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Form **990**.

Return of Organization Exempt From Income Tax

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

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

benefit trust or private foundation)

Open to Public Inspection

Form 990 (2008)

Department of the Treasury Internal Revenue Service

For the 2008 calendar year, or tax year beginning 9/1/2008 and ending 8/31/2009 Please DC Scores Check if applicable C Name of organization D Employer identification number use IRS Address change Doing Business As label or 52-2230721 print or Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number type. Initial return 1224 M Street, NW 202-393-6999 Specific Termination City or town, state or country, and ZIP + 4 InstruclWashington Amended return 20005 G Gross receipts \$ DC 1.292.366 tions. Application pending Name and address of principal officer Yes X H(a) Is this a group return for affiliates? Amy Nakamoto 1224 M Street NW, Washington, DC 20005 H(b) Are all affiliates included? Tax-exempt status | X | 501(c) (If "No," attach a list (see instructions) 4947(a)(1) or 3) ◀ (insert no) J Website: > www.dcscores.org H(c) Group exemption number ► 3598 X Corporation K Type of organization Trust Association Other > L Year of formation M State of legal domicile 1999 DC Part I Summary Briefly describe the organization's mission or most significant activities. DC SCORES inspires youth to lead healthy lifestyles, be engaged students, and become agents of change in their communities. Activities & Governance Check this box ▶ I If the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) 3 17 Number of independent voting members of the governing body (Part VI, line 1b). 16 4 Total number of employees (Part V, line 2a) 5 16 Total number of volunteers (estimate if necessary). 6 50 Total gross unrelated business revenue from Part VIII, line 12, column (C) . . . 7a 0 Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h). . . 1,051,301 1,141,833 Revenue 9 Program service revenue (Part VIII, line 2g) 4,983 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 8.066 2,828 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 1,735 90,117 12 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,066,085 1,234,778 13 0 14 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 558.752 16a 0 17 0 754,042 18 Total expenses 13-17 (must equal Part IX, column (A), line 25). 0 1,312,794 19 Revenue less expenses. Subtract line 18 from line 12 1,066,085 -78.016 Beginning of Year **End of Year** 20 Total assets (Part X, line 16) . . . 611,360 459,122 21 Total liabilities (Part X, line 26) 14.596 12.048 22 Net assets or fund balances Subtract line 21 from line 20 596.764 447,074 Signature Block Part II 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 7-12-10 Sign Signature of officer Here TNISTEIM Type or print name and title Preparer's Date Check if Preparer's identifying number signature (see instructions) Paid employed Preparer's Firm's name (or yours **SELF PREPARED** EIN **Use Only** if self-employed). address, and ZIP + 4 Phone no May the IRS discuss this return with the preparer shown above? (see instructions)

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

(HTA)

Г	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: DC SCORES inspires youth to lead healthy lifestyles, be engaged students, and become agents of change in their communities
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
J	
	Tes Minor
	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 \$ 346,000 including grants of \$ 0) (Revenue \$ 67,569)
	Soccer
4b	(Code) (Expenses \$ 221,321 including grants of \$ 0) (Revenue \$ 185,799)
	Writing
	••••••

4c	(Code:) (Expenses \$ 110,303 including grants of \$ 0) (Revenue \$ 15,600)
	Common 9 Minton Donardo
	Summer & Winter Programs

4.1	Otto
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 330,420 including grants of \$ 0) (Revenue \$ 358,275)
4e	Total program service expenses ► \$ 1,008,044 (Must equal Part IX, Line 25, column (B).)

Par	t IV Checklist of Required Schedules			<u>-</u> -
			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		~	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2				
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		_X
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		Х
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 "Yes,"			
40	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		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		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	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			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals 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	Х	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
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			
	Schedule J	23		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	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		X
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<u> </u>		 ^-
_ - u	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	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	200		^
	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 substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Х

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Х

Х

Χ

Х

Χ

Х

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)? 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," Х 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30-Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I

Was the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule R. Parts II.

Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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	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	·		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
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 16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
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		Χ_
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		Χ_
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).	; ; **		* .
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than		, T	2 45 %
	\$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	19		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		_X_
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			ļ
	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	<u>. </u>		ļ
	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.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .			
11	Section 501(c)(12) organizations. Enter.			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		İ	
	against amounts due or received from them)			ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		 -
<u>_b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<u> </u>		<u> </u>

