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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

Open to Public Inspection

<u>A</u>	For the	e 2008 cal		ar, or tax	year beginni	ng	7/1/20	08		and er	nding		/30/20			
B Check of applicable Please C Name of organization The Heat and Warmth Fund D Employer identification										ntification nu	mber					
	Address	change	label or	Doing	Business As							38-26 <u>469</u>	24			
	Name ch	nange	print or	Numbe	er and street (or	P O box if mai	l is not delivere	d to street a	address)	Ro	om/suite	E Telepho	ne nur	mber		
	Initial ret	um	type See	607 She	lby Street					40	0	313-226-9	9465			
	Terminat	tion	Specific		town, state or c	ountry, and ZIF	' + 4									
$\sqcap$	Amende	d return	Instruc- tions.	Detroit_				MI	48	226		G Gross re	eceipts	\$	17,1	189,434
	Applicate	on pending	FN	lame and	address of prir	ncipal officer		•	_		H(a) is i	this a group n	etum fo	or affiliates?	Yes	X No
					ny 18123 Au	•	Dearborn	MI 4812	4		' '	e all affiliates			Yes	. □ No
$\overline{\cdot}$	Ta a			01(c) (	3) <b>◄</b> (inse		4947(a)(1		527		11(2)			(see instruct		
_		mpt status			3) 🔻 (IIIsi	eitilo) L	4947(a)(1	) OI	] 527					-	,	
<u>J</u>	Website	e: ► www				<del></del>				<u> </u>		oup exemptio				
K	Type of o	rganızatıon	X Co	orporation	Trust	Association	Other I	<u> </u>		L Year	of forma	ation 198	5	M State of leg	jal domicile	<u> MI</u>
	Par <u>t I</u>		mmary						_							
	1				nization's mis									ife in Michi		
	1	prevents	<u>human</u>	suffering	by providing	g low incom	e families w	th energ	<u>y assis</u>	tance	during	crisis and	advo	cating for le	ong term	1
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, je		and don	ors to m	<u>ıarshal, le</u>	everage and	coordinate i	esources of	n behalf	of the c	ommu	nity					
94	2	Check th	his box	▶ 🔲 ıf	the organiza	ation discon	tinued its op	erations	or disp	osed o	of more	than 25%	of its	sassets		
Ğ	3	Number	of votin	g membe	ers of the gov	verning body	/ (Part VI, lir	ne 1a)						3		19
, 8	4	Number	of indep	pendent v	oting memb	ers of the go	overning boo	dy (Part \	VI, line	1b)				4		19
Activities & Governance	5				es (Part V, Iı									5		16
Ğ	6				rs (es <b>iR) (236</b>									6		100
•	7a				siness reveni				า (C)				-	'a		0
<b>)</b>	b	Net unre	elated bu	usiness ta	xable incom		n 99 <b>9</b> 7, line	34			,		7	'b		0
1				18		0 9 2010	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\					Prior Year			urrent Yea	
- - -	.   8	Contribu	utions ar	nd grants	(Part VIII, lin	ne 1h)	] 藍					14,1	32,6	29		<del>187,677</del>
	9	Program	n service	erevenue	(Part XIII I	<u>१</u> १ <del>-</del> 2ेशे । [⁻	r.							0		<u>371,166</u>
Revenue	10	Investm	ent inco	me (Part	VIII, COUTIL	(A) lines 3,	4, and 7d)						31,8	43		11,091
á •	111						es 5, 6d, 8c, 9c, 10c, and 11e) nust equal Part VIII, column (A), line 12)						14,164,472			<u>U</u>
_	12								A), line	12)						169,934
	13				nts paid (Par			-3)				10,8	28,0	00	14,7	772,776
	14		•		mbers (Part			luma /A\	Junga	E 10\		801,883				939,071
8	15			-	ation, employ			iuiiii (A)	, illes	5-10)			001,0	0		0
Expenses	16a			-	fees (Part IX				01	27,962				<del></del>		
Exp	b   17				es (Part IX, c column (A),				94	27,902		1 (	19,8	57	1.6	314,049
	18		•	•	s 13–17 (mu				25)		-		749,8			325,896
	19		-		Subtract line			i (A), iii ic	23)				114,6			155,962
<u> </u>		revenu	C 1033 C/	хрензез	Subtract line	<u> </u>	C IZ				Be	eginning of Y			End of Yea	
\$	ลี   วก	Total as	sets (Pa	art X, line	16)								150 7	_		257.280
Asse	E 21			Part X, lin									89,9	26		52,374
Set	를 22		•	-	ces Subtrac	t line 21 fror	n line 20					3.3	360,8		3.2	204,906
Р	art li		nature													
					I declare that I h	have examined	this return, incli	uding accor	mpanying	schedu	les and s	tatements, ar	nd to th	ne best of my	knowledge	
		and t	belief, it is	true, correct	t, and complete	Declaration of	preparer (other	than office	r) is base	d on all i	informatio	on of which p	reparei	r has any knov	wledge	
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Si	gn			<u> </u>	rune	2. 1000	vor	<del></del>		_		7	7	1 <u>                                    </u>	<u>'O</u> _	
	ere	🐔	Signature	of officer								Date	е	Ť		
1 10	516		Debora	ih A Divir	ıy			<u> </u>		Chief	Financ	ial Officer				
				rint name ar	nd title			Te :		Т-		_				<u> </u>
_		Prepa signa	arer's					Date		Cr se	neck if If-	_		reparer's ident se instructions)	rrying numb	per
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US	e Only		f-employed										<u> </u>			-
_			ess, and Z		the prepare				<u> </u>			Phone no		۲,	Yes	No
				ATT OF SAULT	IIIO DIODAGO											(100)

	The Heat and Warmth Fund	38-2646924	Page Z
Pa	art III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission.		
	To provide direct payment to vendors of utility bills for qualified low income households in Michigan		
	We are the last resort for Michigan families facing a utility payment crisis		
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	X 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	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services	hy evnences	
4			al
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amo	orni or grants ar	nu
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code ) (Expenses \$ 15,652,106 including grants of \$ 0 ) (Revenue \$	\$	0)
	Utility Assistance Payments		
			• • • • • • • • • • • • • • • • • • • •
4b	(Code) (Expenses \$0 including grants of \$0 ) (Revenue \$	\$	<u> </u>
		- <b></b>	
40	(Code ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$	<u></u>	0.)
70	(Code) (Expenses ©	<b>*</b>	,
			• • • • • • • • • • • • • • • • • • • •
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			. <b>.</b>
	••••••		
		. <b></b>	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
4e	Total program service expenses ▶ \$15,652,106 (Must equal Part IX, Line 25, column		
		··· \-/./	

