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

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

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

OMB No 1545-0047

2008**Open to Public Inspection**

A For the 2008 calendar year, or tax year beginning 7/1/2008 , and ending 6/30/2009													
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; vertical-align: top;"> Please use IRS label or print or type. See Specific Instructions. </td> <td style="width:55%;"> C Name of organization NEW VISTAS Doing Business As _____ Number and street (or P O box if mail is not delivered to street address) Room/suite 1205 PARKWAY DRIVE A City or town, state or country, and ZIP + 4 SANTA FE NM 87507 </td> <td style="width:30%;"> D Employer identification number 85-0216702 E Telephone number (505) 471-1001 G Gross receipts \$ 2,830,443 </td> </tr> <tr> <td colspan="3"> F Name and address of principal officer RONALD I GARCIA 1205 PARKWAY DRIVE, SUITE A, SANTA FE, NM </td> </tr> <tr> <td colspan="3"> I Tax-exempt status ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 J Website: ▶ NEWVISTAS.ORG K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ _____ L Year of formation 1971 M State of legal domicile NM </td> </tr> <tr> <td colspan="3"> H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☒ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶ 9999 </td> </tr> </table>	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NEW VISTAS Doing Business As _____ Number and street (or P O box if mail is not delivered to street address) Room/suite 1205 PARKWAY DRIVE A City or town, state or country, and ZIP + 4 SANTA FE NM 87507	D Employer identification number 85-0216702 E Telephone number (505) 471-1001 G Gross receipts \$ 2,830,443	F Name and address of principal officer RONALD I GARCIA 1205 PARKWAY DRIVE, SUITE A, SANTA FE, NM			I Tax-exempt status ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 J Website: ▶ NEWVISTAS.ORG K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ _____ L Year of formation 1971 M State of legal domicile NM			H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☒ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶ 9999		
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Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities NEW VISTAS PARTNERS WITH AND SUPPORTS PEOPLE WITH DISABILITIES AND FAMILIES OF CHILDREN WITH SPECIAL NEEDS TO ENRICH THEIR QUALITY OF LIFE IN MEXICO.																									
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.																									
	3 Number of voting members of the governing body (Part VI, line 1a)	3 7																								
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 7																								
	5 Total number of employees (Part V, line 2a)	5 57																								
	6 Total number of volunteers (estimate if necessary)	6 0																								
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a 0																								
	b Net unrelated business taxable income from Form 990-T, line 34	7b 0																								
Revenue	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: right;">Prior Year</th> <th style="text-align: right;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">2,581,033</td> <td style="text-align: right;">2,666,609</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">165,388</td> <td style="text-align: right;">148,957</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">14,245</td> <td style="text-align: right;">7,977</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">9,809</td> <td style="text-align: right;">6,515</td> </tr> <tr> <td>12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">2,770,475</td> <td style="text-align: right;">2,830,058</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	2,581,033	2,666,609	9 Program service revenue (Part VIII, line 2g)	165,388	148,957	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14,245	7,977	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,809	6,515	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,770,475	2,830,058							
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here		Date 2/11/2010		
	Signature of officer RONALD GARCIA Type or print name and title	EXECUTIVE DIRECTOR		
Paid Preparer's Use Only	Preparer's signature 	Date 2/11/2010	Check if self-employed ☐	Preparer's identifying number (see instructions) P00447128
	Firm's name (or yours if self-employed), address, and ZIP + 4 LAWRENCE CORNELIUS, CPA, P C. P O BOX 90039, ALBUQUERQUE, NM 87199-0039	EIN ▶ 85-0472109	Phone no ▶ (505) 823-4560	

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

☒ Yes ☐ No

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

Form **990** (2008)

(HTA)

Part III Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

NEW VISTAS PARTNERS WITH AND SUPPORTS PEOPLE WITH DISABILITIES AND FAMILIES OF CHILDREN WITH SPECIAL NEEDS TO ENRICH THEIR QUALITY OF LIFE IN NEW MEXICO

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code:) (Expenses \$ 2,380,755 including grants of \$ 0) (Revenue \$ 0)

ALL EXPENSES ARE INCURRED IN NEW VISTAS PROGRAMS THAT PROVIDE SERVICES AND SUPPORT TO PEOPLE WITH DISABILITIES AND FAMILIES WITH CHILDREN WITH SPECIAL NEEDS

4b (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4c (Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4d Other program services (Describe in Schedule O)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ► \$ 2,380,755 (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		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		
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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		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	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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		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		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		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		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		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J		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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
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		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		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		X

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	1a	38
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 gaming (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.	2a	57
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	2b	X
3a	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	
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?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	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	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	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	

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

Section A. Governing Body and Management

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

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13.	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	X	
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers or key employees of the organization?	X	
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?		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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **► NM**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☒ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **► RONALD GARCIA (505) 471-1001**
1205 PARKWAY DR, STE A, SANTA FE, NM 875076201