52-2230721 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

	<u> </u>								
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the		Yes	No					
	circumstances, processes, or changes in Schedule O. See instructions.								
1a	Enter the number of voting members of the governing body]					
b	Enter the number of voting members that are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with								
	any other officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct	, i							
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		<u>x</u>					
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>					
6	Does the organization have members or stockholders?	6		X					
7a	Samuel and the same and the same between the same of the same same of the same same of the same same same same same same same sam								
	of the governing body?								
ь	general general general approved by members, excellent personner.								
8 Did the organization contemporaneously document the meetings held or written actions undertaken during									
_	the year by the following:								
a b	The governing body?	8a 8b	X	├─					
9a	the same same state of the governing coup, i								
b									
	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	30		 					
	must describe in Schedule O the process, if any, the organization uses to review the Form 990								
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	10	X						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 11 X								
Sect	ion B. Policies								
			Yes	No					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	<u> </u>					
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give								
	rise to conflicts?	12b	X	<u> </u>					
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			}					
42	describe in Schedule O how this is done	12c	Х	<u> </u>					
13 14	Does the organization have a written whistleblower policy?	13		X					
15	Does the organization have a written document retention and destruction policy?	14		 ^- -					
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:								
а	The organization's CEO, Executive Director, or top management official?	15a	l <u></u>	X					
b	Other officers or key employees of the organization?	15b		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		Ĭ						
	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							
	ion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or smaller to a public representation between makes the second of the control of the con	only)							
	available for public inspection. Indicate how you make these available Check all that apply.								
10	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interpolicy, and financial statements available to the public.	est							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	20							
	organization ► Ceasar Garcia 212-868-95								
	520 8th Avenue 11th Floor, New York, NY 10018								

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)					ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Amy Nakamoto				.,						
Executive Director	40.	X	┝┈	X	Х	Х	┞	77,220	0	(
Lisa Koteen Gerchick Chair	5.	х		х				0	0	(
John Graebner										
Director	2.	Х	╙		L		_	0	0	(
Jan Smilek Treasurer	2.	×		Х						
	<u> </u>	- ^-		 	\vdash			0	0	
Rachel Sheriden Secretary	2.	Х		Х				0	0	(
Neil Hare				Ť	П		\vdash			
Director	2	Х	L					o	o	(
Tracie Ahern										
Director	2.	Х			Ш		<u> </u>	0	0	
Tony Hudgins Director	2.	x						0	0	
Jay Grauberger										
Vice Chair	2.	Х		Х				0	0	
Craig Sevy Director	2.	Х						0	0	
Len Oliver			Г							
Director	2.	Х						0	0	(
Stephen Zack Director	2.	x						0	0	
Graeme Bush Director	2.	X.						0	0	
Sterling Ashby		,							Ĭ	
Director	2.	X	L					0	0	(
Akın Adepetu										
Director	2	_X_	<u> </u>		Щ		_	0	0	ļ
Eve Runyon Director	2.	_x_						0	0	
Abra Edwards										
Director	2	Х	1				X	0	o	

52-2230721

Page 8

Pa	t VII Section A. Officers, Directors, Tru		ipioy	ees,			inesi	t Coi		T		
	(A)	(B) (C) Average Position (check all that app					hat an	nlv)	(D)	(E)	(F	
	Name and title	Average hours per week	or director	Institutional tr	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimamou oth compei from organi and re organiz	unt of ner nsation i the zation elated
Kas	sandra Brock ctor	2	х						0	0		0
		0.							0	0		0
		0.							0	0		C
		0.						-	0	0		C
		0.							0	0		C
		0.		:					0	0		C
		0.		·					0	O		C
		0							0	0		C
		0							0	C)	C
		0.	<u>.</u>						0	0		C
		_ 0							0	0)	
		0							0	c		(
		0							0	c		(
1b 2	Total	in 1a) who rece	eived	 I moi	re tha	an \$	100,0	• 000 i	77,220 n reportable cor		1	
3	Did the organization list any former officer,										Yes	No
4	employee on line 1a? If "Yes," complete Sc For any individual listed on line 1a, is the su	ım of reportable	com	pen	satıo	n an	d oth	ner c	ompensation fro	om _	3 X	
	the organization and related organizations of individual										4	X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Y										5	x
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest cor compensation from the organization	mpensated inde	pend	lent	conti	racto	ors th	at re	ceived more tha	an \$100,000 of		
	(A) Name and business a	address		•					(B) Description of ser	vices	(C) Compensa	tion
												(
								┼				(
		···						 				
2	Total number of independent contractors (in compensation from the organization	ncluding those in	n 1) v	who	rece	ved	more	tha	n \$100,000 in			
	- Single organization			_							Form 9	90 (2008

0

4,663

4,663

1,234,778

4,663

7,491

b

12

9c, 10c, and 11e.

