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Form **990**

SCANNED MAR 1 0 2010,

Department of the Treasury Internal Revenue Gervice

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)

benefit trust or private foundation)

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

2008
Open to Public

<u>A</u>	For the	2008 calendar year, or tax year beginning $JUL 1$, 2008 and ending	<u>g JUN 30,</u>	<u>2009</u>	
В	Check if applicable	Please C Name of organization	D Employ	er identific	cation number
Г	Address	s label or CDOCDY CCHOTADC COMMINITARY DADWINDCHID			
	Name change	type		31-1	523230
L	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/	suite E Telepho	one number	•
	Termin- ation	Instruc- Z/OI UNIVERSIII PARKWAI		<u> 336-</u> '	<u>725-5371 </u>
	Amende return	City or town, state or country, and ZIP + 4	G Gross rec	eipts \$	1,023,256.
_	Application	WINSTON-SALEM, NC 27105	H(a) is this	s a group re	
	pending	F Name and address of principal officer.MONA LOVETT	for af	filiates?	Yes X No
		SAME AS C ABOVE	H(b) Are all	l affiliates incl	luded? Yes No
1	Tax-exe	mpt status. X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No	," attach a	list. (see instructions)
		e: ► WWW.CROSBYSCHOLARS.ORG			n number 🕨
		organization: X Corporation	Year of formation:	1997 M	State of legal domicile: NC
		Briefly describe the organization's mission or most significant activities PREPARE	DIIRI.TC C	CHOOT.	CTIDENTS
Activities & Governance		IN FORSYTH COUNTY FOR SUCCESSFUL COLLEGE EN		CHOOL	DIODERID
nai		Check this box if the organization discontinued its operations or disposed of		of ite accets	· · · · · · · · · · · · · · · · · · ·
Ver		Number of voting members of the governing body (Part VI, line 1a)	more than 2070 v	3	20
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)		4	20
<u>م</u>		Total number of employees (Part V, line 2a)		5	9
itie		Fotal number of volunteers (estimate if necessary)	-	6	200
ઃફ્રે		otal number of volunteers (estimate in necessary) Total gross unrelated business revenue from Part VIII, line 12, culturin (C)	•	7a	0.
Ă		Net unrelated business taxable income from Form 990 F, Fine 34	•	7b	0.
		O O	Prior Ye		Current Year
•	8 0	Contributions and grants (Part VIII, line 1h) FEB 1 7 ZUID		440.	880,424.
Ž	9 P	Program service revenue (Part VIII, line 2g)		.,	00072020
Revenue	10 lr	nvestment income (Part VIII, column (A), lines-3, 4, and 7d)	<u></u>	791.	9,176.
æ	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 80 93, De, and He		,457.	101,138.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,688.	990,738.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		,009.	238,845.
	ı	Benefits paid to or for members (Part IX, column (A), line 4)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Ø		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	240	,525.	297,533.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		2,528.	
ē	ьт	Total fundraising expenses (Part IX, column (D), line 25) > 52,407.			
ũ	17 0	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	131	,884.	134,309.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		,946.	670,687.
		Revenue less expenses. Subtract line 18 from line 12		742.	320,051.
56	3		Beginning		End of Year
Net Assets or	20 T	Total assets (Part X, line 16)	759		1,022,473.
SE SE	21 T	Total liabilities (Part X, line 26)	1	,114.	1,954.
Se l	22 N	Net assets or fund balances Subtract line 21 from line 20	758	3,205.	1,020,519.
P	art II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stater and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any know	nents, and to the best	of my knowledg	e and belief, it is true, correct,
		1111	_	.	_
Sig	ın			<u> 2-10-1,</u>	<u>ル</u>
He	re	Signature of officer	Da	te	
		JEFF CLARK, TREASURER			
		Type or print name and title	Charles		
Pai		Preparer's Signature Pottu Date 2/8/10	Check if	Prepare	r's identifying number tructions)
_	00505'0	77070111	employed \		
	Only	yours if O BOILER & BORRE, L.L.P.	EIN	<u> </u>	
	·	self-employed), address, and			2261862 624
		ZIP+4 WINSTON-SALEM, NC 27104	Phor	е по. ▶ (:	336)768-2310
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions) .			X Yes No

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

Form 990 (2008)