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LIBBY GONZALES MEMBER	1	X						0	0	0
EVE MUNSON V PRES	1	X		X				0	0	0
KRIS WINTEROWD PRESIDENT	2	X		X				0	0	0
WILLIAM MOFFETT SEC/TREAS	1	X		X				0	0	0
VICTOR ORTEGA MEMBER	1	X						0	0	0
CHARLOTTE WHITED MEMBER	1	X						0	0	0
DAVID WOODARD MEMBER	1	X						0	0	0
MARGARITA ANAYA HR MGR	40				X			52,858	0	0
RANDINE HUGHES ADMIN DIR	40				X			67,692	0	0
MARGARET GERETY PROG COORD	40				X			73,734	0	0
RONALD GARCIA EXEC DIR	40					X		127,731	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

Part VII

1b Total:

2

3

4

5

Yes	No
	X
	X
	X

Section B. Independent Contractors

1

2	Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization	0
---	---	---

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 0				
	b	Membership dues	1b 0				
	c	Fundraising events	1c 0				
	d	Related organizations	1d 0				
	e	Government grants (contributions)	1e 2,589,416				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 77,193				
	g	Noncash contributions included in lines 1a-1f \$	0				
	h	Total. Add lines 1a-1f		2,666,609			
Program Service Revenue	2a	PRODUCTION INCOME	Business Code 323100	148,957			
	b			0			
	c			0			
	d			0			
	e			0			
	f	All other program service revenue		0			
	g	Total. Add lines 2a-2f		148,957			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		8,362	8,362	
4		Income from investment of tax-exempt bond proceeds		0			
5		Royalties		0			
6a		Gross Rents	(i) Real (ii) Personal				
b		Less: rental expenses					
c		Rental income or (loss)	0 0				
d		Net rental income or (loss)		0			
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	0 0			
b		Less: cost or other basis and sales expenses		0 385			
c		Gain or (loss)	0 -385				
d		Net gain or (loss)		-385			
8a		Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18		0			
b		Less: direct expenses		0			
c		Net income or (loss) from fundraising events		0			
9a		Gross income from gaming activities. See Part IV, line 19		0			
b		Less: direct expenses		0			
c		Net income or (loss) from gaming activities		0			
10a		Gross sales of inventory, less returns and allowances		0			
b		Less: cost of goods sold		0			
c		Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue			Business Code				
11a		MISCELLANEOUS		6,515	6,515		
b			0				
c			0				
d	All other revenue		0				
e	Total. Add lines 11a-11d		6,515				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2,830,058	14,877	0	0	

Part IX Statement of Functional Expenses**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.****All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
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, trustees, and key employees	264,251	73,734	190,517	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	1,044,260	1,023,669	20,591	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	49,793	36,550	13,243	0
9	Other employee benefits	71,808	61,217	10,591	0
10	Payroll taxes	132,141	111,715	20,426	0
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	0	0	0	0
c	Accounting	13,745	0	13,745	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	82,046	76,549	5,497	0
12	Advertising and promotion	9,365	8,026	1,339	0
13	Office expenses	16,491	12,269	4,222	0
14	Information technology	15,939	11,557	4,382	0
15	Royalties	0	0	0	0
16	Occupancy	155,680	112,070	43,610	0
17	Travel	85,508	76,666	8,842	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	20,423	0	20,423	0
23	Insurance	14,804	9,552	5,252	0
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	VEHICLE EXPENSE	4,002	4,002	0	0
b	THERAPISTS	697,386	697,386	0	0
c	REASONABLE ACCOMMODATIONS	4,697	4,697	0	0
d	EQUIPMENT MAINTENANCE & LEASES	25,339	20,479	4,860	0
e	TELEPHONE	39,283	34,651	4,632	0
f	All other expenses	18,463	5,966	12,497	0
25	Total functional expenses. Add lines 1 through 24f	2,765,424	2,380,755	384,669	0
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 solicitation.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	-5,109	1	37,423
	2 Savings and temporary cash investments	321,888	2	370,491
	3 Pledges and grants receivable, net	201,842	3	270,490
	4 Accounts receivable, net	33,350	4	12,528
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	16,236	9	19,100
	10a Land, buildings, and equipment: cost basis	239,791		
	b Less accumulated depreciation. Complete Part VI of Schedule D	191,051		
		59,853	10c	48,740
	11 Investments—publicly traded securities	214,057	11	154,499
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 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 equal line 34)	842,117	16	913,271	
Liabilities	17 Accounts payable and accrued expenses	195,635	17	238,158
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable	0	24	0
	25 Other liabilities. Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	195,635	26	238,158
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	620,732	27	645,113
	28 Temporarily restricted net assets	25,750	28	30,000
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	646,482	33	675,113
	34 Total liabilities and net assets/fund balances.	842,117	34	913,271

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b	If "Yes," did the organization undergo the required audit or audits?	X	

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

NEW VISTAS

Employer identification number

85-0216702

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

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

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

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

h Provide the following information about the organizations the organization supports

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col.(i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
									0
									0
									0
									0
									0
									0
Total									0

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,079,054	2,467,420	2,716,120	2,581,033	2,666,609	12,510,236
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0		0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	55,452	55,452	55,452	55,452	55,452	277,260
4 Total. Add lines 1-3	2,134,506	2,522,872	2,771,572	2,636,485	2,722,061	12,787,496
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						12,787,496