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		х
5	Section 501(c)(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		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? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling debt management credit repair, or debt negotiation services? If "Ves," complete Schedule D, Part IV	9		x
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,			<del>  ^-</del>
	Parts VI, VIII, IX, or X as applicable  Did the organization receive an audited financial statement for the year for which it is completing this return	11	Х	
12	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	-	X
D	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.? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		<del>  ^</del>
13	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	<del>ان</del> -		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
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		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		Х
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		Х
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		1	
	Schedule J	23		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? If "Yes," answer questions			
	24b–24d and complete Schedule K If "No," go to question 25	24a	<u> </u>	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	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		х
	Did the organization act as an "on behalf of' issuer for bonds outstanding at any time during the year? .	24d		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? If "Yes," complete Schedule L, Part I	25a		Х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	<u> </u>		<u> </u>
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		_X

Part IV	Checkl	ist of Re	quired Schedules	(continued)

Yes No 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee 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, 28a Х b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L. Part IV 28b c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c 29 Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Part I 31 Х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-32 If "Vos." complete Schodule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, Х III, IV, and V, line 1 34 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 Х 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 Х 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

Form **990** (2008)

Par	t 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 .	5						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0						
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		_	<del> </del>				
_	gaming (gambling) winnings to prize winners?	10	4	ļ				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax							
_		16	-	-				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return (see			1				
3a	Instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year covered by							
Ja	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	$\rightarrow$	+^				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		_	1				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1				
	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	l	i i	1				
	and Financial Accounts			1				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.	5a		<u> </u>				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	4	X				
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			1				
٥-	Regarding Prohibited Tax Shelter Transaction?	5c 6a		X				
6a b	, , , , , , , , , , , , , , , , , , , ,							
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	OL	+	+				
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	ł						
-	\$75?	7a	X	-				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		1	1				
	required to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal							
	benefit contract?	7e		X				
	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?	<b>7</b> g	-	X				
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?							
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	7h	+	<del> </del>				
•	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring	Ì						
	organization, have excess business holdings at any time during the year?	8	<del></del>	X				
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	Ť	1					
а	Did the organization make any taxable distributions under section 4966?	9a		Х				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X				
	Section 501(c)(7) organizations. Enter							
	Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_						
	Section 501(c)(12) organizations. Enter							
	Gross income from members or shareholders . 11a	_						
	Gross income from other sources (Do not net amounts due or paid to other sources							
	against amounts due or received from them.)  Section 4047(a)(4) non executed by sixthly the section of the first section (5) and (5) a			<del> </del>				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a	1	┼				
<u>b_</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		1	1 .				

organization ► Deborah Diviny

607 Shelby Street, #400, Detroit, MI 48226

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions 1a Enter the number of voting members of the governing body 19 Enter the number of voting members that are independent 19 1b 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 Х 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 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a material diversion of the organization's assets? 5 £ Does the organization have members or stockholders? C Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Х Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? b Each committee with authority to act on behalf of the governing body? 8ь Х Does the organization have local chapters, branches, or affiliates? 9a 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 Х 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 Х Section B. Policies No Yes 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Х Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Χ 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? Χ 13 14 Does the organization have a written document retention and destruction policy? Χ 14 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. The organization's CEO, Executive Director, or top management official? 15a Х 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 ► MI Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply X Another's website X Upon request X Own website 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

313-963-2652

# 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 compe	ensate any office	er, dire	ecto	or, t	rus	tee, o	ke	y employee		
(A) (B) (C) (D) (E)								(F)		
Name and Trtle	Average hours per week	Individual trustee or director			™ Key employee		For ier	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Dianne Bostic Robinson  Board President	2	х						0	0	0
Linda Blair Board Vice President	2	х				:		0	0	0
Mark Stiers Board Treasurer	2	х						0	0	0
Donald Jones Board Secretary	2	х						0	0	0
John X Miller CEO	50			х		Х		136,705	0	0
Deborah A Diviny CFO	50			х				80,548	0	0
	0							0	0	0
	0							0	0	0
	0		_					0	0	0
	0							0	0	0
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	0							0	0	0
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	0							0	0	0
	0							0	0	0
	0							0	0	0

Рa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A)	(B)			(6	C)			(D)	(E)	ı	(F)	
	Name and title	Average	Po	sition	(chec	k all ti	hat ap		Reportable	Reportable		Estima	
		hours per week	or di	Inst	Officer	Key	em	Former	compensation from	compensation from related	1	amoun othe	
			Individual trustee or director	Institutional	i e	Key employee	by est	er	the organization	organizations (W-2/1099-MISC		compens from the	sation
			학회	onal		bloy	8 8		(W-2/1099-MISC)	(11-21033-11100	Ί	organiza	ation
			stee	trust		ď	Pen					and rela	
				tee			Highest compensated employee						
											T		
	· · · · · · · · · · · · · · · · · · ·	0		ļ		<u> </u>			0	1	9		0
		0							0		0		0
		0					ļ		   0		 0		0
											1		
		0					ļ	<u> </u>	0		<u> </u>		0
		0							0		0		0
		•	 			i	 				,		0
		0	-						0				0
		0						<u> </u>	0		<u> </u>		0
		0							0		٥		0
											1		<u>_</u>
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		0							0		0		0
		•										•	
		0					ł		0		9		0
		0							0	ı	0		0
		0							0		٥		0
1b	Total	<u> </u>			L	L	L	<b></b>	217,253		<u></u>		
2	Total number of individuals (including those	ın 1a) who rece	ıved	more	e tha	n \$1	00,0	00 ır			the	;	
	organization ► 1											T.,	
_	Did the comment of the configuration	d								_		Yes	No
3	Did the organization list any <b>former</b> officer, employee on line 1a? <i>If "Yes," complete Sci</i>					yee,	or ni	gnes	st compensated	-	3		X
4	For any individual listed on line 1a, is the sui					anc	d othe	or co	mpeneation from	<u>,</u> –			
4	the organization and related organizations g												
	ındıvıdual		-,			,					4		X
5	Did any person listed on line 1a receive or a	•			•				ganızatıon for	_			
	services rendered to the organization? If "Yo	es," complete S	ched	ule J	for :	such	pers	son			5	<u> </u>	X
<u>Sec</u>	tion B. Independent Contractors  Complete this table for your five highest com	noncotod indon	ond	ont o	ontro	otor	o tha	t roo	could more than	\$100,000 of			
1	compensation from the organization	ipensaleu muep	enue	511L C	OHLI	CLOI	5 1110	il iel	Elveu IIIole IIIai	1 \$ 100,000 01			
(A) (B) Name and business address Description of services								rices	Com	(C) pensatio			
													0
													0
													0
								<u> </u>					0
	Total number of independent contractors (in	oludina these :=	1\	ho r	200"	/O.d. ~	nore	<u></u>	\$100,000 :=				0
	Total number of independent contractors (incompensation from the organization ▶	cluaing those in 0		110 16		eu i		uidfi	ι ψ 100,000 III				j

