROVEMENTS	063097SL		20.0016		1111359.			1111359.	639,032.		52,971.
658	LAND IMPROVEMENTS	063097SL		20.0016		31,085.			31,085.	17,097.		1,569.
659	LAND IMPROVEMENTS	063098SL		20.0016		36,638.			36,638.	19,235.		1,755.
660	LAND IMPROVEMENTS	063098SL		20.0016		45,100.			45,100.	22,550.		2,274.
661	LAND IMPROVEMENTS	063098SL		20.0016		188,502.			188,502.	94,251.		9,504.
662	LAND IMPROVEMENTS	063098SL		40.0016		678,505.			678,505.	169,626.		17,010.
663	LAND IMPROVEMENTS	063099SL		10.0016		34,245.			34,245.	34,245.		0.
664	LAND IMPROVEMENTS	063099SL		10.0016		39,202.			39,202.	39,202.		0.
665	LAND IMPROVEMENTS	063099SL		10.0016		4,300.			4,300.	4,300.		0.
666	LAND IMPROVEMENTS	063099SL		40.0016		779,000.			779,000.	194,750.		18,898.

828102
04-25-08

(D) - Asset disposed

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

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
667	LAND IMPROVEMENTS	063099SL		20.0016		109,482.			109,482.	54,741.		5,014.
668	LAND IMPROVEMENTS	063000SL		10.0016		48,040.			48,040.	43,236.		2,506.
669	LAND IMPROVEMENTS	063080SL		20.0016		127,535.			127,535.	127,535.		0.
671	LAND IMPROVEMENTS	063094SL		20.0016		4,050.			4,050.	4,050.		0.
672	LAND IMPROVEMENTS	063094SL		20.0016		3,600.			3,600.	3,600.		0.
673	LAND IMPROVEMENTS	063097SL		10.0016		77,160.			77,160.	77,160.		0.
674	LAND IMPROVEMENTS	063098SL		10.0016		5,480.			5,480.	5,480.		0.
675	LAND IMPROVEMENTS	063000SL		10.0016		46,082.			46,082.	41,474.		2,404.
676	LAND IMPROVEMENTS	063001SL		20.0016		1,034.			1,034.	1,034.		0.
677	LAND IMPROVEMENTS	033179SL		40.0016		19,600.			19,600.	14,210.		505.
679	LAND IMPROVEMENTS	033081SL		40.0016		18,500.			18,500.	12,487.		457.
680	LAND IMPROVEMENTS	103181SL		40.0016		74,000.			74,000.	49,950.		1,815.
681	LAND IMPROVEMENTS	123181SL		40.0016		9,250.			9,250.	6,244.		224.
682	LAND IMPROVEMENTS	033182SL		40.0016		20,825.			20,825.	13,537.		533.
683	LAND IMPROVEMENTS	043082SL		40.0016		93,000.			93,000.	60,450.		2,367.
684	LAND IMPROVEMENTS	063085SL		20.0016		4,418.			4,418.	4,418.		0.
685	LAND IMPROVEMENTS	093087SL		20.0016		18,235.			18,235.	18,235.		0.
686	LAND IMPROVEMENTS	063088SL		19.0016		34,646.			34,646.	34,646.		0.