Total. Add lines 11a–11d

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,

4,663

7.491

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) are

	` All other organizations must complete column	(A) but are not req	uired to complete	columns (B), (C), an	d (D).
	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 .				j
2	Grants and other assistance to individuals in				; ;
	the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments,			,	å
	organizations, and individuals outside the				,
	U.S. See Part IV, lines 15 and 16	0		<u> </u>	,
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	77,220	37,070	15,440	24,710
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	.395,089	311,541	23,977	59,571
8	Pension plan contributions (include section 401(k)	r			
	and section 403(b) employer contributions)				
9	Other employee benefits	49,542	41,503	3,400	4,639
10	Payroll taxes	36,901	21,914	3,720	11,267
11	Fees for services (non-employees):				
а	Management	697		697	
b	Legal	0			
С	Accounting	3,000		3,000	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0	**		
f	Investment management fees	0			
g	Other	397,213	324,780		70,251
12	Advertising and promotion	2,839	2,839		
13	Office expenses	12,917	5,341	4,936	4,822
14	Information technology	0			
15	Royalties	0			
16	Occupancy	94,488	66,831	12,530	15,127
17	Travel	11,224	6,623	2,433	2,168
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	2,411	1,580	484	347
20	Interest	o			
21	Payments to affiliates	29,000	8,335	18,795	1,870
22	Depreciation, depletion, and amortization	4,380	3,289	346	745
23	Insurance	2,203	1,653	175	375
24	Other expenses. Itemize expenses not				
	covered above (Expenses grouped together	2 .	š, 4	₹	
	and labeled miscellaneous may not exceed				ļ
	5% of total expenses shown on line 25 below)		^		
а	Bank charges, licenses and fees	2,815		489	2,326
b	Equipment rental	12,515	9,179	1,110	2,226
С	Dues & subscriptions	4,467	1,389	184	2,894
d	Telecommunications	7,348	5,987	1,361	<u>, </u>
е	Program supplies, equipment and travel	166,525	166,525		
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	1,312,794	1,016,379	93,077	203,338
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				
		<u> </u>			Form 990 (2008)

P	Part X Balance Sheet									
		•		(A) Beginning of year			B) of year			
	1	Cash-non-interest-bearing		532,642	1		41	7,861		
	2				2					
	3	Pledges and grants receivable, net .		42,480	3			8,705		
	4	Accounts receivable, net		0				0		
	5	Receivables from current and former officers			•					
		employees, or other related parties. Complet		l	5			0		
	6	Receivables from other disqualified persons		,		, ,				
		4958(f)(1)) and persons described in section				* *		,		
		****		0	6		· · · · · · · · · · · · · · · · · · ·	0		
ম	7	Notes and loans receivable, net		0	7			0		
Assets	8			- /-8						
As	9	Prepaid expenses and deferred charges		10,847	9		1	1,545		
	10a	Land, buildings, and equipment: cost basis				۶ پ	**	1,040		
	b	Less: accumulated depreciation. Complete	20,215	* ' * * * * * * * * * * *	· 、	j w	**	<i>^</i> , , '		
	"		10b 19,847	10.740	40-	<u></u>		C 200		
	11	Investments—publicly traded securities						6,368		
	12			0	11			0		
	13	Investments—other securities. See Part IV, lin		0	12			0		
	14	Investments-program-related See Part IV, II		0	_13_			0		
	1	Intangible assets	4.010	14						
	15	Other assets. See Part IV, line 11		14,643				4,643		
	16	Total assets. Add lines 1 through 15 (must e		611,360				9,122		
	17	Accounts payable and accrued expenses		7,657	17			2,419		
	18	Grants payable		18						
	19	Deferred revenue		19						
Liabilities	20	Tax-exempt bond liabilities		0	_20			0		
	21	Escrow account liability. Complete Part IV of			21					
	22	Payables to current and former officers, direct			7 8		1	· 4		
		employees, highest compensated employees	s, and disqualified	**************************************	<u> </u>			1		
		persons Complete Part II of Schedule L .		0	22			0		
	23	Secured mortgages and notes payable to uni	0	23			0			
	24	Unsecured notes and loans payable	0	24	0					
	25	Other liabilities. Complete Part X of Schedule		6,939	25			9,629		
	26	Total liabilities. Add lines 17 through 25	<u> </u>	14,596	26		_ 1	2,048		
ģ		Organizations that follow SFAS 117, check	k here ►X and	*	•					
or Fund Balance		complete lines 27 through 29, and lines 33								
a	27	Unrestricted net assets		436,107	27		35	8,093		
ä	28	Temporarily restricted net assets		160,657	28		8	8,981		
pu	29	Permanently restricted net assets			29					
Ŀ		Organizations that do not follow SFAS 117	7. check here▶							
ō		and complete lines 30 through 34.	,	. , .				•		
Net Assets	30	Capital stock or trust principal, or current fund	te '		30					
SS	31	Paid-in or capital surplus, or land, building, or	roquinment fund		31					
Ž	32	Retained earnings, endowment, accumulated			32					
Š	33			F06 764				7.074		
	34	Total liabilities and net assets/fund balances		596,764				7,074		
Da	rt XI	Financial Statements and Reporting		611,360	34	1	40	9,122		
La	ILAI	r mancial Statements and Reporting					Van	Na		
1	۸۵	counting method used to proper the Form OC	0.			<u></u>	Yes	No		
										
						2 <u>a</u>	 	Х		
		ere the organization's financial statements aud				. <u>2</u> b	Х			
(Yes" to lines 2a or 2b, does the organization h			I					
_		dit, review, or compilation of its financial stater				2c	<u> </u>	Х		
3		a result of a federal award, was the organizat								
								X		
	o it "	Yes," aid the organization undergo the require	d audit or audits?	<u> </u>				Χ		
						Fo	m 990	(2008)		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. See separate instructions. Name of the organization