Par	t VIII	Statement of Revenue						
c					(A) Total revenue	( <b>B</b> ) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
<u> </u>			<del></del>			revenue		512, 513, or 514
nts Ts	1a	Federated campaigns	1a	3,119,308				
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b	0	i .			ļ
ts, am	C	Fundraising events	1c	45,000				1
gf Iar	d	Related organizations	1d	0				
ž <u>F</u>	e	Government grants (contributions)	1e	8,338,392				1
ıtio er s	f	All other contributions, gifts, grants,						
년 美		similar amounts not included above		4,984,977				
d d	g	Noncash contributions included in li	ines 1a-1f \$ _	166,452			ł	}
<u>0</u> <u>e</u>	<u>h</u>	Total. Add lines 1a-1f	· · · · ·		16,487,677			
91				Business Code		<del></del>		
Ne Y	2a	Radiothon		900099	538,783			
Program Service Revenue	b	Night of Warm Hearts Dinner		900099	132,383	···		
ξ	C				0			
Sei	d				0			
Ē	e				0		<u> </u>	<u> </u>
õ	į	All other program service revenue			0			
	g	Total. Add lines 2a-2f			671,166			
	3	Investment income (including divide	ends, interest, a	and				
		other similar amounts)		•	11,091			11,091
	4	Income from investment of tax-exer	npt bond proce	eds <b>&gt;</b>	0			
	5	Royalties			0	·- ·		
			(ı) Real	(II) Personal				
	6a	Gross Rents					İ	
	b	Less rental expenses						
	C	Rental income or (loss)		0 0				
	_d	Net rental income or (loss)		<b>_</b>	0			
	7a		(ı) Secunties	(II) Other				
	١.	assets other than inventory		0 0	1			
	b	Less cost or other basis						
	_	and sales expenses		0 0	1		İ	
	C	Gain or (loss)		<u>0 </u>	· · · · · · · · · · · · · · · · · · ·			
	d	Net gain or (loss)			0			
ě	8a	Gross income from fundraising	25 500					
eune	i		25,500					
ě		of contributions reported on line 1c)		a 19,500			<u> </u>	
<u> </u>	h	See Part IV, line 18 Less direct expenses		<b>a</b> 19,500 <b>b</b> 19,500			ŀ	
Other Rev	•	Net income or (loss) from fundraisir		D 19,300 ▶	0			
0		Gross income from gaming activitie	_					
	30	See Part IV, line 19		a 0				}
	h	Less direct expenses		<b>b</b> 0	1 1			
	1	Net income or (loss) from gaming a		<u> </u>	0			····-
		Gross sales of inventory, less	Clivilies		1			
		returns and allowances		a 0			ļ	
	h	Less cost of goods sold		<b>b</b> 0	1			
	1	Net income or (loss) from sales of ii		• <u> </u>	0			J
	⊢∸	Miscellaneous Revenue		Business Code	<del> </del>			
	11a				0			
	b				ő			
	c				0	<del></del>		
	ď	All other revenue			o			
	e	Total. Add lines 11a–11d		<b></b>	o	··· <del>·</del>		
	12	Total Revenue. Add lines 1h, 2g, 3	, 4, 5, 6d. 7d. 8	Bc,				·-····································
	l	9c, 10c, and 11e			17,169,934	0	0	11,091

## 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).

	All other organizations must complete column	(A) but are not req	uired to complete of	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	0			
2	Grants and other assistance to individuals in		i		
	the U.S. See Part IV, line 22	14,772,776	14,772,776		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,		ļ	225 522	
_	trustees, and key employees	235,539		235,539	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		]		
_	persons described in section 4958(c)(3)(B)	574.747	200 454	E2 964	225 402
7	Other salaries and wages	574,717	286,451	52,864	235,402
8	Pension plan contributions (include section 401(k)	ا ادمه به	E 000	3,620	A E46
•	and section 403(b) employer contributions)	14,124 43,362	5,988 33,016	5,173	4,516 5,173
9	Other employee benefits	71,329	26,392	24,965	19,972
10	Payroll taxes .	71,329	20,392	24,905	19,972
11	Fees for services (non-employees)				
a	Management	0 2,357		2,357	
b	Legal	28,937	-	28,937	
C	Accounting	0		20,931	<del>_</del>
ď	Lobbying Professional fundraising services See Part IV, line 17	0		<del></del>	<del></del>
e f	Investment management fees				
	Other	3,008		3,008	
g 12	Advertising and promotion	271,086		0,000	271,086
13	Office expenses	61,302	17,164	38,055	6,083
14	Information technology	128,826	45,805	83,021	
15	Royalties	0	40,000	00,021	
16	Occupancy	66,180	21,840	22,501	21,839
17	Travel	0,100			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	111,700	49,148	30,159	32,393
20	Interest	0		0	
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	109,048	0	109,048	0
23	Insurance	1,953		1,953	
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	Printing and Postage	99,141	9,914	39,656	49,571
b	Contractual Services	39,521		14,329	25,192
C	Bad debt expense	50,643		50,643	
d	Applicant Screening	237,054	237,054		
e	Special Programs	146,558	146,558		
f	All other expenses Event expenses	256,735			256,735
25	Total functional expenses. Add lines 1 through 24f	17,325,896	15,652,106	745,828	927,962
26	Joint Costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising	i			
	solicitation				
					Form <b>990</b> (2008)