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	2,134,506	2,522,872	2,771,572	2,636,485	2,722,061	12,787,496
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,184	15,436	16,862	14,245	8,362	62,089
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	98,332	129,189	152,809	175,197	155,472	710,999
11 Total support. Add lines 7 through 10						13,560,584

12 Gross receipts from related activities, etc. (see instructions) **12****13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	94 30%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f.	15	94 20%
16a 33 1/3% support test-2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization. ▶ ☒		
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

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	0	0	0			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						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0			0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0			0
6 Total. Add lines 1-5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business 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 Total support. (Add lines 9, 10c, 11, and 12.)						0

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	0.00%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	0.00%

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 . . . ☐

Part IV

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

Part II Line 10 PROGRAM SERVICE INCOME AND OTHER INCOME

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

NEW VISTAS

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Employer identification number

85-0216702

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

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

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

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

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically important land area

☐ Protection of natural habitat ☐ Preservation of certified historic structure

☐ Preservation of open space

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

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

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

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

- 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a ☐ Public exhibition d ☐ Loan or exchange programs
- b ☐ Scholarly research e ☐ Other
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIV and complete the following table
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f 0 |
- 2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☒ No
- b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0				

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

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

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

- (i) unrelated organizations
- (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	48,449	43,897	4,552
d Equipment	0	176,357	133,169	43,188
e Other	0	14,985	13,985	1,000
Total. Add lines 1a–1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c))				48,740

Part VII Investments—Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products	0	
Closely-held equity interests	0	
Other	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12)	0	

Part VIII Investments—Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13)	0	

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15)	0

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25)	0

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,830,058
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,765,424
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	64,634
4	Net unrealized gains (losses) on investments	4	-36,003
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	-36,003
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	28,631

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

1	Total revenue, gains, and other support per audited financial statements	1	2,849,507
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-36,003
b	Donated services and use of facilities	2b	55,452
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	19,449
3	Subtract line 2e from line 1	3	2,830,058
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,830,058

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

1	Total expenses and losses per audited financial statements	1	2,820,876
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	55,452
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	55,452
3	Subtract line 2e from line 1	3	2,765,424
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	2,765,424

Part XIV Supplemental Information

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

Part XIV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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**

NEW VISTAS

Employer identification number

85-0216702

Form 990 Part VI Section B Line 10 PRIOR TO FILING THE 990 WAS EMAILED TO EACH BOARD MEMBER FOR HIS REVIEW MEMBERS WERE ASKED TO CALL THE EXECUTIVE DIRECTOR IF THEY HAD ANY QUESTIONS OR COMMENTS AND TO NOTE THEIR APPROVAL OF THE RETURN.

Form 990 Part VI Section B Line 12C NEW VISTAS REVIEWS THE POTENTIAL OF CONFLICTS OF INTEREST PER POLICY AT BOARD MEETINGS EVERY OTHER MONTH AND AT MANAGEMENT TEAM MEETINGS EACH MONTH DISCUSSION OF AND DISCLOSURE OF THE DIRECT CONFLICT OF INTEREST WOULD APPEAR IN MINUTES OF THE BOARD MEETING AND MEETING NOTES OF THE MANAGEMENT TEAM MEETING IF NO CONFLICT OF INTEREST WAS DETERMINED, THEN THAT, TOO, WOULD BE DOCUMENTED IN THE SAME WAY.

Form 990 Part VI Section B Line 15B NEW VISTAS ESTABLISHES WAGES THROUGH A PROCESS THAT CONSIDERS THE EDUCATION AND EXPERIENCE QUALIFICATIONS OF EACH POSITION AS DESCRIBED IN THE JOB DESCRIPTION, THE CURRENT AVERAGE MARKET WAGE FOR THE POSITION, AND NEW VISTAS ABILITY TO PAY MARKET VALUE BASED ON REVENUE RESOURCES NEW VISTAS EXECUTIVE DIRECTOR AND HUMAN RESOURCES MANAGER SHALL REVIEW MARKET SURVEYS THAT RELATE TO ALL OF NEW VISTAS PAID POSITIONS. NEW VISTAS RESERVES THE RIGHT TO LEAD, LAG OR MATCH ITS WAGES COMPARED TO THE MARKET SURVEY AVERAGE WAGE FOR ANY OF ITS PAID POSITIONS. THE BOARD ESTABLISHES THE WAGE FOR THE EXECUTIVE DIRECTOR

Form 990 Part VI Section B Line 19 NEW VISTAS IS A PRIVATE 501(C)3 NON-PROFIT AND COMMUNITY BASED ORGANIZATION. BY VIRTUE OF THE FACT THAT OUR BOARD OF DIRECTORS IS COMPRISED OF COMMUNITY MEMBERS WHO ARE ENTRUSTED WITH THE GOVERNING DOCUMENTS, CONFLICTS OF INTEREST, AND FINANCIAL

STATEMENTS, THIS IN GREAT PART IS OUR MOST READILY AVAILABLE

Name of the organization

Employer identification number

NEW VISTAS

85-0216702

DISCLOSURE TO THE PUBLIC. NEW VISTAS DISCLOSES ITS FINANCIAL
SITUATION AND GOVERNANCE VIA THE 990 WHICH IS PUBLISHED THROUGH
THE ATTORNEY GENERAL'S OFFICE OF NEW MEXICO AND IS POSTED IN
GUIDE STAR FOR PUBLIC VIEWING. NEW VISTAS ALSO MAINTAINS A COPY OF
OUR 990 IN OUR MAIN OFFICE AND IT IS AVAILABLE UPON REQUEST. NEW
VISTAS ALSO POSTS ITS ANNUAL FEDERAL 704 REPORT ON OUR WEBSITE.