Employer identification number DC Scores 52-2230721 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.) 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) 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 5 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 X 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.) 8 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 Type II c Type III-Functionally integrated 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 f Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) 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. (iii) Type of organization (iv) Is the organization (vii) Amount of (v) Did you notify (vi) Is the (i) Name of supported (ii) EIN (described on lines 1-9 in col (i) listed in your the organization in organization in col support organization above or IRC section governing document? (i) organized in the col.(i) of your (see instructions)) support? HS2 Yes Yes No No Yes No 0 0 0 0 Total 0

Pari	art II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)						
	(Complete only if you checked t	the box on line	e 5, 7, or 8 of	Part I.)			
	ion A. Public Support						
Cale	ndar 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	1					
	include any "unusual grants.")	748,431	898,636	910,436	1,056,284	1,227,827	4,841,614
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf	0	0	0			0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	o	0	ol			0
4	Total Add lines 1-3	748,431	898,636	910,436	1,056,284	1,227,827	4,841,614
5	The portion of total contributions by each	7 10,451	050,050	10,450	1,000,204	1,227,027	7,041,014
	person (other than a governmental unit	. ` .	~ *	•	, ,	,	
	or publicly supported organization)	ş	a ~ * * , *	* , ^	* * * *		
	included on line 1 that exceeds 2% of the	*	* * * *	*	, . x	, *	
	amount shown on line 11, column (f)		*	>		₹ ³	
6	Public support. Subtract line 5 from line 4.		* *	*	, *\	* * .	4,841,614
	on B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕒	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	748,431	898,636	910,436	1,056,284	1,227,827	4,841,614
8	Gross income from interest, dividends,	,	•				.,,
	payments received on securities loans,		ş				
	rents, royalties and income from similar						
_	sources	82	0	9,394	8,066	2,828	20,370
9	Net income from unrelated business						
	activities, whether or not the business is						
40	regularly carried on						0
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)	69,716	25 600	4 220	4 705	4 000	440 400
11	Total support. Add lines 7 through 10.	99,716	35,688	1,320	1,735	4,663	113,122 4,975,106
12	Gross receipts from related activities, etc. (s		· · · · · · · · · · · · · · · · · · ·			12	1,227,827
13	First five years. If the Form 990 is for the or						
13	organization, check this box and stop here				-	, ,	·(3)
C4	<u></u>					• • • •	· •
<u> 3ect</u> 14	ion C. Computation of Public Support					44	07.00%
15	Public support percentage for 2008 (line 6, c					14	97 32%
	Public support percentage from 2007 Sched					15	74 82%
16a	33 1/3% support test–2008. If the organization						
	and stop here. The organization qualifies as						
b	33 1/3% support test–2007. If the organization						check this
47-	box and stop here. The organization qualified	-					▶ 🗀
17a	10%-facts-and-circumstances-test-2008.						
	or more, and if the organization meets the "f						
h	the organization meets the "facts-and-circum						
b	10%-facts-and-circumstances test-2007.						
	or more, and if the organization meets the "f						
	the organization meets the "facts-and-circum		_	•			ition • 🔲
18	Private foundation. If the organization did not ch	eck a box on line	e 13, 16a, 16b, 1	7a ,or 17b, checl	k this box and se	e instructions	▶ 📘

ı aı	(Complete only if you should the			ion 509(a)(2)	•		
Sec	(Complete only if you checked the tion A. Public Support	ne box on line	9 or Part I)	~			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and	(a) 2004	(6) 2003	(0) 2000	(u) 2007	(e) 2000	(1) 10tai
	membership fees received. (Do not						
	include any "unusual grants.")	ol	ol	o			0
2			<u>`</u>			-	
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	*	o	اه				0
3	organization's tax-exempt purpose Gross receipts from activities that are not an	<u> </u>		0			0
	unrelated trade or business under section 513	1					0
4	Tax revenues levied for the organization's						
•	benefit and either paid to or expended on		ŀ				
	its behalf	0	ol	0			0
5	The value of services or facilities						
	furnished by a governmental unit to the	1					
	organization without charge	ol	ol	0			0
6	Total. Add lines 1-5	0	Ó	0	Ō	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
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from	2.	er 3 er				
	line 6.)	• • • • •		· An An A	* 5	*. * * *	0
	tion B. Total Support						
	endar 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
iva	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						0
b	Unrelated business taxable income (less		· · · · · ·				0
~	section 511 taxes) from businesses				•		
	acquired after June 30, 1975						0
С	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	Ì					
	carried on						0
12	Other income. Do not include gain or	1					-
	loss from the sale of capital assets		i			,	
	(Explain in Part IV.)	0	o	. 0			0
13	Total support. (Add lines 9, 10c, 11,				-		
	and 12)	,	4 *				0
14	First five years. If the Form 990 is for the org	janization's firs	t, second, third	l, fourth, or fifth	n tax year as a	section 501(c)	(3)
	organization, check this box and stop here.						. ▶
Sec	tion C. Computation of Public Support	Percentage			•		-
15	Public support percentage for 2008 (line 8, co	olumn (f) divide	d by line 13, co	olumn (f))		15	0.00%
16	Public support percentage from 2007 Schedu					16	0.00%
Sec	tion D. Computation of Investment Inco	ome Percenta	age				
17	Investment income percentage for 2008 (line	10c, column (f	divided by lin			17	0.00%
18	Investment income percentage from 2007 Sci					18	0.00%
19a	33 1/3% support tests-2008. If the organization	tion did not che	ck the box on	line 14, and lin	ne 15 is more ti	nan 33 1/3% ar	nd line 17 is
	not more than 33 1/3%, check this box and st	t <mark>op here.</mark> The d	organization qu	ualifies as a pu	blicly supporte	d organization	🕨 🗀
b	33 1/3% support tests-2007. If the organization di	d not check a bo	x on line 14 or li	ne 19a, and line	16 is more than	33 1/3% and	
	line 18 is not more than 33 1/3%, check this box ai						▶ [
20	Private foundation. If the organization did no						s ▶ 🗍