P	art X	Balance Sheet								
					(A) Beginning of year				B) of year	
	1	Cash-non-interest-bearing			3,139,043	1			2,52	2,063
	2	Savings and temporary cash investments				2				
	3	Pledges and grants receivable, net			29,124	3			50	9,796
	4	Accounts receivable, net			0	4				0
	5	Receivables from current and former officers	directo	ors. trustees. kev						
	•	employees, or other related parties Complete			oi	5				0
	6	Receivables from other disqualified persons		_			<b></b>	-		
	ľ	4958(f)(1)) and persons described in section	•				1			
		Part II of Schedule L	4555(0)	(0)(D) Complete	0	6	<u> </u>			
Ω	7	Notes and loans receivable, net		-	0	7				
set		Inventories for sale or use		· -		8	-			<u> </u>
Assets	8			<u> </u>	946	9	<del>                                     </del>			997
_		Propaid expenses and deferred charges	140-1	554 005	940					991
	10a	, , , , ,	10a	551,865			İ			
	b	· · · · · · · · · · · · · · · · ·					ļ			
		Part VI of Schedule D	10b	327,441	281,681		<b></b>		22	4,424
	11	Investments-publicly traded securities		_	0	11				0
	12	Investments-other securities See Part IV, Ign		ļ	O	12	<u>i</u>			Ū
	13	Investments-program-related See Part IV, li	ne 11	_	0	13				0
	14	Intangible assets				14				
	15	Other assets See Part IV, line 11		_	0	15				0
	16	Total assets. Add lines 1 through 15 (must e	equal lin	e 34)	3,450,794	16				7,280
	17	Accounts payable and accrued expenses	89,926	17			5	2,374		
	18	Grants payable				18				
Liabilitie	19	Deferred revenue				19				
	20	Tax-exempt bond liabilities			0	20	L			0
	21	Escrow account liability Complete Part IV of	Schedu	ıle D		21				
	22	Payables to current and former officers, direct	tors, tru	ustees, key						
		employees, highest compensated employees	squalified							
Ξ		persons Complete Part II of Schedule L			01	22				0
	23	Secured mortgages and notes payable to uni	related t	third parties	0	23				0
	24	Unsecured notes and loans payable			0	24				0
	25	Other liabilities Complete Part X of Schedule	D	Γ	0	25				0
	26	Total liabilities. Add lines 17 through 25			89,926	26			5	2,374
<u> </u>		Organizations that follow SFAS 117, chec								
ances		complete lines 27 through 29, and lines 33	and 3	4.						
lan	27	Unrestricted net assets			2,586,841	27			2,64	1,174
Ba	28	Temporarily restricted net assets			774,027	28			56	3,732
פ	29	Permanently restricted net assets				29				
ᆵ		Organizations that do not follow SFAS 117	7. checi	k here ▶☐		•	•			
Net Assets or Fund Bal		and complete lines 30 through 34.	, 55							
ts	20	·	40	ļ-		20				
Se	30	Capital stock or trust principal, or current fund Paid-in or capital surplus, or land, building, or		nont fund		30 31	<del>                                     </del>			
Ä	31	· · · · · · · · · · · · · · · · · · ·			- <u>-</u>		<del> </del>			
let	32	Retained earnings, endowment, accumulated	incom	e, or other tunas	2 202 202	32	-			4 000
~	33	Total net assets or fund balances		• –	3,360,868	33	ļ			4,906
	34	Total liabilities and net assets/fund balances			3,450,794	34			3,25	7,280
Рa	rt XI	Financial Statements and Reporting	<u> </u>							
_			<u>,                                    </u>		. 🗀 👊		_		Yes	No
1		ccounting method used to prepare the Form 99		Cash X Accrua			}-	25		
2		lere the organization's financial statements com		· ·		•	-	2a		<u> </u>
		lere the organization's financial statements aud	-	•			⊢	2b	Х	
(		"Yes" to lines 2a or 2b, does the organization h				ght of	the			
		udit, review, or compilation of its financial stater					ļ_	2c_	Х	
3		As a result of a federal award, was the organization required to undergo an audit or audits as set forth in								
		e Single Audit Act and OMB Circular A-133?							$\sqcup$	X
	o If	f "Yes," did the organization undergo the required audit or audits?  3b								

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

Department of the Treasury

Internal Revenue Service

## **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization Employer identification number The Heat and Warmth Fund 38-2646924 Reason for Public Charity Status (All organizations must complete this part ) (see instructions) Part I The organization is not a private foundation because it is (Please check only one organization) 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) 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II ) 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 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 **b** Type II c Type III-Functionally integrated Type III-Other 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) 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) No Yes and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports h (iii) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vii) Amount of (ii) EIN (i) Name of supported (described on lines 1-9 in col (i) listed in your the organization in omanization in col support organization above or IRC section governing document? col.(i) of your (i) organized in the (see instructions)) support? US? Yes No Yes Yes No 0 O 0 0

Sched	ule A (Form 990 or 990-EZ) 2008 The Heat and V	Varmth Fund				38-2646924	4 Page <b>2</b>
Par	Support Schedule for Organia	zations Desc	ribed in Sect	tions 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.)			
	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and			_			
	membership fees received. (Do not						
	include any "unusual grants")	7,801,598	11,559,293	9,972,073	13,996,177	16,735,656	60,064,797
2	Tax revenues levied for the organization's		, ,				
	benefit and either paid to or expended on			-			
	its behalf	o	ol	o			0
3	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge	l ol	ol	o			0
4	Total Add lines 1-3	7,801,598	11,559,293	9,972,073	13,996,177	16,735,656	60,064,797
5	The portion of total contributions by each			3,3.2,0.3			
	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	l <u></u>		1			60,064,797
	ion B. Total Support	(a) 2004	<b>(b)</b> 2005	(c) 2006			
Cale	ndar year (or fiscal year beginning in) 🕨	(d) 2007	(e) 2008	(f) Total			
7	Amounts from line 4 7,801,598 11,559,293 9,972,073 13,996,1						60,064,797
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
_	sources	5,146	10,004	40,653	31,843	11,091	98,737
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on			ľ			0
10	Other income Do not include gain or		-				
	loss from the sale of capital assets			İ			
	(Explain in Part IV )	ol	o	ol			0
11	Total support. Add lines 7 through 10						60,163,534
12	Gross receipts from related activities, etc. (s	ee instructions	)			12	
13	First five years. If the Form 990 is for the oil	rganization's firs	st, second, thir	d, fourth, or fifth	n tax year as a	section 501(c)	(3)
	organization, check this box and stop here	-			-		▶ 🗌
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2008 (line 6, c		ed by line 11. c	olumn (f))		14	99 84%
15	Public support percentage from 2007 Sched					15	99 84%
16a	33 1/3% support test-2008. If the organizar			ine 13, and line	e 14 is 33 1/3%	or more, check	k this box
	and <b>stop here</b> . The organization qualifies as						<b>▶</b> X
b	33 1/3% support test-2007. If the organizar		-		d line 15 is 33	1/3% or more.	
~	box and <b>stop here</b> . The organization qualifie				10 10 00		<b>▶</b> □
17a	10%-facts-and-circumstances-test-2008.		• • • •		e 13. 16a. or 1	6b, and line 14	ıs 10%
	or more, and if the organization meets the "fa						
	the organization meets the "facts-and-circum						
b	10%-facts-and-circumstances test-2007.						
	or more, and if the organization meets the "fa	•					

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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