	990 (2008) CROSBY SCHOLARS COMMUNITY PARTNERSHIP 31-1523230 Page 2
Pai	rt III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission THE CROSBY SCHOLARS PROGRAM ASSISTS PUBLIC MIDDLE AND HIGH SCHOOL STUDENTS IN FORSYTH COUNTY BY PREPARING THEM FOR SUCCESSFUL COLLEGE ENROLLMENT.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes", describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes", describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	SEE SCHEDULE O FOR CONTINUATION(S)
4a	(Code:) (Expenses \$ 443,116. including grants of \$) (Revenue \$)
	THE CROSBY SCHOLARS PROGRAM PROVIDES LAST DOLLAR GRANT ASSISTANCE TO
	GRADUATING SENIORS AND COLLEGE CROSBY SCHOLARS WHO SUCCESSFULLY
	COMPLETE THE PROGRAM. GRANTS ARE AWARDED FOR UP TO \$1200 FOR UP TO
	FOUR YEARS OF COLLEGE TO STUDENTS WHO SUCCESSFULLY COMPLETE THE PROGRAM
	AS HIGH SCHOOL SENIORS, ACHIEVE A 2.0 CUMULATIVE GPA/QPA AND
	DEMONSTRATE FINANCIAL NEED AS DETERMINED BY RESULTS FROM THE FAFSA AND
	THE PROGRAM'S NEED ANALYSIS FORMULA. CROSBY SCHOLARS WHO ARE AWARDED A
	LAST DOLLAR GRANT ARE THOSE STUDENTS WHO HAVE BEEN OFFERED ADMISSION TO
	A PROGRAM OF STUDY, THEY HAVE COMPLETED THE FAFSA, THEY HAVE RECEIVED
	AN AWARD LETTER FROM THE COLLEGE THEY PLAN TO ATTEND AND THEY HAVE
	APPLIED FOR A LAST DOLLAR GRANT. THE STUDENTS WHO MEET THESE CRITERIA
	RECEIVE THE LAST DOLLAR GRANT BECAUSE THEY HAVE NOT RECEIVED ENOUGH
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code.) (Expenses \$ including grants of \$) (Revenue \$)
	<u> </u>
4d	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ \$ 443,116. (Must equal Part IX, Line 25, column (B).)

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	_X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	_X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	_X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a		<u>X</u> _
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			v
45	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
10	located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
	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? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		_X_
þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990 a	2008)

Form 990 (2008) CROSBY SCHOLARS CO
Part IV Checklist of Required Schedules (continued)

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

Form **990** (2008)

	990 (2008) CROSBY SCHOLARS COMMUNITY PARTNERSHIP 31-152	3230	Р	age 3
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance		1	Т
-			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	의		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>0</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			l
	(gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	<u>9</u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)]
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:	.		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b_		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	ļ	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?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
10	Section 501(c)(7) organizations. Enter: N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter N/A			
а	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b

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

Sec	tion A. Governing Body and Management			
			Yes	<u>No</u>
	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			
b	Enter the number of voting members that are independent 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	_2_		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u> </u>
6	Does the organization have members or stockholders?	6_		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	ŀ		
	governing body?	7a_		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a	L	<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13_		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision.			
а	The organization's CEO, Executive Director, or top management official?	15a	X	
	Other officers or key employees of the organization?	15b		Х
~	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
_	taxable entity during the year?	16a		X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
_	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion 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 X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial	
13	statements available to the public	11110	, ,	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion.	•	
20	MONA LOVETT - 336-725-5371			
	2701 UNIVERSITY PARKWAY, WINSTON-SALEM, NC 27105		-	
22200				

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position (check all the					.1. A	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ROBERT CLARK				Ì						
CHAIRMAN	1.00	X		X			<u> </u>	0.	0.	0.
ROBERT SANDERS		1	İ				ļ			
VICE CHAIRMAN	1.00	X	L	X				0.	0.	0.
JEFF CLARK										
TREASURER	1.00	X		X		ļ	<u> </u>	0.	0.	0.
DEBORAH BEST										
SECRETARY	1.00	X		X			<u>L</u>	0.	0.	0.
DONALD MARTIN										
DIRECTOR	1.00	X		<u> </u>		ļ.,.		0.	0.	0,
DAVID CASSELS								_	_	_
DIRECTOR	1.00	X	┞	<u> </u>	<u> </u>			0.	0.	0.
KAY DILLON										
DIRECTOR	1.00	X	₩	<u> </u>	 	-	ļ	0.	0.	0.
BARRY BOYD										
DIRECTOR	1.00	X	├-	-	├	-		0.	0.	0.
MARTY EDWARDS	1 00				ļ					
DIRECTOR	1.00	X	-		\vdash	-	-	0.	0.	0.
AMY EGLESTON	1 00	37						0.	0.	_
DIRECTOR	1.00	A	+	\vdash		╁	-	· · · · · · · · · · · · · · · · · · ·	0.	0.
MICHAEL FLATOW	1.00	٦,	İ					0.	0.	0.
DIRECTOR STEVE STRAWSBURG	1.00	^	\vdash	1	<u> </u>	╁	\vdash	<u> </u>	<u> </u>	0.
DIRECTOR	1.00	v					1	0.	0.	0.
ANN MCELANEY-JOHNSON	1.00	^	t	+	+-	╁	\vdash	- · · · · · · · ·	<u> </u>	
DIRECTOR	1.00	Y		i				0.	0.	0.
KAREN MCNEIL-MILLER	1.00	 ^	\vdash			\vdash	\vdash			
DIRECTOR	1.00	$ _{\mathbf{x}}$						0.	0.	0.
MICHAEL ROGERS	1.00	1	T	T	T	t	T	† ` `		
DIRECTOR	1.00	X						0.	0.	0
KIMBERLY STOGNER		Ţ <u>-</u>	Τ							
DIRECTOR	1.00	$ \mathbf{x} $						0.	0.	0.
MELODY PIERCE		Γ	Ī	Γ						
DIRECTOR	1.00	\mathbf{x}			L			0.	0.	0.