(Sch O (990)) - Supplemental Information

	Form	Part	Section	Line	Explanation
1	990	VI	B	10	PRIOR TO FILING THE 990 WAS EMAILED TO EACH BOARD MEMBER FOR HIS
2					REVIEW MEMBERS WERE ASKED TO CALL THE EXECUTIVE DIRECTOR IF
3					THEY HAD ANY QUESTIONS OR COMMENTS AND TO NOTE THEIR APPROVAL
4					OF THE RETURN
5	990	VI	B	12C	NEW VISTAS REVIEWS THE POTENTIAL OF CONFLICTS OF INTEREST PER
6					POLICY AT BOARD MEETINGS EVERY OTHER MONTH AND AT MANAGEMENT
7					TEAM MEETINGS EACH MONTH DISCUSSION OF AND DISCLOSURE OF THE
8					DIRECT CONFLICT OF INTEREST WOULD APPEAR IN MINUTES OF THE BOARD
9					MEETING AND MEETING NOTES OF THE MANAGEMENT TEAM MEETING IF NO
10					CONFLICT OF INTEREST WAS DETERMINED, THEN THAT, TOO, WOULD BE
11					DOCUMENTED IN THE SAME WAY
12	990	VI	B	15B	NEW VISTAS ESTABLISHES WAGES THROUGH A PROCESS THAT CONSIDERS
13					THE EDUCATION AND EXPERIENCE QUALIFICATIONS OF EACH POSITION AS
14					DESCRIBED IN THE JOB DESCRIPTION, THE CURRENT AVERAGE MARKET
15					WAGE FOR THE POSITION, AND NEW VISTAS ABILITY TO PAY MARKET VALUE
16					BASED ON REVENUE RESOURCES NEW VISTAS EXECUTIVE DIRECTOR AND
17					HUMAN RESOURCES MANAGER SHALL REVIEW MARKET SURVEYS THAT RELATE
18					TO ALL OF NEW VISTAS PAID POSITIONS NEW VISTAS RESERVES THE RIGHT
19					TO LEAD, LAG OR MATCH ITS WAGES COMPARED TO THE MARKET SURVEY
20					AVERAGE WAGE FOR ANY OF ITS PAID POSITIONS THE BOARD ESTABLISHES
21					THE WAGE FOR THE EXECUTIVE DIRECTOR
22	990	VI	B	19	NEW VISTAS IS A PRIVATE 501(C)3 NON-PROFIT AND COMMUNITY BASED
23					ORGANIZATION BY VIRTUE OF THE FACT THAT OUR BOARD OF DIRECTORS
24					IS COMPRISED OF COMMUNITY MEMBERS WHO ARE ENTRUSTED WITH THE
25					GOVERNING DOCUMENTS, CONFLICTS OF INTEREST, AND FINANCIAL
26					STATEMENTS, THIS IN GREAT PART IS OUR MOST READILY AVAILABLE
27					DISCLOSURE TO THE PUBLIC NEW VISTAS DISCLOSES ITS FINANCIAL
28					SITUATION AND GOVERNANCE VIA THE 990 WHICH IS PUBLISHED THROUGH
29					THE ATTORNEY GENERAL'S OFFICE OF NEW MEXICO AND IS POSTED IN
30					GUIDE STAR FOR PUBLIC VIEWING NEW VISTAS ALSO MAINTAINS A COPY OF
31					OUR 990 IN OUR MAIN OFFICE AND IT IS AVAILABLE UPON REQUEST NEW
32					VISTAS ALSO POSTS ITS ANNUAL FEDERAL 704 REPORT ON OUR WEBSITE
33					

Form **4797**Department of the Treasury
Internal Revenue Service
(99)**Sales of Business Property****(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))**▶ **Attach to your tax return.** ▶ **See separate instructions.**

OMB No 1545-0184

2008

Attachment

Sequence No **27**

Name(s) shown on return

NEW VISTAS

Identifying number

85-0216702

1 Enter the gross proceeds from sales or exchanges reported to you for 2008 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)**1****Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)**

(a) Description of property	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2 HP NX6110 NT	9/27/2006	5/6/2009	0	564	949	-385
IBM THINK PAD	6/1/2004	5/6/2009	0	925	925	0
IBM THINK PAD	6/1/2004	5/6/2009	0	925	925	0

3 Gain, if any, from Form 4684, line 45**3****4** Section 1231 gain from installment sales from Form 6252, line 26 or 37**4****5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824**5****6** Gain, if any, from line 32, from other than casualty or theft**6****7** Combine lines 2 through 6 Enter the gain or (loss) here and on the appropriate line as follows**7**