18

Par	t III Support Schedule for Organiz (Complete only if you checked the			ion 509(a)(2)					
	tion A. Public Support								
Cald	endar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(a) 2004 0	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	<b>(f)</b> Total 0		
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	0	0	0	_		0		
3	Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on						0		
5	The value of services or facilities furnished by a governmental unit to the	0	0	0			0		
6 7a	organization without charge  Total. Add lines 1-5  Amounts included on lines 1, 2, and 3	0	0	0	. 0	0	0		
b	received from disqualified persons 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						0		
с 8	the year or \$5,000 Add lines 7a and 7b  Public support (Subtract line 7c from	0	0	0	_0	0	0		
Sec	line 6 ) tion B. Total Support	t	<u> </u>	1					
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total		
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans,	0	.0	0	0	0	0		
b	rents, royalties and income from similar sources Unrelated business taxable income (less						0		
C	section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	0	· 0	0	0	0	0		
11	activities not included in line 10b, whether or not the business is regularly carried on						0		
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0			0		
13 14	Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the org	anization's first	, second, third	, fourth, or fifth	tax year as a	section 501(c)(	<u>0</u>		
C	organization, check this box and stop here	Dana 4					▶∟		
	tion C. Computation of Public Support		l h l 42	l (0)	<del> </del>	45	0.000/		
15 <u>16</u> Sec	Public support percentage for 2008 (line 8, co Public support percentage from 2007 Schedultion D. Computation of Investment Inco	ie A, Part IV-A,	line 27g	lumn (f))		15	0 00% 0 00%		
17	Investment income percentage for 2008 (line			e 13, column (f)	))	17	0 00%		
18 19a	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h  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  • •								
ь 20	33 1/3% support tests-2007. If the organization di line 18 is not more than 33 1/3%, check this box ar <b>Private foundation.</b> If the organization did no	nd <b>stop here</b> . Th	e organization q	ualifies as a publ	licly supported o	rganization	<b>▶</b> □		

Schedule A (Form	n 990 or 990-EZ) 2008	The Heat and	Warmth Fund				38-2646924	Page 4
Part IV	n 990 or 990-EZ) 2008 Supplemental	Information.	Complete this	part to provid	e the explana	ation required	by Part II, line	10,
	Part II, line 17a	or 17b; or Pa	rt III, line 12. P	rovide any ot	her additiona	l information. (	see instruction	ıs)
							· · · · · · · · · · · · · · · · · · ·	
·				• • • • • • • • • • • • • • • • • • • •				
								· ·

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

	Cash	Non Cash
1 Federated Campaigns	2,952,856	166,452
2 Membership dues		2
3 Fundraising events	45,000	3
Related organizations		1
5 Government grants (contributions)	8,338,392	5
All other contributions, gifts, grants, and similar amounts not included above		
Utility Company Bill Match	4,984,977	
Other contributions total	4,984,977	<u> </u>
7 Total	16,321,225	166,452

# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047 20**08** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Internal Revenue Service answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Inspection

Impection

Im

Par	t I Organizations Maintaining Dong	or Advised Funds or Other Similar	Funds or Accounts. Complete if
	the organization answered "Yes" t		·
		(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 d	onor advisors in writing that the assets h	eld in donor advised
	funds are the organization's property, subject	it to the organization's exclusive legal co	ontroi? Yes No
6	Did the organization inform all grantees, dor	ors, and donor advisors in writing that g	rant funds may be
	used only for charitable purposes and not fo	r the benefit of the donor or donor advis-	or or other
	impermissible private benefit?		∐ Yes ∐ No
Par	t II Conservation Easements. Comp	lete if the organization answered "Y	es" to Form 990, Part IV, line 7
-:	Purpose(s) of conservation easements held		
•	Preservation of land for public use (e.g.		on of an historically important land area
	Protection of natural habitat	Preservat	ion of certified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization hel	d 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 Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation eas		2b
С	Number of conservation easements on a ce	, ,	<u>2c</u>
d	Number of conservation easements included		
3	Number of conservation easements modified	d, transferred, released, extinguished, oi	terminated by the organization
	during the taxable year		
4	Number of states where property subject to		
5	Does the organization have a written policy		
_	enforcement of the conservation easements		Yes No
6	Staff or volunteer hours devoted to monitoring		
7	Amount of expenses incurred in monitoring,		
8	Does each conservation easement reported	on line 2(d) above satisfy the requirement	
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization re		
	balance sheet, and include, if applicable, the		s inancial statements that describes
Par	the organization's accounting for conservations Maintaining Collection	ons of Art, Historical Treasures, or Ot	har Similar Accate
ı aı	Complete if the organization answered		nei Jillilai A33613.
			· ····
1a	If the organization elected, as permitted und		
	art, historical treasures, or other similar asse		
-	service, provide, in Part XIV, the text of the f		
b	If the organization elected, as permitted und		
	historical treasures, or other similar assets h		search in turtherance of public
	service, provide the following amounts relation	•	
	(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		assets for financial gain, provide the
	following amounts required to be reported ur		
а	Revenues included in Form 990, Part VIII, lir	ne 1	► \$ ► \$
b	Assets included in Form 990, Part X		▶ \$

Par	t III Organizations Maintaining	Collections of	Art, Hi	storical	Treasures,	or Ot	her Similar A	ssets (continued)
3	Using the organization's accession a	and other records.	check a	iny of the	following that	at are a	significant use	e of its collection
	items (check all that apply)	,			· · · · · · · · · · · · · · · · · · ·			
а	Public exhibition		αГ	Loan	or exchange	progra	ams	
b	Scholarly research		e l	Othe	_			
c	Preservation for future genera	tions	_	_				
4	Provide a description of the organiza		and exp	lain how t	thev further t	he ora	anızatıon's exe	mpt purpose in
	Part XIV				,			
5	During the year, did the organization assets to be sold to raise funds rather	er than to be main	ntained a	s part of t	the organizat	ion's c	ollection?	Yes No
Par	Trust, Escrow and Custon Part IV, line 9, or reported a					on ans	swered "Yes"	to Form 990,
1a	Is the organization an agent, trustee					ns or ot	her assets not	
	included on Form 990, Part X?	,		,				Yes No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the	following	table			
	, ,		•	`			1	Amount
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		0
2a	Did the organization include an amo	unt on Form 990	Part X I	ine 212			•	Yes X No
	If "Yes," explain the arrangement in		T GIT X, I	1110 21				res _K rec
Part			non ans	wered "\	es" to Form	n 990	Part IV line	10
- are	Endownent ands. Com	(a) Current year		nor year	(c) Two years		(d) Three years ba	
1a	Beginning of year balance	(4, 2 4 )	,-,-,	,	(0) )		(2)	(9) - 52 - 752 - 522 - 1
b	Contributions			<del></del>				
c	Investment earnings or losses			·	1			
d	Grants or scholarships							
e	Other expenditures for facilities				1			
•	and programs							
f	Administrative expenses		<u> </u>		ļ			
g	End of year balance	0			<del> </del>		<del></del>	+
2	Provide the estimated percentage of		ence hel		<u> </u>			<b>-</b>
a	Board designated or quasi-endowne		%					
b	Permanent endowment	%		2				
c		%						
3a	Are there endowment funds not in th	· <del></del>	he organ	ization th	at are held a	nd adn	ninistered for t	he
•	organization by	o poodecoolori or a	no organ	nzadon di	at are note a	ina aan		Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" to 3a(ıı), are the related orga	nizations listed as	s require	d on Sch	edule R?			3b
4	Describe in Part XIV the intended us		•					
Part						rt X lu	ne 10	··-
	Description of investment	(a) Cost or ot	her basis	(b) Co	st or other		Depreciation	(d) Book value
1a	Land	(investm	ent)	<del></del>	s (other)			0
b	Buildings			<del></del>	0		0	0
C	Leasehold improvements			<del></del>	0		0	0
d	Equipment	<del>                                     </del>			551,865		327,441	224,424
e	Other			<del>†                                      </del>	551,865		327,441	224,424
	I. Add lines 1a-1e (Column (d) should	d equal Form 990		<u> </u>		)	<u>527,441</u>	448,848
			, , , , , ,		= ,,			7.0,040