			_					ARTNERSHIP Compensated Employ	31-15 ees (continued)	<u> 23</u>	<u>430</u>	P	age 8
(A) Name and title	(B) Average hours			(Pos	C) sition			(D) Reportable compensation	(E) Reportable compensation		(F) Estimat amount other		of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	C)	fr org an	other pensa rom th panizat d relat anizat	ation ie tion ted
CHRIS FOX DIRECTOR	1.00	x						0.		٥.			0.
ANDREA FALDEN DIRECTOR	1.00							0.		0.			0.
JEWEL CHERRY DIRECTOR	1.00	х						0.		0.			0.
MONA LOVETT EXECUTIVE DIRECTOR	40.00			x		-		71,001.		0.	1	<u>1,6</u>	<u>52.</u>
			<u> </u>		<u> </u>								
								_					
1b Total								71,001.		0.	1	1 6	52.
2 Total number of individuals (including the	ose in 1a) who re	ceiv	ed r	nore	e tha	an \$1	00,		···	<u>U • 1</u>		<u> </u>	0
compensation from the organization	·				•			<u>-</u>		<u> </u>		Yes	No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, ke	y er	nplo	oyee,	or I	nighest compensated er	nployee on		3		x
4 For any individual listed on line 1a, is the and related organizations greater than \$	•							*	the organization		4		_x_
5 Did any person listed on line 1a receive of the organization? If "Yes," complete Sch				fron	n an	y uni	relat	ted organization for serv	ices rendered to		5		_x_
Section B. Independent Contractors					oont	troot	200	that recoved more than	\$100,000 of com	2000	ation:	from	
the organization. NONE		uep 	<u></u>	ent (CON		יפונ			Je115			
	(A) Name and business address						(B) Description of s	ervices	С	ompe	C) ensatio	วท	
	 												

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

from the organization

31-1523230 CROSBY SCHOLARS COMMUNITY PARTNERSHIP Form 990 (2008) Page 9 Part VIII Statement of Revenue (D) Revenue excluded from (C) (A) (B) Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue 56,759. 1 a Federated campaigns **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and other simil 100,000. e Government grants (contributions) f All other contributions, gifts, grants, and 723,665. similar amounts not included above g Noncash contributions included in lines 1a-1f \$_ 880,424 h Total. Add lines 1a-1f Business Code Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 9,176. 9,176. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) ▶ 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See 128450 Part IV, line 18 32,518 b Less direct expenses 95,932. 95,932 c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b 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 900099 5,206. 5,206. 11 a SALES TAX REFUND d All other revenue 5,206. e Total. Add lines 11a-11d 990,738. 101,138. 0. 9,176. Total Revenue. Add lines 1h, 2g, 3, 4, 5, 8d, 7d, 8c, 9c, 10c, and 11e

Part IX Statement of Functional Expenses

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

	All other organizations must comple		not required to comple	ete columns (B), (C), and (
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(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	238,845.	238,845.		
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	85, <u>424</u> .	21,356.	42,712.	<u>21,356.</u>
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	173,289.	95,731.	57,272.	<u> 20,286.</u>
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	7,418.	4,011.	3,407.	
9	Other employee benefits	13,227.	9,043.	4,184.	
10	Payroll taxes _	18,175.	10,022.	6,768.	1,385.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	11,557.		11,557.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	9,380.			9,380.
12	Advertising and promotion			_	
13	Office expenses	38,410.	5,124.	33,286.	
14	Information technology	11,412.	4,979.	6,433.	
15	Royalties .				
16	Occupancy	1,362.		1,362.	
17	Travel	4,198.	4,198.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,642.		4,642.	
23	Insurance			<u> </u>	
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.)				
а	PROGRAM ACTIVITIES	40,237.	40,237.		
b	DYMED III TAB/III	6,618.	6,618.		
c	MISCELLANEOUS	4,126.	1,500.	2,626.	
d	·····	1,452.	1,452.		
e	PROFESSIONAL DUES & MEM	915.		915.	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	670,687.	443,116.	175,164.	52,407.
26	Joint Costs. Check here In 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				
	some programme to the control of the con				5 000 (000)