-385

Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9 Skip lines 8, 9, 11, and 12 below**Individuals, partners, S corporation shareholders, and all others.** If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below**8** Nonrecaptured net section 1231 losses from prior years (see instructions)**8****9** Subtract line 8 from line 7 If zero or less, enter -0- If line 9 is zero, enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)**9**

0

Part II Ordinary Gains and Losses (see instructions)**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less)

						0
						0
						0

11 Loss, if any, from line 7**11**

(385)

12 Gain, if any, from line 7 or amount from line 8, if applicable**12****13** Gain, if any, from line 31**13****14** Net gain or (loss) from Form 4684, lines 37 and 44a**14****15** Ordinary gain from installment sales from Form 6252, line 25 or 36**15****16** Ordinary gain or (loss) from like-kind exchanges from Form 8824**16****17** Combine lines 10 through 16**17**

-385

18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below For individual returns, complete lines a and b below**a** If the loss on line 11 includes a loss from Form 4684, line 41, column (b)(ii), enter that part of the loss here Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23 Identify as from "Form 4797, line 18a" See instructions**18a****b** Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a Enter here and on Form 1040, line 14**18b**

0

For Paperwork Reduction Act Notice, see separate instructions.

(HTA)

Form **4797** (2008)

Name(s) shown on Form 1040

85-0216702

[illegible]

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

OMB No 1545-0172

2008

Attachment

Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return
NEW VISTASBusiness or activity to which this form relates
990Identifying number
85-0216702**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions).	2	9,695
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	0
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	0
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	0

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	19,209
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ☐		

Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property		8,290	4	HY	S/L	1,038
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs.	MM	S/L	
i Nonresidential real property			27 5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20 a Class life		1,405	4	HY	S/L	176
b 12-year			12 yrs	HY	S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	20,423
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2008)

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

	Cash		Non Cash
1 Federated Campaigns		1	
2 Membership dues		2	
3 Fundraising events		3	
4 Related organizations		4	
5 Government grants (contributions)	2,589,416	5	
6 All other contributions, gifts, grants, and similar amounts not included above.			
UNITED WAY	2,353		
OTHER DONATIONS	7,090		
MINI GRANTS AND PROJECTS	67,750		
Other contributions total	77,193	6	0
7 Total	2,666,609	7	0

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

Index	Description	CUSIP #	Check if gain/loss is from sale of public securities	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only)		Expense of sale and cost of improvements	Depreciation	Description of Basis Method
											Cost	Donated value			
1	EQUIPMENT						6/1/2004	PURCHASE	6/30/2009	0	4,171	0	0	3,786	COST LESS ACCUM DEPR
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															
16															
17															
18															
19															
20															

Totals		Public Securities		Non-Public Securities	
Gross sales	Cost, other basis and expenses				
0	0	0	0	0	385
0	0	0	0	0	0
0	0	0	0	0	0

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

		20,423	0	20,423	0
		(A)	(B)	(C)	(D)
		Total	Program services	Management and general	Fundraising
Description					
1	VEHICLES	0	0	0	0
2	LEASEHOLD IMPROVEMENTS	3,856	0	3,856	0
3	EQUIPMENT	9,628	0	9,628	0
4	FURNISHINGS	6,939	0	6,939	0
5		0			
6		0			
7		0			
8		0			
9		0			
10		0			
11		0			
12		0			
13		0			
14		0			
15		0			
16		0			
17		0			
18		0			
19		0			
20		0			

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

		Pledges and grants receivable			Allowance for doubtful accounts		
		Beginning		End	Beginning		End
1	Grants receivable	201,842		270,490	0		0
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12	Total pledges and grants receivable	201,842		270,490	0		0

Part X, Line 4 (990) - Accounts Receivable

		Accounts receivable			Allowance for doubtful accounts		
		Beginning		End	Beginning		End
1	ACCOUNTS RECEIVABLE	33,350		12,528	0		0
2							
3							
4							
5							
6							
7							
8							
9							
10							
11	Total accounts receivable	33,350		12,528	0		0

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

Category or Item		Land	Buildings	Leasehold Improvements	Equipment	Other	Check if Investment Asset	Check if Asset Disposed	Cost/Other Basis	Beginning Accumulated Depreciation	Ending Accumulated Depreciation	Disposals/ Adjustments	Beginning Balance	Ending Balance
1	VEHICLES					X			14,985	13,985	13,985	0	1,000	1,000
2	LEASEHOLD IMPROVEMENTS			X					48,449	40,041	43,897	0	8,408	4,552
3	EQUIPMENT				X				93,845	62,791	67,868	0	26,295	25,977
4	FURNISHINGS				X				82,512	58,714	65,301	0	24,150	17,211
5	TO BALANCE								0	0	0		0	0
6									0	0	0		0	0
7									0	0	0		0	0
8									0	0	0		0	0
9									0	0	0		0	0
10									0	0	0		0	0
11									0	0	0		0	0
12									0	0	0		0	0
13									0	0	0		0	0
14									0	0	0		0	0
15									0	0	0		0	0
16									0	0	0		0	0
17									0	0	0		0	0
18									0	0	0		0	0
19									0	0	0		0	0
20									0	0	0		0	0
239,791										175,531	191,051	0	59,853	48,740