uncertain tax positions under FIN 48

	Form 990) 2008			Page 3
Part VII	Investments—Other Securiti	es. See Form 990, Part X,	line 12	
	(a) Description of security or	(b) Book value	(c) Method of value	
	category (including name of security)		Cost or end-of-year m	arket value
Financial der	rivatives and other financial products	0		
Closely-he	eld equity interests	0	1	
Other		0		
		1 ^		
		0		
		- 0		•
		- 0		
		- <del></del>	<del></del>	
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		0	<del></del>	
		0		·····
Total. (Column	(b) should equal Form 990, Part X, col (B) line 12)	<b>▶</b> 0		
Part VIII	Investments—Program Rela	t <b>ed.</b> See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year m	
		0		
	·	0	<del></del>	
	·	0		
	.=	0		
		<del></del>		
		0	<del> </del>	
,		0		
		0		
		0		
		0		
		0		
Total (Column	(b) should equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>		
Part IX	Other Assets. See Form 990,	Part X. line 15		
		(a) Description		(b) Book value
			,	0
				0
-			<u> </u>	
				0
_				0
				0
		···		0
				0
				0
				0
				0
Total. (Col	lumn (b) should equal Form 990, Part	X. col. (B) line 15.)	<b>&gt;</b>	0
Part X	Other Liabilities. See Form 9			<u> </u>
TartA	· · · · · · · · · · · · · · · · ·			
E. de est	(a) Description of liability	(b) Amount	<del>_</del>	
Federal inc	come taxes	<del></del>	_0	
			<u> </u>	
	<del></del>		_0	
			<u> </u>	
			0	
	<del> </del>		ol	
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		<del>  -</del>	0	
			_0	
Total. (Column (	(b) should equal Form 990, Part X, col. (B) line 25.)	<u> </u>	0	
In Part YIV	nrovide the text of the footnote to the	organization's financial state	ments that reports the organizat	ion's liability for

_	lule D (Form 990) 2008				Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 99	0 to Fi	nancial Statem	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	17,169,934
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	17,325,896
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	<u>-155,9</u> 62
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	<del> </del>
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	155.000
10 Por	Excess or (deficit) for the year per financial statements. Combine lines 3		Mith Boyonu	10     Dor Bo	-155,962
1	Total revenue, gains, and other support per audited financial statements		WILLI Kevellu	1	16,746,747
2	Amounts included on line 1 but not on Form 990, Paπ Viii, iine 12	•			10,740,747
a	Net unrealized gains on investments	2a	1		
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			2ē	!
3	Subtract line 2e from line 1			3	16,746,747
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
ь	Other (Describe in Part XIV)	4b	166,	452	
С	Add lines 4a and 4b		•	4c	166,452
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I,	line 12.	)	5	16,913,199
Par	t XIII Reconciliation of Expenses per Audited Financial Sta			ses per l	Return
1	Total expenses and losses per audited financial statements			1	17,069,161
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Pnor year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	<u> </u>		
е	Add lines 2a through 2d			2e	<u> </u>
3	Subtract line 2e from line 1	1	1	3	17,069,161
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	L		_
C	Add lines 4a and 4b			4c	17.000.404
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information	I, line 18	3)	5	17,069,161
Com and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XII Line 4b In-kind non cash support			i 4, Part I	V, lines 1b
				<b>-</b>	

	The Heat and Warmth Fund		38-2646924
Schedule D (Form	990) 2008		Page 5
Part XIV	Supplemental Information	(continued)	
	· · · · · · · · · · · · · · · · · · ·		
		•••••	
		•	

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization					Employer identification number		
The Heat and Warmth Fund					38-2646924		
Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17							
1 Indicate whether the organization rai	sed funds throu			-	· · ·		
a Mail solicitations		=		of non-government	=		
<b>b</b> Email solicitations		=		of government grar	nts		
c Phone solicitations		g 📙 S	pecial fund	draising events			
d In-person solicitations							
2a Did the organization have a written or or key employees listed in Form 990						Yes No	
b If "Yes," list the ten highest paid individue to be compensated at least \$5,000 b							
(i) Name of individual or enuty (fundralser)	(ii) Activity	custody o	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization	
		Yes	No		col (ı)		
		162	140				
				0	0	0	
				0	0	0	
				0	0	0	
·				0	0	0	
				0	0	0	
				0	_ 0	0	
				. 0	0	0	
				0	0	0	
				0	0	0	
				0	0	0	
Tetal							
Total  3 List all states in which the organization registration or licensing	on is registered	or license	d to solicit	funds or has been	0  notified it is exempt	t from	
•							
	•	•					