Schedule A (Form	990 or 990-EZ) 2008	DC Scores		52-2230721	Page 4
Part IV	Supplemental	Information.	Complete this part to provide the explanation required	d by Part II, line 10;	
	Part II, line 17a	or 17b; or Pa	rt III, line 12. Provide any other additional information.	(see instructions)	
Part II Line 10	Miscellaneous Re	venue			
			ı		
			• • • • • • • • • • • • • • • • • • • •		
			•		
• • • • • • • • • • • • • • • • • • • •					
			•••••		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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.

Inspection Employer identification number

DC Scores 52-2230721								
Pari	Organizations Maintaining Done	or Advised Funds or Other Similar I	Funds or Accounts. Complete if					
	the organization answered "Yes" to		·					
		(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							
6	funds are the organization's property, subject							
6	Did the organization inform all grantees, dor used only for charitable purposes and not for							
			· · · · Yes No					
Part		lete if the organization answered "Yes						
4			- " "" 					
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	on of certified historic structure					
	Preservation of open space							
2	Complete lines 2a-2d if the organization he	d a qualified conservation contribution in	the form of a conservation easement					
	on the last day of the tax year.							
_	Table 1 6		Held at the End of the Year					
a	Total number of conservation easements .		2a					
b c	Total acreage restricted by conservation ease Number of conservation easements on a ce							
d	Number of conservation easements include							
3	Number of conservation easements modifie							
	during the taxable year	a, transferred, released, extinguistica, or	terrimated by the organization					
4	Number of states where property subject to	conservation easement is located						
5	Does the organization have a written policy	•	tion, violations, and					
	enforcement of the conservation easements	· ·						
6	Staff or volunteer hours devoted to monitorii	ng, inspecting, and enforcing easements	during the year					
7	Amount of expenses incurred in monitoring,							
8	Does each conservation easement reported							
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?							
9	In Part XIV, describe how the organization r							
	balance sheet, and include, if applicable, the organization's accounting for conservation		financial statements that describes					
Part		ons of Art, Historical Treasures, or Oth	or Similar Acceta					
- Carr	Complete if the organization answere		er Sillilar Assets.					
4-								
та	If the organization elected, as permitted und art, historical treasures, or other similar asset	er SFAS 116, not to report in its revenue	statement and balance sheet works of					
	service, provide, in Part XIV, the text of the	ootnote to its financial statements that de	escribes these items					
b	If the organization elected, as permitted und							
-	historical treasures, or other similar assets i							
	service, provide the following amounts relati							
	(i) Revenues included in Form 990. Part VII	I. line 1	▶ \$					
	(i) Revenues included in Form 990, Part VII(ii) Assets included in Form 990, Part X		▶ \$					
2	If the organization received or held works of	art, historical treasures, or other similar a	assets for financial gain, provide the					
	following amounts required to be reported u	nder SFAS 116 relating to these items.	_					
а	Revenues included in Form 990, Part VIII, II	ne 1	• \$					
b	Assets included in Form 990, Part X		> \$					