Part X, Lines 11 and 12 (990) - Investments - Securities

Check one box below to indicate how securities are reported

- ☐ Cost
- ☒ End of year market value (FMV)

						0	214,057	154,499
Securities at end of year		Publicly Traded Securities?	Financial Derivatives	Closely-Held Equity Interests	Number of Shares/Face Value	Value at Time of Donation	Beginning Balance Book Value FMV	Ending Balance Book Value FMV
1	MUTUAL FUNDS IN DEBT & EQUITY SECURITIES, CD	X			N/A	N/A	214,057	154,499
2					0 00	0	0	0
3					0 00	0	0	0
4					0 00	0	0	0
5					0 00	0	0	0
6					0 00	0	0	0
7					0 00	0	0	0
8					0 00	0	0	0
9					0 00	0	0	0
10					0 00	0	0	0
11					0 00	0	0	0
12					0 00	0	0	0
13					0 00	0	0	0
14					0 00	0	0	0
15					0 00	0	0	0
16					0 00	0	0	0
17					0 00	0	0	0
18					0 00	0	0	0
19					0 00	0	0	0
20					0 00	0	0	0

Use of Vehicles (4562 Part V, Section B) - 990

	Vehicle Description	Business Miles	Commuting Miles	Other Miles	Total Miles	Personal Use Off Duty?		More than 5% owner?		Another vehicle avail for use?	
						Y	N	Y	N	Y	N
1	1996 FORD AEROSTAR	0		0			X		X		X

Elections

Election to NOT claim first-year special depreciation - All Property

The Taxpayer elects out of first-year special depreciation for all depreciable property placed in service during the current tax year.

Assets by Classification - 990

6/30/2009 NEW VISTAS 85-0216702

Item No	Description of Property ***** indicates SOLD	Date Placed In Service	Asset Code	Bus Use %	Cost or Other Basis	Sec 179 Deduction	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Conv Code	Prior Accum Deprec, 179, Bonus	2008 Deprec	2008 Accum Deprec
5-yr Office mach (data handling)															
FDP PRIOR 6/30/02	F-6	6/30/2002	F-6	100 00%	40,184	0	0	0	40,184	4	SL	HY	40,184	0	40,184
FDP PRIOR RETIRE 6/30/2002	F-6	6/30/2002	F-6	100 00%	-211	0	0	0	-211	4	SL/GDS	HY	-211	0	-211
FDP PRIOR RETIRE 6/30/2002	F-6	6/30/2002	F-6	100 00%	-554	0	0	0	-554	4	SL	HY	-554	0	-554
** SENECA DATA PC 2/17/2003	F-6	2/17/2003	F-6	100 00%	1,372	0	0	0	1,372	4	SL	HY	1,372	0	1,372
SONY VIDEO CAMER 1/23/2004	F-6	1/23/2004	F-6	100 00%	1,235	0	0	0	1,235	4	SL	HY	1,235	0	1,235
** IBM THINK PAD 6/1/2004	F-6	6/1/2004	F-6	100 00%	925	0	0	0	925	4	SL	HY	925	0	925
** IBM THINK PAD 6/1/2004	F-6	6/1/2004	F-6	100 00%	925	0	0	0	925	4	SL	HY	925	0	925
IBM M50 CPU 2760 9/12/2005	F-6	9/12/2005	F-6	100 00%	825	0	0	0	825	4	SL	HY	825	206	925
IBM M50 CPU 2761 9/12/2005	F-6	9/12/2005	F-6	100 00%	825	0	0	0	825	4	SL	HY	825	206	925
NEC 3520 COPIER 10/14/2005	F-6	10/14/2005	F-6	100 00%	8,441	0	0	0	8,441	6	SL	HY	8,441	206	721
PANASONIC TELEPH 1/30/2006	F-6	1/30/2006	F-6	100 00%	3,535	0	0	0	3,535	7	SL	HY	3,517	206	721
PANASONIC VOICEM 1/30/2006	F-6	1/30/2006	F-6	100 00%	1,401	0	0	0	1,401	7	SL	HY	1,263	505	4,924
IBM M50 CPU 2765 5/30/2006	F-6	5/30/2006	F-6	100 00%	825	0	0	0	825	4	SL	HY	500	200	700
IBM M50 CPU 2766 5/30/2006	F-6	5/30/2006	F-6	100 00%	825	0	0	0	825	4	SL	HY	515	206	721
HP 4050 PRINTER 5/30/2006	F-6	5/30/2006	F-6	100 00%	500	0	0	0	500	3	SL	HY	417	83	500
COMPAQ SERVER 27 5/30/2006	F-6	5/30/2006	F-6	100 00%	2,775	0	0	0	2,775	4	SL	HY	1,735	694	2,429
COMPAQ BACKUP 5/30/2006	F-6	5/30/2006	F-6	100 00%	525	0	0	0	525	4	SL	HY	328	131	459
RICOH 3035 COPIER 6/1/2006	F-6	6/1/2006	F-6	100 00%	10,580	0	0	0	10,580	6	SL	HY	4,408	1,763	6,171
HP 2120 SERVER 8/14/2006	F-6	8/14/2006	F-6	100 00%	765	0	0	0	765	4	SL	MM	287	191	478
IBM M50 TC 9/27/2006	F-6	9/27/2006	F-6	100 00%	725	0	0	0	725	4	SL	MM	272	181	453
IBM M50 TC 9/27/2006	F-6	9/27/2006	F-6	100 00%	725	0	0	0	725	4	SL	MM	272	181	453
** HP NX6110 NT 9/27/2006	F-6	9/27/2006	F-6	100 00%	949	0	0	0	949	4	SL	MM	356	208	564
PANA KXTD100 TEL 11/1/2006	F-6	11/1/2006	F-6	100 00%	3,413	0	0	0	3,413	7	SL	MM	732	488	1,220
PANA KXTVA50 VM 11/1/2006	F-6	11/1/2006	F-6	100 00%	1,346	0	0	0	1,346	7	SL	MM	288	192	480
BIOLOGIX AX 1001 6/5/2007	F-6	6/5/2007	F-6	100 00%	4,125	0	0	0	4,125	4	SL	MM	1,547	1,031	2,578
EQUUS SYSTEM 12/3/2007	F-6	12/3/2007	F-6	100 00%	1,340	0	0	0	1,340	4	SL	HY	168	335	503
TOSHIBA TECRA A-11 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,405	0	0	0	1,405	4	SL/ADS	HY	0	176	176
TOSHIBA TECRA A-11 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,405	0	0	0	1,405	4	SL/GDS	HY	0	176	176
TOSHIBA TECRA A-11 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,405	0	0	0	1,405	4	SL/GDS	HY	0	176	176
TOSHIBA TECRA A-11 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,405	0	0	0	1,405	4	SL/GDS	HY	0	176	176
TOSHIBA TECRA A-11 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,405	0	0	0	1,405	4	SL/GDS	HY	0	176	176
TOSHIBA TECRA A-11 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,405	0	0	0	1,405	4	SL/GDS	HY	0	176	176
NEC NP61 XGA PROJ 1/1/2009	F-6	1/1/2009	F-6	100 00%	1,265	0	0	0	1,265	4	SL/GDS	HY	0	158	158
Total 5-yr Office machinery (data-handling equipment, €					98,016	0	0	0	98,016				62,026	9,628	71,654