Schedule G (Form 990 or 990-EZ) 2008
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_Pa	rt II	_	-	inization answered "Ye: 5a  List events with gros			or repo	rted
		more than \$15,000	(a) Event #1  Warm Hearts Dinneri  (event type)	(b) Event #2 <u>3r Survival Radiothon</u> (event type)	(c) Other Events  NONE  (total number)	(d) Tot (Add col	tal Events (a) throu	
Revenue	1	Gross receipts	177,383	538,783	0	)	71	6,166
Re	3	Less Charitable contributions Gross revenue (line 1	0	o	0	,		0
		minus line 2)	177,383	538,783	0	<u> </u>	71	6,166
	4	Cash prizes	0	0	0		<del></del>	0
Direct Expenses	5	Non-cash prizes	0	0	0	1		0
# Exp	6	Rent/facility costs	0	0	0			0
) je	7	Other direct expenses	55,461	201,274	0		25	6,735
	8 9	Direct expense summary Net income summary Cor	_	• •	<b>.</b>			5 <u>,735)</u> 59,431
Pai	ŧЩ	Gaming. Complete	if the organization answ	wered "Yes" to Form 99	90, Part IV, line 19, or r	eported m		<u> </u>
		than \$15,000 on Fo		#35 notes	4.100			
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total ( col (a) the		
Rev	1_	Gross revenue						0
Direct Expenses	2	Cash prizes						0
	3	Non-cash prizes						0
lrect [	4	Rent/facility costs						0
	5	Other direct expenses						0
	6	Volunteer labor	Yes%	Yes% No	Yes%			
	7	Direct expense summary	Add lines 2 through 5 in c	column (d)	•	(		0)
	8	Net gaming income summ	ary Combine lines 1 and	7 ın column (d)	<b></b>	l <u></u>	, ,	0
9	Ér	iter the state(s) in which the	e organization operates da	aming activities			Yes	No
a b	Is	the organization licensed to 'No," Explain				9a		
10a b		ere any of the organization's 'Yes," Explain			ed during the tax year?	10a		
				· • • • • • • • • • • • • • • • • • • •				
11 12		es the organization operate the organization a grantor, l			artnership or other ortific	11_	$\vdash$	
12		the organization a grantor, i med to administer charitabl		i ilusi or a member or a pa	armership or other entity	12		

			Yes	No	
13	Indicate the percentage of gaming activity operated in				
а	The organization's facility 13a %				
b	An outside facility 13b %	]			
14	Provide the name and address of the person who prepares the organization's gaming/special events books	1			
•	and records				
	Nomo N				
	Name ▶				
	Addraga				
	Address ►				
45-	Does the expension have a contract with a third party from whom the expension recourse gaming				
ıba	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a			
	if "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	134	===		
D					
	amount of gaming revenue retained by the third party ▶ \$				
С	If "Yes," enter name and address				
		1			
	Name ▶	i			
	Address •				
16	Gaming manager information				
		1			
	Name ▶	1			
				1	
	Gaming manager compensation ► \$ 0		,		
	Description of services provided			!	
	Director/officer Employee Independent contractor	1			
				:	
17	Mandatory distributions				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			j	
_	retain the state gaming license?	17a			
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent				
	in the organization's own exempt activities during the tax year ▶\$			1	

SCHEDULE (Form 990)

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

OMB No 1545-0047

ž Open to Publ Inspection (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if 110 one recipient received more than \$5,000. Use X Yes Employer identification number Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance 38-2646924 (i) Method of valuation (look, FMV, appraisal, Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (e) Amount of non-cash assistance ▶ Attach to Form 990. 0 0 (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed. Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance the selection criteria used to award the grants or assistance? (c) IRC section if applicable Enter total number of other organizations (P) EIN 1 (a) Name and address of organization he Heat and Warmth Fund or government Department of the Treasury Name of the organization Internal Revenue Service Part II Part I

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

Schedule I (Form 990) 2008

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(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valua ion (book, FMV, appraisal, other) Part III All energy bill assistance payments are made directly to the utility vendor 0 0 (d) Amount of non-cash assistance O 14,772,776 (c) Amount of cash grant Use Schedule I-1 (Form 990) if additional space is needed. 0 11,776 (b) Number of recipients (a) Type of grant or assistance Utility assistance Part III Part IV

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

## **Transactions With Interested Persons**

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

To be completed by organizations that answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

Name of the o			or ronn s	90-EZ, Part	V, line 30a	or 400.		E	nployer	dentific	cation r	umber	_
The Heat a	nd Warmth Fund				_			38	-26469	924			
Part I	Excess Benefit Transactio To be completed by organizatio									EZ, Par	t V, lin	e 40b	
												(c) Cor	rected?
1	(a) Name of disqualified person			(b) Description of transaction						Yes	No		
			-										
						<u>.</u>							L
	r the amount of tax imposed or r section 4958	the orga	anızatıon	manager	rs or disqu	ualified perso	ns dur	ing the	e year	•	\$		
3 Ente	r the amount of tax, if any, on I	ine 2, abi	ove, rein	nbursed b	y the orga	anızatıon				•	\$		
												-	
Part li	Loans to and/or From in To be completed by organization				rm 990, Pa	rt IV, line 26,	or Form	990-E	Z, Part	V, line	38a.		
(a) Name	e of interested person and purpose	(b) Loan	to or from	(c) O	ngınal	(d) Balance	due	(e) In (	lefault?	(f) App	oroved	(g) ∨	√ntten
		the orga	inization?	pnncipa	amount						ard or	agree	ment?
		<u> </u>								committee?		<del>                                     </del>	
		To From						Yes No		Yes No		Yes No	
		<u> </u>	0			0							
		<b>-</b>	0 0			<u> </u>							
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	_ <del></del> _	- ∔	ļ		0		0		ļ	_	ļ. —		
Tatal					0		<u> </u>		<u> </u>		l		
Total Part III	Grants or Assistance Be	nefittin	a Inter	ested Pa	reone					i		<u></u>	-
r art III	To be completed by organiza		_			990 Part IV	line 2	7					
	) Name of interested person			p between in			T		unt of a	rant or ty	ne of a	ssistance	
,,	, wante of interested person	",	(C)GGOTIONI	organiza	-	son and the		(0) /	J. 11 J.		po 0. a.		•
		1											
	·					·							
		ļ											
Part IV	Business Transactions To be completed by organize					99 <u>0,</u> Part IV	Ine 28	8a, 28	b, or 2	8c_			
(a	) Name of interested person	1 7 7	elationship sted persoi organizati	n and the		mount of	(d)	) Descn	ption of	transacti	on	organi	aring of zation's nues?
			Jigainzau	<b>0</b> 11								Yes	No
Magnum Ev	vents	Busine	ss owne	r is the sp		72 801	Event	mana	gemer	nt servi	ces	163	X
magnum E	CITES	1503116	00 011.10	<u></u>		, <u>2,501</u>	Event management services						<del>- ^ -</del>