Page 2

ıaıı	Ul Organizations Manitalini	g Collections of	AIL,	пізіс	<u>ricai i</u>	reasu	1es, o	r Ou	ier Silii	ilar ASS	ets (c	onunu	<u> </u>
3	Using the organization's accession items (check all that apply):	and other records	, ched	ck any	of the	followi	ng that	are a	signific	ant use o	of its co	ollectio	าก
а	Public exhibition		d	\Box	Loan	or exch	ange r	roars	me				
_	 		_	片				-					
b	Scholarly research		е	Ш	Other								
С	Preservation for future generation	ations											
4	Provide a description of the organiz Part XIV	ation's collections	and o	explair	n how t	hey fur	ther the	e orga	anızatıor	n's exem _l	pt purp	ose in	
5	During the year, did the organizatio assets to be sold to raise funds rath										Пу	es 🗀	No
Part													
	Part IV, line 9, or reported									100 10	. 0	000,	
1a								or of	her ass	ets not			
	included on Form 990, Part X?				-						$\prod Y$	es	No
b	If "Yes," explain the arrangement in	Part XIV and com	plete	the fo	llowing	table:					<u></u>		
	•		•		·				T	Ar	nount		
С	Beginning balance							1c					
d	Additions during the year							1d					
е	Distributions during the year							1e		·			
f								1f					0
2a	Did the organization include an amo	ount on Form 990.	Part	X. lıne	21?.						$\prod Y$	es X	No
b	If "Yes," explain the arrangement in			•								ا	
Part	V Endowment Funds. Com	plete if organizat	ion a	nswe	red "Y	es" to	Form	990,	Part IV	, line 10		•	
		(a) Current year) Prior			o years b	_		years back		our years	back
1a	Beginning of year balance				× %	824	a. A	*	\$ ×	-,· ;	1/2	c. 🔌	,
b	Contributions						~						
С	Investment earnings or losses		744	3.	*,\$. `		* *	- 450		\$5. AC	*	, ,	•
d	Grants or scholarships			* *	À r	*.	in 🐞	46	*	''y '		· *	
е	Other expenditures for facilities								}- ~		΄	*	,,
	and programs				, % .		\$\ \$	*	₹* ``		<u> </u>		,
f	Administrative expenses .			<u>.</u>		- 31	% 'y	- 3	*			À	,
g	End of year balance	0	ــــــــــــــــــــــــــــــــــــــ										
2	Provide the estimated percentage of	•	ance	held a	ıs								
а	Board designated or quasi-endown			<u>%</u>									
þ	Permanent endowment	<u>%</u>											
С	Term endowment	<u>%</u>											
3a	Are there endowment funds not in t	he possession of t	he or	ganıza	ation th	at are I	neld an	ıd adr	nınıster	ed for the	;		
	organization by:			;								Yes	No
											3a(i)		
	(ii) related organizations										3a(ii)		
b	If "Yes" to 3a(II), are the related org										3b	L	<u> </u>
4	Describe in Part XIV the intended u	ses of the organiz	ation'	s endo	owment	t funds		V 1	40				
Part										1			
	Description of investment	(a) Cost or ot (investm		_		st or othe (other)		(c) [Depreciation	ın	(d) B	ook valu	e
1a	Land			0			0						0
b	Buildings			0			<u> </u>			0			0
C	Leasehold improvements			0			0			0			0
d	Equipment	<u> </u>		0		26,	215		1	9,847		-	6,368
e Total	Other			0		<u></u>	0			_ 0			0
ota	. Add lines 1a-1e. (Column (d) shou	ıa equal ⊢orm 990	ı, Par	t X, cc	iumn (l	B), line	10(c).	<u>)</u>	•	>			6,368

Part X Other Liabilities. See Form 990, P	art X, line 25	
(a) Description of liability	(b) Amount	· qe
Federal income taxes	0	
Accrued Vacation Pay	8,154	
Accrued salaries	1,375	
Accrued expenses	100	
	0	
	0	
	0	
	O	
	0	
	0	
	0	
Total (Column (b) should equal Form 990, Part X, col (B) line 25)	9,629	

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.

	ule D (Form 990) 2008	<u> </u>	Page 4
	Reconciliation of Change in Net Assets from Form 990 to Financial Statement	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,234,778
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,312,794
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-78,016
4	Net unrealized gains (losses) on investments	4	
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	0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-78,016
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Retu	
1	Total revenue, gains, and other support per audited financial statements	1	1,163,105
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	*	
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants	`	
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,163,105
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	, ,	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	71,673
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		1,234,778
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense	<u>es per Re</u>	turn
1	Total expenses and losses per audited financial statements	1	1,312,794
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	à .	
а	Donated services and use of facilities	_	
b	Prior year adjustments	*	
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,312,794
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)		
С	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	1,312,794
Par	t XIV Supplemental Information		
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a 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. XII Line 4b Released from restricted		
	;		

DC Scores 52-2230721

Schedule D (Form	n 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	
•		
		
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	ii	
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•••••	•••••	
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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

Inspection

	of the organization					Employer identificati	on number
	cores					52-2230721	
Pai							e 17.
1	Indicate whether the organization ra	aised funds throu					
a	X Mail solicitations				of non-government	•	
b	X Email solicitations X Phone solicitations				of government gran	าเร	
c d	X In-person solicitations		g X	speciai iuni	draising events		
	 '	or oral agracma		المريان والمريان	l /imple dimm office.	dinantana tauratana	
2a	Did the organization have a written or key employees listed in Form 99	0, Part VII) or er	itity in con	nection wit	h professional fund	Iraising services?	Yes X No
b	If "Yes," list the ten highest paid ind to be compensated at least \$5,000						
	(i) Name of individual or entity (fundraiser)	(II) Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	· No			
NI/A						0	0
N/A			 		0	0	0
	-	<u> </u>	<u> </u>		0	0	0
			<u> </u>		0	0	0
					o	0	0
					0	0	0
					0	0	0
					0	0	0
					0	0	0
					0	0	0
					0	0	0
Tota	•					0	0
Tota 3	List all states in which the organizar registration or licensing.	tion is registered	d or licens	ed to solicit	t funds or has been		

