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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements OMB No 1545-0047

Open to Public Inspection

<u> </u>	FOI LIN	e 2008 calendar year, or tax year beginning SEP 1, 2006 and ending	AUG 31, 2009	
В	Check if applicable	Please use IRS C Name of organization	D Employer identifi	cation number
Г	Addre	Iss label or MODDICCEV_COMPTON EDITORTONAL CENTED		
F	Name chang	pe type Doing Business As	77-0	004694
ř	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/s		
ř	Termii	I Consider!)322-5910
Ī	ation Amena return	ded tions Character and area and AID . 4	G Gross receipts \$	1,585,425.
Ī	Applic		H(a) Is this a group re	
_	pendi	F Name and address of principal officer JOHN BRENTAR	for affiliates?	Yes X No
			41 H(b) Are all affiliates inc	cluded? Yes No
ī	Tax-ex	empt status X 501(c) (3	If "No," attach a	list (see instructions)
J	Websi	te: ► WWW.MORRISSEY-COMPTON.ORG	H(c) Group exemptio	n number 🕨
K	Type of	organization: X Corporation Trust Association Other ► L Y	ear of formation: 1982 n	A State of legal domicile: CA
F	Part I∐	Summary		
ç	, 1	Briefly describe the organization's mission or most significant activities LEARNING	DISABILITY R	<u>EMEDIATION</u>
S				
10200	2	Check this box If the organization discontinued its operations or disposed of n		
	3	Number of voting members of the governing body (Part VI)	3	10
	8 4	Number of voting members of the governing body (Part VI/me ta) Number of independent voting members of the governing body (Rank-More ta) Total number of employees (Part V. line 2a)	4	10
AUG 1	5	Total number of employees (Part V, line 2a)	5	19 50
3	6	Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, line 12, column (2, 2010)	\mathcal{O}	0.
OF 6	7a	Total gross unrelated business revenue from Part VIII, Irre 12, column (c) 9 2010	7a 7b	0.
	ь	Net unrelated business taxable income from Form 990-7, line 34	Prior Year	Current Year
SCANNE	8 8	Contributions and grants (Part VIII, line 1h)	311,590.	234,078.
%	3	Program service revenue (Part VIII, line 2g)	1,169,988.	1,193,363.
8		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	54,708.	-20,927.
\bigcirc	-	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	
(J)		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,536,286.	1,406,514.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	109,209.	160,899.
		Benefits paid to or for members (Part IX, column (A), line 4)		
و	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	974,276.	1,085,647.
0 0 0 0 0	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Ş	g b	Total fundraising expenses (Part IX, column (D), line 25) 16,500.		
Ц	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	385,103.	265,673.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,468,588.	1,512,219.
_	19	Revenue less expenses Subtract line 18 from line 12	67,698.	-105,705.
s or	Balances 20		Beginning of Year	End of Year
SSet	음을 20	Total assets (Part X, line 16)	736,638.	555,353.
let A	믿긷	Total liabilities (Part X, line 26)	1,400. 735,238.	555,353.
	<u>리 22</u> Part II	Net assets or fund balances Subtract line 21 from line 20 Signature Block	135,230.	333,333.
L	artn		ents, and to the best of my knowled	ge and belief, it is true, correct,
		Under penalties of perury, I declare that I have examined this return, including accompanying schedules and stateme and complete. Declaration of preparer (other them officer) is based on all information of which preparer has any knowle	edge	,
e,	gn	1 M. M. J. Just	M 7/	14/10
	ere	Signature of office	Date	
• • • • • • • • • • • • • • • • • • • •	-10	JOHN BRENTAR, EXECUTIVE DIRECTOR		
		Type or print name and title		
_	•	Preparer's Date	1 - 1 - 1 - 1 - 1	er's identifying number structions)
Pa		signature Jack Morlon CPA 7.14.10	self- employed (see in:	<u> </u>
	eparer's e Only	Firm's name (or MORTON & ASSOCIATES, INC.	EIN ►	
US	Comy	self-employed 250 CAMBRIDGE AVENUE, SUITE 101		
_		ZIP+4 PALO ALTO, CA 94306	Phone no. 🕨 (<u>650) 323-6665</u>
M	ay the If	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