Pa	πX	Balance Sneet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			475,894.	1	414,575.
	2	Savings and temporary cash investments			155,578.		183,594.
	3	Pledges and grants receivable, net			26,000.		128,000.
	4	Accounts receivable, net		= <u>-</u> ,,,,,,,	4		
	5	Receivables from current and former officers, of					
		employees, or other related parties Complete		5			
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 49					
		Part II of Schedule L				6	L
र्घ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment, cost basis	10a	51,427.			
	b	Less. accumulated depreciation. Complete					
		Part VI of Schedule D	10b	23,045.	14,572.		
	11	Investments - publicly traded securities		_	34,192.		27,715.
	12	Investments - other securities See Part IV, line	-	51,180.	12	237,956.	
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets .				14	
	15	Other assets. See Part IV, line 11			1,903.		2,251.
	16	Total assets. Add lines 1 through 15 (must equal to 15)	ual line :	34)	759,319.		1,022,473.
	17	Accounts payable and accrued expenses			1,114.	17	1,954.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		_	·	20	
ies	21	Escrow account liability Complete Part IV of S		ſ	- ".	21	
iii ii	22	Payables to current and former officers, directors					
Liabilities		highest compensated employees, and disquali					
		of Schedule L	حلة أم مقما			22	-
	23	Secured mortgages and notes payable to unre	iated tri	ira parties		23	+
	24	Unsecured notes and loans payable Other liabilities Complete Part X of Schedule D	,	-		25	<u>-</u>
	25 26	Total liabilities. Add lines 17 through 25	,	-	1,114.		1,954.
	20_	Organizations that follow SFAS 117, check h	oro N	X and complete	1,114.	20	1,554.
ဟ		lines 27 through 29, and lines 33 and 34.	ici c	and complete			
ĕ	27	Unrestricted net assets			532,205.	27	421,176.
<u>a</u>	28	Temporarily restricted net assets			26,000.		9,823.
Net Assets or Fund Balance	29	Permanently restricted net assets			200,000.		589,520.
Š		Organizations that do not follow SFAS 117,	check t	nere 🕨 🔲 and			
P.		complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current fund	S			30	
SS	31	Paid-in or capital surplus, or land, building, or e		ent fund		31	
Ϋ́	32	Retained earnings, endowment, accumulated i				32	
ž	33	Total net assets or fund balances		[758,205.	33	1,020,519.
	34	Total liabilities and net assets/fund balances			759,319.	34	1,022,473.
Pa	rt XI	Financial Statements and Reportin	g		·		
					_		Yes No
1	Acco	ounting method used to prepare the Form 990.		ash X Accrual	Other		
2a		e the organization's financial statements compile			accountant?		2a X
b		e the organization's financial statements audited					2b X
С		es" to lines 2a or 2b, does the organization have				e audr	
		ew, or compilation of its financial statements and					2c X
3а		result of a federal award, was the organization r	equired	to undergo an audit or aud	dits as set forth in the Sing	gle Au	
		and OMB Circular A-133?					3a X
h	- IT "Y	es." did the organization undergo the required at	JOIL OF 2	HUOTS?			l3b l

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.

2008 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

				SCHOLARS COM						3.	1-1523230
Pa	ırt I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part	.) (see ins	tructions)		
Γhe	organ	zation is not a	private foundation	because it is (Please ch	eck only o	ne organiz	ation.)				
1		A church, cor	nvention of churche	s, or association of chur	ches desci	ribed ın se	ction 170	(b)(1)(A)(i)			
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)									
4		•	•	operated in conjunction						-	the hospital's name,
-		city, and state	-	•					·-/ // //	•	•
5		•		benefit of a college or ur	niversity ov	vned or or	erated by	a governi	mental und	describe	ed in
•			(b)(1)(A)(iv). (Comple		,		·	Ū			
6				ent or governmental uni	t described	l in sectio	n 170(b)(1	ΙΛΑΝω			
	$\overline{\mathbf{x}}$			eives a substantial part					r from the	general i	public described in
		_	b)(1)(A)(vi). (Comple				3			J	
8				section 170(b)(1)(A)(vi).	(Complete	Part II.)					
9	一			eives (1) more than 33			rom contri	butions, m	nembershir	o fees, ar	nd aross receipts from
•		•	•	nctions - subject to certa					-		•
			· ·	axable income (less sect	-	-	•				
			509(a)(2). (Complete	•		,			,g		
10				perated exclusively to te	st for publi	c safety. S	See sectio	n 509(a)(4	1), (see ins	tructions)
11	\sqcap	J	•	perated exclusively for the	•	•			• •		•
		•				•					
	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 III c Type III - Functionally integrated d Type III - Other										
e				at the organization is not	controlled	directly or	r indirectly	by one or	r more disc	qualified	persons other than
-		-	-	han one or more publicly		-					
f			-	tten determination from t		=				,,,,	,
		_	rganization, check th			•		, ,,			
g	ı		•	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	
•	,	_	•	lirectly controls, either al			•				Yes No
		• •	•	upported organization?	•				,, ,	,	11g(i)
		•	• •	n described in (i) above?			•				11g(ii)
		.,	•	person described in (i) o	-	∋?		•			11g(iii)
r	ì	• •	•	about the organizations			ports.				
•			Ū	· ·		•	•				
/:	Mame	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) ls	the	(vii) Amount of
γ.		inization	(11) 2.11	organization (described on lines 1-9	in col. (i) lis		organizat		organizátic (i) organiz	on in col. ed in the	support
				above or IRC section	governing	document?	(i) of you	support?	(i) organiz U.S.	.?	.,
				(see instructions))	Yes	No	Yes	No	Yes	No	
					ļ .						
		- · · · · · · · · · · · · · · · · · · ·									
					1						
					 	 	<u> </u>		<u> </u>		
					 				 		