838102
04-25-08

(D) - Asset disposed

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

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
687	LAND	0101173L				165,973.			165,973.			0.
689	CAPITALIZED INTEREST			.000	16							0.
691	ON RAINBOW		SL	.000	16	1669457.			1669457.	423,435.		57,177.
692	CAPITALIZED INTEREST		SL	.000	16	650,068.			650,068.	195,030.		21,671.
696	ON COLORADO											
696	BUILDING IMPROVEMENTS	040108SL		40.00	16	6,625.			6,625.	166.		662.
698	EQUIPMENT	071507SL		10.00	16	79,877.			79,877.	15,976.		15,975.
699	EQUIPMENT	043008SL		10.00	16	5,500.			5,500.	328.		1,412.
700	EQUIPMENT	060108SL		10.00	16	72,945.			72,945.	2,026.		18,236.
713	FOUNDATION ASSETS			.000	16	133,749.			133,749.	124,567.		2,210.
714	ADMINISTRATIVE	070107SL		10.00	16	45,862.			45,862.	4,586.		4,586.
715	ADMINISTRATIVE	120107SL		10.00	16	46,873.			46,873.	3,906.		6,696.
716	EQUIPMENT											
716	AUTOMOBILE	030108SL		10.00	16	43,450.			43,450.	1,448.		4,345.
717	ADMINISTRATIVE	060108SL		10.00	16	10,298.			10,298.	171.		2,060.
718	EQUIPMENT											
718	BUILDING IMPROVEMENTS	070208SL		40.00	16	23,454.			23,454.			1,564.
719	BUILDING IMPROVEMENTS		SL	40.00	16	151,750.			151,750.			0.
720	LAND IMPROVEMENTS		SL	20.00	16	23,148.			23,148.			0.
721	EQUIPMENT		SL	10.00	16	12,452.			12,452.			623.
722	CONSTRUCTION IN PROCESS		NC	.000		17,291.			17,291.			0.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
724	CO LAND	090108L				33,058.			33,058.			0.
725	CO LAND IMPROVEMENTS	050109SL		8.00	16	13,750.			13,750.			286.
727	EQUIPMENT	090108SL		5.00	16	23,900.			23,900.			3,983.
728	EQUIPMENT	090108SL		3.00	16	28,000.			28,000.			7,778.
729	EQUIPMENT	020109SL		5.00	16	27,721.			27,721.			2,310.
730	EQUIPMENT	020109SL		3.00	16	9,677.			9,677.			1,344.
731	CO LAND	040309L				300,203.			300,203.			0.
732	EQUIPMENT	091906SL		5.00	16	10,775.			10,775.	3,951.		2,155.
733	EQUIPMENT	122606SL		10.00	16	40,950.			40,950.	6,142.		4,136.
734	BUILDING IMPROVEMENTS	061507SL		25.00	16	71,300.			71,300.	3,090.		2,852.
735	EQUIPMENT	061107SL		10.00	16	78,946.			78,946.	8,552.		7,895.
736	EQUIPMENT	062907SL		3.00	16	33,810.			33,810.	12,209.		11,270.
737	EDUCATIONAL EQUIPMENT	060707SL		25.00	16	18,237.			18,237.	791.		729.
738	EDUCATIONAL EQUIPMENT	063007SL		25.00	16	18,794.			18,794.	814.		752.
	* 990 PAGE 10 TOTAL					72000850.		0.	72000850.	25209419.	0.	2409398.
	PROGRAM SERVICES											
	* GRAND TOTAL 990 PAGE 10 DEPR					72000850.		0.	72000850.	25209419.	0.	2409398.

828102
04-25-08

(D) - Asset disposed

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

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

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.***Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization ALEXANDER DAWSON FOUNDATION	Employer identification number 22-6044616
	Number, street, and room or suite no. If a P.O. box, see instructions 4045 SOUTH SPENCER ST., NO. 312	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions LAS VEGAS, NV 89119	

Check type of return to be filed (file a separate application for each return).

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

ALEXANDER DAWSON FOUNDATION

- The books are in the care of ►
- 4045 S. SPENCER ST., STE 312, - LAS VEGAS, NV 89119**

Telephone No ► **702-733-7880**

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

► ☐ calendar year _____ or► ☒ tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**.

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any <i>nonrefundable credits</i> . See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II		Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)	
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization ALEXANDER DAWSON FOUNDATION		Employer identification number 22-6044616
	Number, street, and room or suite no. If a P.O. box, see instructions. 4045 SOUTH SPENCER ST., NO. 312		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LAS VEGAS, NV 89119		

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

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

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

ALEXANDER DAWSON FOUNDATION

- The books are in the care of **4045 S. SPENCER ST., STE 312, - LAS VEGAS, NV 89119**
 Telephone No **702-733-7880** FAX No
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for


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

MORE TIME IS NEEDED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$ N/A

Signature and Verification

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

Signature  Title **TAX PREPARER** Date **2-1-10**

Form 8868 (Rev. 4-2009)