7-yr Office furn, fixtures, equip

FDP PRIOR 6/30/97	F-11	6/30/1997	F-11	100 00%	17,425	0	0	0	17,425	7	SL	HY	17,425	0	17,425
FDP PRIOR RETIRE 6/30/1997	F-11	6/30/1997	F-11	100 00%	-352	0	0	0	-352	7	SL/GDS	HY	-352	0	-352
MODULAR FURNITUF 11/30/1998	F-11	11/30/1998	F-11	100 00%	1,592	0	0	0	1,592	7	SL	HY	1,592	0	1,592
HAWORTH STATION 7/21/1999	F-11	7/21/1999	F-11	100 00%	638	0	0	0	638	7	SL	HY	638	0	638
HAWORTH STATION 7/21/1999	F-11	7/21/1999	F-11	100 00%	638	0	0	0	638	7	SL	HY	638	0	638
MODULARS-RH 8/10/2000	F-11	8/10/2000	F-11	100 00%	3,075	0	0	0	3,075	7	SL	HY	3,075	0	3,075
FURNITURE-RG 8/30/2000	F-11	8/30/2000	F-11	100 00%	3,846	0	0	0	3,846	7	SL	HY	3,846	0	3,846
5 CONF TABLES 8/30/2000	F-11	8/30/2000	F-11	100 00%	1,673	0	0	0	1,673	7	SL	HY	1,673	0	1,673
MODULARS-DAN 6/7/2001	F-11	6/7/2001	F-11	100 00%	2,177	0	0	0	2,177	7	SL	HY	2,177	0	2,177
COUNTER-RECEPT 2/18/2002	F-11	2/18/2002	F-11	100 00%	3,023	0	0	0	3,023	7	SL	HY	2,808	215	3,023
MODULARS-NURSE 6/1/2002	F-11	6/1/2002	F-11	100 00%	1,138	0	0	0	1,138	7	SL	HY	1,059	79	1,138
MODULARS-E C DIR 6/1/2002	F-11	6/1/2002	F-11	100 00%	2,241	0	0	0	2,241	7	SL	HY	2,080	160	2,240
FURN-RECEPT 7/9/2002	F-11	7/9/2002	F-11	100 00%	3,546	0	0	0	3,546	7	SL	HY	2,788	507	3,295
MODULAR-GLORIA 9/5/2002	F-11	9/5/2002	F-11	100 00%	2,019	0	0	0	2,019	7	SL	HY	1,584	288	1,872