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

Schedule A (Form 990 or 990-EZ) 2008 CROSBY SCHOLARS COMMUNITY PARTNERSHIP 31-1523230 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part 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 614,576. 639,073. 569,300. 664,440. 880,424. include any "unusual grants") 3 367 813 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 614,576, 639,073, 569,300, 664,440. 880,424. 4 Total, Add lines 1 - 3 3,367,813, 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) 897,855. 6 Public Support. Subtract line 5 from line 4 2.469.958. Section B. Total Support Calendar year (or fiscal year beginning in) (b) 2005 (d) 2007 (a) 2004 (c) 2006 (e) 2008 (f) Total 614,576. 639,073. 569,300. 7 Amounts from line 4 664,440. 880,424 3,367,813. 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 2,517. 3,075. 5,791. 9,176. 21,625. 1,066. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carned 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 3,389,438. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 72.87 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 15 64.81 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

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

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

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.

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 (e) 2008 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (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 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 (d) 2007 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (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 carned on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 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 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.

2008
Open to Public Inspection

Name of the organization

Employer identification number

		MMUNITY PARTNERSHIP	31-1523230
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(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 adv	vised funds
	are the organization's property, subject to the organization's		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may l	be used only
	for charitable purposes and not for the benefit of the donor of		· — —
Pai			
1	Purpose(s) of conservation easements held by the organizat		
-	Preservation of land for public use (e.g., recreation or publi		nistorically important land area
	Protection of natural habitat		ified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a co	inservation easement on the last day
_	of the tax year.		moor valien eacoment on the last day
	or the tax year.		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	• •	2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	• • • • • • • • • • • • • • • • • • • •	2d
3	Number of conservation easements modified, transferred, re		
·	year ▶	ioadoa, oxungaionoa, or terminated by t	no organization daming the taxable
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	· · · · · · · · · · · · · · · · · · ·	- and
J	enforcement of the conservation easements it holds?	modio mormornig, mopeonori, violationis,	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and		<u> </u>
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)?	vo satisfy the requirements of section 77	Yes No
9	In Part XIV, describe how the organization reports conservat	Ion easements in its revenue and expen	
3	include, if applicable, the text of the footnote to the organiza	•	
	conservation easements.	inorro imariolar otatomonto trial docoribo	o the organization o accounting for
Pai	rt III Organizations Maintaining Collections o	f Art. Historical Treasures. or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet works of art, historical
14	treasures, or other similar assets held for public exhibition, e	•	·
	the footnote to its financial statements that describes these		ability and toxe of
b	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures
	or other similar assets held for public exhibition, education, or		
	these items:	or research in fartherance of public servi	ce, provide the following amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		▶ ¢
	(ii) Assets included in Form 990, Part X	•	. > \$
^	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre	occures or other cimiler coasts for finance	. > \$
2	_		iai yaiii, piovide
_	the following amounts required to be reported under SFAS 1	To relating to these items.	► ¢
a	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		~ •

		<u>SCHOLARS C</u>							23230	Page 2
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, e	or Othe	<u>r Simil</u>	<u>ar Asse</u>	ts (continu	ed)
З`	Using the organization's accession and othe	r records, check any	of the	following tha	at are a signif	icant use	of its col	ection ite	ms (check a	all
	that apply).									
а	Public exhibition	d	. \square	Loan or exc	hange progra	ams				
b	Scholarly research	е	, 🗀	Other	_					
С	Preservation for future generations				<u> </u>			-		
4	Provide a description of the organization's co	ollections and explai	n how t	hev further t	he organizati	on's exen	not purpo	se in Par	t XIV	
5	During the year, did the organization solicit o			-	_					
	to be sold to raise funds rather than to be ma] Yes	No
Par	t IV Trust, Escrow and Custodial					ered "Yes	" to Form	990. Par		
	reported an amount on Form 990, Par								, ,	
	Is the organization an agent, trustee, custod		diary for	contribution	ns or other as	sets not i	ncluded			
	on Form 990, Part X?		21G. y 101	CONTINUATION	10 0, 01,10, 40				Yes	□ No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table					_ 163 (
	ii res, explain the arrangement in rait Aiv	and complete the ic	,ovvii ig	labie					Amount	
_	Paginning balance						10		Amount	_
C	Additions during the year						1c			
d	Additions during the year					•	1d			
e	Distributions during the year						1e			
f	Ending balance .	000 D- 4V I	040	•		•	1f		7,, 1	
	Did the organization include an amount on Fo		21?			•			ا Yes ا	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									
rai	t V Elidowillett Fullus. Complete						n Th	b l		
		(a) Current year	(b) H	Pnor year	(c) Two year	rs dack (a) inree y	ears back	(e) Four ye	ars dack
1a	Beginning of year balance	202,095.								
Ь	Contributions	389,520.			 		 			
С	Investment earnings or losses	<45,341.	>		_					
	Grants or scholarships				+					
е	Other expenditures for facilities									
	and programs	0.455								
f	Administrative expenses	9,475.			-					
9	End of year balance	536,799.								
2	Provide the estimated percentage of the year	r end balance held a	as.							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment ► 99.00	%								
С	Term endowment ▶ 1.00	%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administe	ered for th	e organiz	ation		
	pà.								$\overline{}$	s No
	(i) unrelated organizations			-					3a(i) 2	
	(ii) related organizations		•						3a(ii)	X_
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building	gs, and Equipm	ent. s	ee Form 990), Part X, line					
	Description of investment	(a) Cost or o		1 ''	t or other	(c) De	preciatio	n	(d) Book v	alue
		basis (investr	ment)	basis	(other)					
1a	Land			ļ						
b	Buildings									
С	Leasehold improvements									
d	Equipment			5	1,427.		23,0	45.	28_	382.
е	Other									
T	Add lines to to (Column (d) should equal Fr	ome OOO Bort V and	·mn /Dl	(no 10(a))					28	382