0000

## SCHEDULE M (Fòrm 990)

## **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

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

<u>The H</u>	leat and Warmth Fund			[38-264	<u> 5924 </u>			
Part I	Types of Property							
	•	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Met	(d) hod of de reven	eterminin	ıg
1	Art—Works of art			, <u>, , , , , , , , , , , , , , , , , , </u>				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications			<del></del>				
5	Clothing and household							
	gooas	 						
6	Cars and other vehicles			-				
7	Boats and planes		· <del>-</del>	_				
8	Intellectual property							
9	Securities—Publicly traded							
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	<u> </u>						
18	Collectibles			<u> </u>	┵			
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy				<b></b>			
22	Historical artifacts							
23	Scientific specimens				<del> </del>			
24	Archeological artifacts				<del></del>			
25	Other ► (Printing and post)	Х	2		2 Actual c	ost		
26	Other • ()		0		0			
27	Other • ()		0		<u> </u>			
28	Other ► ()		0		0			
29	Number of Forms 8283 received	by the or	ganization during the tax yea	ar for contributions for				
	which the organization complete				29			
							Yes	No
30 a	During the year, did the organiza	ation recei	ve by contribution any prope	rty reported in Part I, lines	1–28			
	that it must hold for at least three	e years fro	m the date of the initial conti	ribution, and which is not				
	required to be used for exempt p	urposes f	or the entire holding period?			30a		Х
b	If "Yes," describe the arrangeme	nt in Part	H					
31	Does the organization have a gif	t acceptar	nce policy that requires the re	eview of any non-standard				
	contributions?					31	Х	
32 a	Does the organization hire or use	e third par	ties or related organizations	to solicit, process, or sell				
	noncash contributions?					32		Х
b	If "Yes," describe in Part II							
33	If the organization did not report	revenues	in column (c) for a type of pr	roperty for which column (a	) is			1
	checked, describe in Part II						1 1	l

The Heat and Warmth Fund

38-2646924

Schedule M (F	orm 990) 2008 Page 2
Part II	<b>Supplemental Information</b> . Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
•••••	
••••	
	•••••••••••••••••••••••••••••••••••••••
	•••••••••••••••••••••••••••••••••••••••

## SCHEDULE O (Form 990)

## 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

Department of the Treasury Internal Revenue Service Name of the organization

The Heat and Warmth Fund

Employer identification number

38-2646924

Form 990 Part VI Section A Line 4 By-laws were revised to include new procedures regarding hiring and dismissal of a CEO Form 990 Part VI Section A Line 4 Financial charter was expanded to include additional responsibilities of the committee Form 990 Part VI Section A Line 10 990 is first reviewed by CPA, then Finance Committee and finally reviewed by the full board Form 990 Part VI Section B Line 12c All board members are regularly instructed to report and fill out form if necessary Form 990 Part VI Section B Line 15 a/b All salaries are researched using comparable industry data and subject to board approval Form 990 Part VI Section C Line 19 990 and financial statements are available on our website, Guidestar and Charity Navigator Form 990 Part VI Section C Line 19 990 and financial statements are also available by request through phone, fox, small, or post

Part IX, Line 22 (990) - Depreciation, Depletion, etc.

	IX = 1110 == (000) = 0 proceedings, proprieting				
		109,048	0	109,048	0
	j	(A)	(B)	(C)	(D)
ļ		Total	Program	Management	Fundraising
	Description		services	and general	•
1	Depreciation	109,048		109,048	
2		0			
3		0			,,,.
4		0			
5		0			
6					
7		0			
8		0	<del></del>		
9					
10		0			
11		0			
12		Û		i i	-
13		0		<u> </u>	
14		0			•
15		0	<del></del> -		
16		0			
17		0			
16		0			
19		ō			
20		0			
	J				

Part X, Line 3 (990) - Pledges and Grants Receivable

•		Pledges and grant	s receivable	Allowance for doub	ful accounts
		Beginning	End	Beginning	End
1 Pledge Receivable	1 [	46,824	542,554	17,700	32,758
2	2 [				
3	3 [				
4	4 [				
5	5		•		
·····	6				
,	<sub>7</sub>				
}	8 h				
)	9				
0	10				
1	11	<del>-  -  </del>			
12 Total pledges and grants receivable	12	46,824	542,554	17,700	32,758

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

								541,865	219,099	327,441	0	281,681	224,424
			Leasehold			Check if	Check If		Beginning	Ending			•
			Improve-			Investment	Asset	Cost/Cither	Accumulated	Accumulated	Disposals/	Beginning	Ending
Category or Item	Land	Buildings	ments	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	Adjustments	Balance	Balance
1 Office equipment and web-based system				×	×			54,1,865	219,096	327,441		281,681	224,424
2													0
8								0	0			0	0
4								0	0			0	0
2								0	0			0	0
9								0	0			0	0
1								0	0			0	0
8								0	0			0	0
6								0	0			0	0
10								0	0			0	0
11								0	0			0	0
12								0	0			0	0
13								0	0			0	0
14								0	0			0	0
15								0	0			0	0
16								0	0			0	0
44								0	0			0	0
-18								0	0			0	0
19								0	0			0	0
20								0	0			0	0

Part II (Sch G (990/990EZ)) - Events	716,166	0	716,166	0	0	0	256,735
	Line 1	Line 2	Line 3	Line 4	Line 5	Line 6	Line 7 ¢
			Gross Revenue	•			
		(Charitable	(line 1 minus	-	Non-cash	Rent/Facility	Other direct
Event Type	Gross Receipts	contributions)	line 2)	Cash Prizes	Prizes	costs	expenses
1 Night of Warm Hearts Dinner/Auction	177,383		177,383				55,461
2 WWJ Winter Survival Radiothon for THAW	538,783		538,783				201,274
3			0				
7			0				
9			0				
9			0				
7			0				
8			0				
6			0				
10			0				
11			0				
12			0				
13			0				
14			0				
15			0				
16			0				
17			0				
18			0				
19			0				
20			0				

Part I, Lines 25-28 (Sch M (990)) - Other Types of Property

	-,		, , , , , , , ,	- · · · - p - · · · y	
	Non-Cash		Number of	Revenues Reported	Method of Determining
	Contribution	Description	Contributions	on 990, Pt VIII, Line 1g	Revenues
1	X	Printing and postage costs	2	166,452	Actual cost
2	-				
3					
4					
5					
6					
7					
8			<u> </u>		
9			1		
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					-
20					

Part VI, Line 17 (990) - States with Which a Copy of this Form 990 is Required to be Filed

		i	 1
Armed Forces the Americas		Louisiana	 Palau
Armed Forces Europe		Massachusetts	Rhode Island
Alaska		Maryland	South Carolina
Alabama		Maine	South Dakota
Armed Forces Pacific		Marshall Islands	Tennessee
Arkansas	X	Michigan	Texas
American Samoa		Minnesota	Utah
Arızona		Missouri	Virginia
California		Commonwealth of the Northern Mariana Islands	U.S. Virgin Islands
Colorado		Mississippi	Vermont
Connecticut		Montana	Washington
District of Columbia		North Carolina	Wisconsin
Delaware		North Dakota	West Virginia
Florida		Nebraska	Wyoming
Federated States of Micronesia		New Hampshire	
Georgia		New Jersey	
Guam		New Mexico	
Hawaii		Nevada	
lowa		New York	
Idaho		Ohio	
Illinois		Oklahoma	
Indiana		Oregon	
Kansas		Pennsylvania	
Kentucky		Puerto Rico	
 -			