DIVIDERS-BACK OFF	11/26/2002	F-11	100 00%	6,163	0	0	0	6,163	7	SL	HY	4,840	880	5,720
MODULARS-JANE	11/26/2002	F-11	100 00%	2,657	0	0	0	2,657	7	SL	HY	2,090	380	2,470
MODULARS-HR DIR	2/26/2003	F-11	100 00%	2,237	0	0	0	2,237	7	SL	HY	1,760	320	2,080
HON LATERAL FILE	12/5/2003	F-11	100 00%	501	0	0	0	501	7	SL	HY	394	72	466
3 SEAT LOUNGE	7/18/2005	F-11	100 00%	2,140	0	0	0	2,140	7	SL	HY	765	306	1,071
MODULARS-ALL	11/15/2005	F-11	100 00%	4,763	0	0	0	4,763	7	SL	HY	1,700	680	2,380
LG CONF TABLE	1/11/2006	F-11	100 00%	856	0	0	0	856	7	SL	HY	305	122	427
MODULARS-PEER SL	1/11/2006	F-11	100 00%	7,688	0	0	0	7,688	7	SL	HY	2,745	1,098	3,843
MODULARS-SO SIDE	1/11/2006	F-11	100 00%	2,852	0	0	0	2,852	7	SL	HY	1,018	407	1,425
MODS=PEER	1/11/2006	F-11	100 00%	2,859	0	0	0	2,859	7	SL	HY	1,020	408	1,428
MAILBOXES	9/21/2006	F-11	100 00%	1,296	0	0	0	1,296	7	SL	HY	278	185	463
CREDENZA	7/25/2007	F-11	100 00%	585	0	0	0	585	7	SL	HY	42	84	126
FURNISHINGS	7/26/2007	F-11	100 00%	5,236	0	0	0	5,236	7	SL	HY	374	748	1,122
Total 7-yr Office furniture, fixtures and equipment				82,512	0	0	0	82,512				58,362	6,939	65,301

Home Office - Add and Impr

TRADES WEST REN	1/15/1984	H-2	100 00%	2,157	0	0	0	2,157	10	SL	MM	2,157	0	2,157
AUTOMATIC DOOR	9/7/1993	H-2	100 00%	1,551	0	0	0	1,551	10	SL	MM	1,551	0	1,551
SINK	10/31/1993	H-2	100 00%	707	0	0	0	707	10	SL	MM	707	0	707
SIGN	11/10/1993	H-2	100 00%	250	0	0	0	250	10	SL	MM	250	0	250
CARPET & MOLDING	10/11/1994	H-2	100 00%	4,086	0	0	0	4,086	5	SL	MM	4,086	0	4,086
KITCHEN CABINETS	10/21/1994	H-2	100 00%	200	0	0	0	200	15	SL	MM	176	13	189
WINDOW	11/2/1994	H-2	100 00%	225	0	0	0	225	10	SL	MM	225	0	225
ECS SIGN	6/23/1995	H-2	100 00%	200	0	0	0	200	5	SL	MM	200	0	200
TILE-ALTO	9/11/1995	H-2	100 00%	620	0	0	0	620	7	SL	MM	620	0	620
BLINDS-ALTO	9/29/1995	H-2	100 00%	404	0	0	0	404	7	SL	MM	404	0	404
CABLE-RUFINA	9/29/1995	H-2	100 00%	935	0	0	0	935	10	SL	MM	935	0	935
CABLE-RUFINA	10/17/1995	H-2	100 00%	125	0	0	0	125	10	SL	MM	125	0	125
PLAYGROUND	3/29/2000	H-2	100 00%	24,142	0	0	0	24,142	10	SL	MM	20,519	2,414	22,933
ALARM SYSTEM	7/27/2001	H-2	100 00%	2,001	0	0	0	2,001	5	SL	MM	2,001	0	2,001
ACCESS CONTROL S	9/14/2001	H-2	100 00%	1,295	0	0	0	1,295	5	SL	MM	1,295	0	1,295
CARPET-ALTO	10/9/2002	H-2	100 00%	1,220	0	0	0	1,220	5	SL	MM	1,220	0	1,220
CARPET & TILE PW	11/21/2005	H-2	100 00%	3,588	0	0	0	3,588	5	SL	MM	1,795	718	2,513
WIRING PW	2/1/2006	H-2	100 00%	2,385	0	0	0	2,385	10	SL	MM	595	239	834
CARPETING LV	6/20/2006	H-2	100 00%	2,358	0	0	0	2,358	5	SL	MM	1,180	472	1,652
Total Home Office - Additions and Improvements				48,449	0	0	0	48,449				40,041	3,856	43,897

5-yr SUV/truck/van > 6,000 lbs

1996 FORD AEROST/	1/31/1996	V-6	100 00%	14,985	0	0	0	14,985	5	SL	HY	13,985	0	13,985
Total 5-yr SUV and certain trucks and vans > 6,000 pol				14,985	0	0	0	14,985				13,985	0	13,985
SubTotals				243,962	0	0	0	243,962				174,414	20,423	194,837
Less Assets Sold				(4,171)	0	0	0	(4,171)				(3,578)	(208)	(3,786)
Ending Totals				239,791	0	0	0	239,791				170,836	20,215	191,051