Schedule Q (Form 990) 2008 CROSBY SCHO Part VII Investments - Other Securities. Sec	LARS COMMUNITY	PARTNERSHIP	31-1523230 Page 3
(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation: nd-of-year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
CROSBY SCHOLARS ENDOWMENT		····	
FUND	237,956.	END-OF-YEAR	MARKET VALUE
			
			
			<u> </u>
			
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	237,956.		
Part VIII Investments - Program Related. Se			
(a) Description of investment type	(b) Book value	(c) M	ethod of valuation
(a) Description of investment type	(5) 55511 1215	Cost or er	nd-of-year market value
			
		 -	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		· · · · · · · · · · · · · · · · · · ·	
Part IX Other Assets. See Form 990, Part X, line	15.		
	Description		(b) Book value
	 .	-	
Total. (Column (b) should equal Form 990, Part X, col (B) In Part X Other Liabilities. See Form 990, Part X,			
(a) Description of liability		(b) Amount	
Federal income taxes		``	
rederal income taxes			
	-		
Total. (Column (b) should equal Form 990, Part X, col (B) In	ne 25)		
In Part XIV, provide the text of the footnote to the organiza	ition's financial statements	that reports the organizati	ion's liability for uncertain tax positions

	dule D (Form 990) 2008 CROSBY SCHOLARS COMMUNITY				31-1	<u>523230</u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Finai	ncial Stateme	ents			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		_ 1_				<u>,738.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	_			<u>,687.</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	-			<u>,051.</u>
4	Net unrealized gains (losses) on investments		4			<u><57</u>	<u>,737.</u>
5	Donated services and use of facilities .		_ 5_		_		
6	Investment expenses .		6				_
7	Prior period adjustments .		7				_
8	Other (Describe in Part XIV)		8				
9	Total adjustments (net). Add lines 4-8		9	-			<u>,737.</u>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 t XII Reconciliation of Revenue per Audited Financial Statements.	- NA NA	10	<u> </u>	2041111	262	<u>,314.</u>
	<u> </u>	ants A	illi Revenue	per r		OFF	721
1	Total revenue, gains, and other support per audited financial statements				1	722	<u>,731.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 -	1 .57 .	727			
a	Net unrealized gains on investments	2a	<57,				
b	Donated services and use of facilities	2b	44,	730.	4		
С	Recoveries of prior year grants	2c			-		
d	Other (Describe in Part XIV)	2d	<u> </u>		-	2.5	000
е	Add lines 2a through 2d				_2e		<u>,007.</u>
3	Subtract line 2e from line 1				3	990	<u>,738.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	,	ı		1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			∤		
b	Other (Describe in Part XIV)	4b			4		
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		<u>,738.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	ents \	With Expense	s per	Retur		
1	Total expenses and losses per audited financial statements				1	<u>693</u>	<u>,417.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	,	1				
а	Donated services and use of facilities	2a	22,	<u>730.</u>	4		
b	Prior year adjustments .	2b]		
С	Losses reported on Form 990, Part IX, line 25	2c]		
d	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d				2e	22	<u>,730.</u>
3	Subtract line 2e from line 1	_			3	670	,687.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b			1		
c	Add lines 4a and 4b				4c		0.
-	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	•	•		5	670	,687.
	t XIV Supplemental Information						 -
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I	II. lines	1a and 4: Part IV.	lines 1	b and 2	o. Part V. line	4. Part
	irt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.						·
	RT V, LINE 4: THE ORGANIZATION'S INTENDED	USE	OF ENDOW	MENT	r FUN	DS IS	
US	ED TO SUPPORT PROGRAM OPERATIONS, PROGRAMS	ANI	SCHOLAR	SHIE	S RE	LATED '	го
<u></u>							_
тH	E DELIVERY OF SERVICES FOR THE CROSBY SCHO	LARS	COMMUNI	TY I	PARTN	ERSHIP	•
							_

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ Must be completed by organizations that answer "Yes" to Form 990,

OMB No 1545-0047

Name of the organization

Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a

Inspection

Schedule G (Form 990 or 990-EZ) 2008

Name of the organization					E	Employer ide	ntification number
CROSBY	SCHOLARS COMMUNITY	PA	RTN	ERSHIP	_ :	31-1523	230
Part I Fundraising Activities	. Complete if the organization answer	ered "\	es" to	Form 990, Part IV, I	line 17.		
Indicate whether the organization raise	e Solicita f Solicita g Special or oral agreement with any individual Part VII) or entity in connection with p lividuals or entities (fundraisers) purs	tion of tion of fundra (inclui profess uant to	non-g gover using o ding o ional f agree	overnment grants nment grants events fficers, directors, true fundraising services? ements under which	stees o	Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (or fu	mount paid retained by) indraiser id in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
			_ _			ļ	
				·			
		 					