Pa	rt IĮ			inization answered "Yes a. List events with gros		
	•		(a) Event #1 Soccer Ball (event type)	(b) Event #2 Sharks vs Suits (event type)	(c) Other Events NONE (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	89,024	54,018	0	143,042
Rev	2	Less: Charitable contributions	0	0	0	0
	3	Gross revenue (line 1 minus line 2)	89,024	54,018	0	143,042
	4	Cash prizes	0	0	0	0
enses	5	Non-cash prizes	0	0	0	0
Direct Expenses	6	Rent/facility costs	0	. 0	0	0
Dire	7	Other direct expenses .	41,820	15,768	0	57,588
	8 9	Direct expense summary. Net income summary. Cor	mbine lines 3 and 8 in col	umn (d)	<u> </u>	(57,588) 85,454
Pai	t III	Gaming. Complete than \$15,000 on Fo		wered "Yes" to Form 99	90, Part IV, line 19, or re	eported more
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Rev	1	Gross revenue				0
es	2	Cash prizes				0
Direct Expenses	3	Non-cash prizes				0
lrect E	4	Rent/facility costs				0
	5	Other direct expenses .				0
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary.	Add lines 2 through 5 in o	column (d)		(0)
	8	Net gaming income summ	ary Combine lines 1 and	l 7 in column (d)	<u>.</u>	0
9 a b	ls	nter the state(s) in which the the organization licensed to "No," Explain:	o operate gaming activitie			Yes No
		ere any of the organization "Yes," Explain	's gaming licenses revoke	• • • • • • • • • • • • • • • • • • • •	ted during the tax year?	10a
11 12		pes the organization operat				
12	fo	the organization a grantor, rmed to administer charitab	beneficiary of trustee of a	a must or a member of a p	oarmership or other entity	. 12

Page 3 Yes No 13 Indicate the percentage of gaming activity operated in. 13a **b** An outside facility 13b 14 Provide the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ Address ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming 15a b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ ____. c If "Yes," enter name and address: Name ▶ Address ▶ Gaming manager information: Name ▶ Gaming manager compensation ► \$ 0 ------Description of services provided > Director/officer Employee Independent contractor Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to 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 ▶\$

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE M (Form 990).

NonCash Contributions

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

▶ Attach to Form 990.

20**08**

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DC Scores

Employer identification number 52-2230721

Part I	Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	(d) od of de revenu	termining)
1	Art—Works of art				T			
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications .		*			_		
5	Clothing and household							
	goods		,					
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .				<u> </u>			_
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation						·	
	contribution (historic							
	structures)							
14	Qualified conservation							
	contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial	·						
17	Real estate—Other						-	
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy				<u> </u>			
22	Historical artifacts							
23	Scientific specimens				ļ <u>.</u>			
24	Archeological artifacts			<u> </u>				
25	Other ► ()		See	Attached	Statemer	nt		
26	Other ► ()			C	†			
27	Other ► ()			C				
28	Other ▶ ()							
29	Number of Forms 8283 received	t hy the o	ganization during the tay ve	ear for contributions for				
	which the organization complete				29			
	man and angument demplote		200, 1 411 11, 201100 / 1011101	vicagement			Yes	No
30 a	During the year, did the organiza	ation rece	ive by contribution any prop	erty reported in Part I. lines	1–28		1	
	that it must hold for at least three				0			
	required to be used for exempt	-				30a		_X
b	If "Yes," describe the arrangement							
31	Does the organization have a gi			review of any non-standard				
						31		X,
32 a	Does the organization hire or us							
						32		Х
b	If "Yes," describe in Part II.				·			
33	If the organization did not report	revenues	in column (c) for a type of	property for which column (a) is			
	checked, describe in Part II.			• • •	•			

Schedule M (F	m 990) 2008 Par	ge 2
Part II	Supplemental Information . 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 Open to Public

Department of the Treasury Internal Revenue Service Inspection Employer identification number Name of the organization DC Scores 52-2230721 Form 990 Part VI Section B Line 12c Annual Questionnaire

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

· _	Cash	Non Cash
Federated Campaigns		1
Membership dues	3,367	2
Fundraising events		3
Related organizations	2,500	4
Government grants (contributions)	344,525	5
All other contributions, gifts, grants, and similar amounts not included above:		
Contributions	672,102	119,339
Other contributions total	<u>672,102</u>	
Total	1,022,494	7 119,339

DC Scores

Pa	rt IX, Line 21 (990)	Part IX, Line 21 (990) - Payments to Affiliates	tes						29,000	8,33	18,795	1,870
	Name	Street	Cıty	State	ate Zip Code	Foreign Country	ID Number	Purpose	(A) Total	(B) Program Services	(C) Mgmt & General Fu	(D) ndraist
	1 America SCORES	520 8th Avenue	New York	λN	10018		52-1955491	52-1955491 Affiliate Fees	29,000	8,33	18,795	1,870
7									0			
3									0			•
4									0			
2									0			
9									0			
1									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			
ć												