		_					
		ļ —					
·						_	
Total	_						
3 List all states in which the organization	on is registered or licensed to solicit	funds	or has	been notified it is ex	cempt f	rom registrati	on or licensing
 							
						· · ·	
							<u> </u>

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

Schedule G (Form 990 or 990-EZ) 2008 CROSBY SCHOLARS COMMUNITY PARTNERSHIP Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events NONE GOLF (Add col (a) through TOURNAMENT col (c)) (total number) (event type) (event type) Revenue 128,450. 128,450 Gross receipts 2 Less: Charitable contributions 128,450. 128,450 Gross revenue (line 1 minus line 2) Cash prizes Non-cash prizes Direct Expenses Rent/facility costs 32,518 32,518. Other direct expenses 32<u>,518</u>) Direct expense summary Add lines 4 through 7 in column (d) 95,932. Net income summary Combine lines 3 and 8 in column (d) Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/Instant (d) Total gaming (Add (a) Bingo (c) Other gaming Revenue col. (a) through col. (c)) bingo/progressive bingo Gross revenue Cash prizes Direct Expenses Non-cash prizes Rent/facility costs Other direct expenses % Yes Yes Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary Combine lines 1 and 7 in column (d) Yes No **9** Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? 9a b If "No," Explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain: Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

31-1523230 Page 2

Schedule G (Form 990 or 990-EZ) 2008 CROSBY SCHOLARS COMMUNITY PARTNERS	HIP 31-152	3230) Pa	age (
		\rightarrow	Yes	No
13 Indicate the percentage of gaming activity operated in:				l
a The organization's facility	13a %	1		l
b An outside facility	13b %			l
14 Provide the name and address of the person who prepares the organization's gaming/special events book	s and records.			
Name				
Address				
15a Does the organization have a contract with a third party from whom the organization receives gaming reve	nue?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and	the amount			
of gaming revenue retained by the third party > \$				
c If "Yes," enter name and address.				l
				l
Name				
Address >				
16 Gaming manager information:				
Name				
Gaming manager compensation > \$				
Description of services provided ▶				
Director/officer Employee Independent contractor				
17 Mandatory distributions:				
a is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?		17a		<u> </u>
b Enter the amount of distributions required under state law distributed to other exempt organizations or specific	ent in the			
organization's own exempt activities during the tax year		1 1		1

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE I			(OMB No 1545-0047	11
(Form 990)			Grants and Governr	ants and Other Assistance to Organization Governments, and Individuals in the U.S.	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	ā		2008	
Department of the Treasury		► Compl	► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.	n answered "Yes,	," on Form 990, Pa	art IV, lines 21 or 22.		Open to Public	٠ ,
Internal Revenue Service				► Attach to Form 990.	m 990.			Inspection	
Name of the organization	CROSBY	SCHOLARS COI	COMMUNITY PAR	PARTNERSHIP			Ш	Employer identification number 31–1523230	nber 30
Part I General Info	⊑	4ssistance	ll						
1 Does the organizati	Does the organization maintain records to substantiate the amount of	ubstantiate the		or assistance, the	grantees' eligibility	/ for the grants or assi	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	•	
criteria used to awa	critena used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ce? tures for monite	oring the use of grant	funds in the United	d States.			X Yes	Š
= 1	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	ernments and	Organizations in the	• United States. C	Complete if the orga	anization answered "Y	es" on Form 990, Part I	V, line 21, for any	
recipient that	recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Use Part IV and Schedule 1.1 (Form 990) if additional space is needed	00 Check this	box if no one recipier	it received more th	an \$5,000 Use Pa	Irt IV and Schedule I-1	(Form 990) if additional	space is needed	
1 (a) Name and address of organization or government	ress of organization rnment	(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	
			:						
2 Enter total number 3 Enter total number	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	government org	janizations					A A	
٦,	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	n Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	2008

Schedule I (Form 990) 2008 (f) Description of non-cash assistance (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. AWARDS ARE DIVIDED BY THE CHECK MUST BE Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information LINE 2: AN ANALYSIS IS PERFORMED ON EACH STUDENT WHO A CHECK IS THEN MADE PAYABLE TO THE STUDENT ONCE THE GRADE REPORT IS RECEIVED, THE STUDENT RECEIVES A LETTER MAKING ONCE IT IS DETERMINED THAT A STUDENT IN ORDER TO RECEIVE SECOND SEMESTER CHECKS, A STUDENT MUST EACH CHECK IS MAILED WITH A SCHOLARSHIP (d) Amount of non-cash assistance THE SCHOOL IS SENT THE SECOND HALF OF THE SCHOLARSHIP. THE STUDENT MUST ENDORSE THE CHECK. 238,845 (c) Amount of cash grant 343 (b) Number of recipients SUBMIT A COPY OF THEIR GRADE REPORT. QUALIFIES FOR A LAST DOLLAR GRANT, FOR A LAST DOLLAR GRANT. SCHOLARSHIPS FOR STUDENTS TO ATTEND COLLEGE THE AWARD. ENDORSED BY THE STUDENT. (a) Type of grant or assistance H PART HIM/HER AWARE OF AND THE SCHOOL. Schedule I (Form 990) 2008 SCHEDULE I, SEMESTER. APPLIES 832102 12-18-08 Part III

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Page 2

31-1523230

CROSBY SCHOLARS COMMUNITY PARTNERSHIP

Schedule I (Form 990) 2008 Part IV Supplemental Inform	CROSBY SCHOLARS COMMUNITY PARTNERSHIP 31-1523230 Page 2 pation
ACKNOWLEDGEMENT FORM	FOR THE SCHOOL TO ACKNOWLEDGE RECEIPT. THE
ACKNOWLEDGEMENT FORM	ALSO OUTLINES THE TERMS OF THE GRANT AND PROVIDES
DIRECTION ON HOW THE	SCHOLARSHIP IS TO BE USED AND DISBURSED.

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.

CROSBY SCHOLARS COMMUNITY PARTNERSHIP

2008
Open to Public Inspection

Name of the organization

Employer identification number 31-1523230

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS FINANCIAL AID TO COVER THE COST OF ATTENDANCE IN THAT PARTICULAR SCHOOL YEAR. THE PROGRAM HELPS STUDENTS PREPARE FOR COLLEGE BY ENCOURAGING THEM TO MAKE GOOD DECISIONS, BY HELPING THEM DEVELOP STRONG ACADEMIC SKILLS AND BY HELPING THEM TO UNDERSTAND THE REQUIREMENTS FOR COLLEGE ADMISSION WITH THIS GUIDANCE, STUDENTS CAN PREPARE FOR COLLEGE ENROLLMENT AND SCHOLARSHIP/FINANCIAL AID OPPORTUNITIES. STUDENTS CAN JOIN THE CROSBY SCHOLARS PROGRAM AS EARLY AS 6TH GRADE TO BEGIN THE PROCESS OF STUDENTS ATTEND WORKSHOPS CALLED SATURDAY PREPARING FOR COLLEGE. ACADEMY ON COLLEGE CAMPUSES. THE SATURDAY ACADEMY WORKSHOPS INCLUDE TOPICS SUCH AS ANGER MANAGEMENT, BUILDING SELF-ESTEEM, SPEECH AND COMMUNICATION. TIME MANAGEMENT. STUDY SKILLS. TEST TAKING SKILLS. CONFLICT RESOLUTION, PREPARING FOR THE SAT, CAREER EXPLORATION, COLLEGE ADMISSIONS, SCHOLARSHIPS, FINANCIAL AID AND COLLEGE SURVIVAL SKILLS. THESE CLASSES HELP STUDENTS DEVELOP THE FOUNDATION FOR SUCCESS THAT WILL HELP THEM BECOME BETTER PREPARED FOR COLLEGE. STUDENTS IN GRADES 9-11 MEET MONTHLY WITH VOLUNTEERS TO BETTER PREPARE FOR SUCCESSFUL COLLEGE ENROLLMENT, AND SENIOR CROSBY SCHOLARS MEET ONE ON ONE WITH AN ADVISOR TO HELP WITH THE SENIOR YEAR COLLEGE APPLICATION AND SCHOLARSHIP PROCESS. FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION UPDATED THE BY-LAWS IN DECEMBER 2008. CHANGES INCLUDED TERM LIMITS AND ELECTRONIC

COMMUNICATION FOR BOARD MEETINGS.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

Employer identification number

CROSBY SCHOLARS COMMUNITY PARTNERSHIP 31-1523230 FORM 990, PART VI, SECTION A, LINE 10: THE EXECUTIVE DIRECTOR EMAILS THE 990 TO ALL BOARD MEMBERS AND THE 990 IS REVIEWED BY THE EXECUTIVE THE EXECUTIVE COMMITTEE'S FINAL APPROVAL IS NEEDED BEFORE THE COMMITTEE. THE 990 IS SIGNED BY THE TREASURER OF THE RETURN CAN BE FILED. ORGANIZATION. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD GENERALLY AUTHORIZES THE EXECUTIVE COMMITTEE TO DETERMINE COMPENSATION FOR THE EXECUTIVE DIRECTOR. WE DO AN INTERNET SEARCH ON SIMILAR ORGANIZATIONS WITH AN EXECUTIVE DIRECTOR WITH SIMILAR CREDENTIALS AND EXPERIENCE TO REVIEW THE AVERAGE AFTER DOING THIS SEARCH, IT WAS DETERMINED THAT THE AVERAGE SALARY FOR AN EXECUTIVE DIRECTOR WITH COMPARABLE EDUCATION AND EXPERIENCE IN NORTH CAROLINA WAS PAID AN AVERAGE SALARY THAT IS CLOSE TO THE SALARY FOR THE EXECUTIVE DIRECTOR. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES IT GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.