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

	, and a second s				
	•	4,380	3,289	346	745
		(A)	(B)	(C)	(D)
		Total	Program	Management	Fundraising
	Description		services	and general	,
1	Equipment	4,380	3,289	346	745
2		0	0,203	340	
3		Ö			
4					
-		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 grant		Allowance for	doubtful accounts
		Beginning	End	Beginning	End
1 Grants receivable	1 [42,480	8,350		
2 Accounts receivable	2		355		
3	3				
4	4				
5	<u> </u>		·		
6	··· 6 [
7	7 7				
8	··· 8 [
9	9 [
10	10				
11	11				
12 Total pledges and grants receivable .	. 12	42,480	8,705	0	0

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

									26,215	26,215 15,467	19,847	0	10,748	6,368
				reasepold			Check If	-		Beginning	Ending			
				Improve-			Investment	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
	Category or Item	Land	Buildings	ments	Equipment	Other	Asset		Basis	Depreciation	Depreciation	Adjustments	Balance	Balance
1	Office Equipment				×			Į	26,215	15,467	19,847		10,748	6,368
7									0	0			0	0
ო									0	0			0	0
4									0	0			0	0
က									0	0			0	0
9									0	0			0	0
7									0	0			0	0
ھ									0	0			0	0
თ									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
17									0	0			0	0
18									0	O			0	0
19									0	0			0	0
20									0	0			0	0

Part X, Line 15 (990) - Other Assets	14,643	14,643
Description	Beginning	End
1 Security Deposit	14,643	14,643
2'		
3		
4		
5		
6		
7		
8		
9		
10		
11		· · · · · · · · · · · · · · · · · · ·
12		
13		
14	7 1	
15		
16		
17		
18		
19		
20		

Part X, Line 25 (990) - Other Liabilities

<u>Par</u>	t A, Line 25 (990) - Other Liabilities	6,939	<u>9,629</u>
	Description	Beginning	End
1	Accrued Vacation Pay	6,939	8,154
2	Accrued salaries		1,375
3_	Accrued expenses		100
4_			
5_			
6_			
7_			
8_			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Part X (Sch D (990)) - Other Li	abilities	9,629
•		
•	Description	Amount
1 Federal Income Taxes		
2 Accrued Vacation Pay		8,154
3 Accrued salaries		1,375
4 Accrued expenses		100
5		
6		
7		
8		
9		
10		
11		_ (
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		

Part II (Sch G (990/990EZ)) - Events	143,042	0		0	0	0	57,588
	Line 1	Line 2	Fine 3	Line 4	Line 5	Line 6	Line 7
		Less	Gross Revenue				
			(line 1 minus		Non-cash	Rent/Facility	Other direct
Event Type	Gross Receipts		line 2)	Cash Prizes	Prizes	costs	expenses
1 Soccer Ball	89,024		89,024				. 41,820
2 Sharks vs Suits	54,018		54,018				15,768
3			0				
4			0				
ဟ			0				
9			0				
7			0				
8			0				
6			0				
10			0				
4			0				
12			0				
13			0				
14			0				
_15			0				
16			0				
- 12			0				
18			0				
19			0				
20			0				

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

	Non-Cash		Number of	Revenues Reported	Method of Determining
	Contribution	Description	Contributions	on 990, Pt VIII, Line 1g	Revenues _
٠1_	X	Legal Services	2	9,043	Fair Value
2_	X	Internet Services	1	1,000	Fair Value
3	X	Telecommunications	1	1,800	Fair Value
4	X	Food Snacks	2	4,739	Fair Value
5_	X	Soccer Equipment	2	25,342	Fair Value
6_	X	magazines	1	1,120	Fair Value
7_	X	Fundraising	1	69,000	Fair Value
8	X	Insurance	9	7,295	Fair Value
9					
10					
11_					
12					
13_				_	
14					
15					
16					
17					
18_					
19					
20					

(Sch O (990)) - Supplemental Information

COCII			ntai informa		
_	Form ,	Part	Section	Line	Explanation
1	990	VI	B	12c	Annual Questionnaire
2	•				
3					
4					
5					
6					
7					
_8					
9					
10			Ü		
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

iddle School Code: () (Expenses \$ 0 including grants of \$ 0,) (Revenue \$ 0,) Code: () (Expenses \$ 0 including grants of \$ 0,) (Revenue \$ 0,)	Part III, Line 4d (990) - Program (Code:) (Expenses \$ 3	30.420 including grants of \$	0) (Revenue \$	358 275)
Dode:	Middle School			65575:57
Code (Code (
Code (Code (
Code (Code (
Code (Code (
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Code (Code (Code:) (Expenses \$	0 including grants of \$	0) (Revenue \$	0)
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Code (Code (
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	Code') (Expenses \$	0 including grants of \$	0) (Revenue \$	<u> 0</u>)
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
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Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
Code.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)				
	Code) (Expenses \$	0 including grants of \$	<u>0</u>) (Revenue \$	0)
	Code.) (Expenses \$	0 including grants of \$	0) (Revenue \$	0)
	Code.) (Expenses \$	0 including grants of \$	0_) (Revenue \$	0.)