	n 990 (2008) rt III Statement		MPTON EDUCATIONAL complishments (see instruct		77-0004694	Page 2
1	TO ENABLE SCHOOL-REL	ATED DIFFICULTI	OULTS WITH LEARNINGES TO ACHIEVE THE	IR GOALS BY P	ROVIDING THE	
	ENVIRONMEN	Т.				
2	the prior Form 990 o		gram services during the year whic	h were not listed on	Yes	X No
3			gnificant changes in how it conduc	ets, any program services?	Yes	X No
4		ese changes on Schedule O	ach of the organization's three large	est program services by ex	nenses	
•	Section 501(c)(3) and	d 501(c)(4) organizations and s	section 4947(a)(1) trusts are require nue, if any, for each program service	ed to report the amount of		
4a	EVALUATION	ISABILITY REMED TO IDENTIFY TH	0,588. including grants of \$ IATION FOR CHILDR E LEARNING DISABI ORATE THE LEARNIN	EN AND ADULTS LITY AND DEVE)
4b	(Code) (Expenses \$	including grants of \$) (R	evenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Re	evenue \$)
					•	
4d	Other program service	es (Describe in Schedule O)	nts of \$ \\/D	evenue \$	1	
40	Total program serve	including gran	360 588 (Must equal Pa			

Form **990** (2008)

Section 501(p)(3) organizations. Did the organization subject to the section 603(e) notice and septiming requirement and proxy tax? If "xes," complete Schedule C, Part II 5 Section 501(p)(4), 501(q)(5), and 501(q)(6) organizations. Is the organization subject to the section 6033(e) notice and septiming requirement and proxy tax? If "xes," complete Schedule C, Part II 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or rivestment of amounts in such funds or accounts? If "xes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histone land areas, or histone structures? If "Yes," complete Schedule D, Part II 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV 10 Did the organization hold assets in VI, IVII,		1		Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributoria? Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(6), and 501(c)(6) organizations. Is the organization subject to the section 603(3) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Did the organization maintain any donor advesed funds or any sociounts 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 II 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 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, dobt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X or Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or Part IV Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part V V. Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part V. Did the organization report and amount in Part X, line 21, serve as a custodian for amounts not listed in Part	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 De the organization engage in direct for indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part II section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II section 501(c)(4), 501(c)(5), and 501(c)(6) organization is the organization subject to the section 603(s) ontobe and reporting requirement and provides? Cerviti II section 6. Part II is built to 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 II is 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 II is Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part IV Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Part IV Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Part V Did the organization report and amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Part V Did the organization report and part X, color part Villa, If yes, 'complete Schedule E D, Part V Did the organization resort on Part X, color organization organization report more than \$15,000 and Part VIII, lines 10, 100 and 100 form grantmakin		If "Yes," complete Schedule A	_1_	Х	
section 501(c)(3), 501(c)(3), and 501(c)(6) organization and page in lobbying activities? If "Yes," complete Schedule C, Part II section 501(c)(3), 501(c)(6), and 501(c)(6) organization and page in lobbying activities? If "Yes," complete Schedule C, Part II section 501(c)(3), 501(c)(6), and 501(c)(6) organization and page in lobbying activities? If "Yes," complete Schedule C, Part II section 501(c)(4), 501(c)(6), and 501(c)(6) organization are used 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 II section 501(c)(6), 501(c)(6), and 501(c)(6) organization and section 501(c)(6), 501(c)(6), and 501(c)(6) organization section 501(c)(6), 501(c)(6), and 501(c)(6) organization and section 501(c)(6), 501(c)(6), and 501(c)(6) organization section 501(c)(6), 501(c)(6), and 501(c)(6) organization section 501(c)(6), 501(c)(6), and 501(c)(6), 501(c)(6), and 501(c)(6), 501(c)(6), and 501(c)(6), 5	2	•	2	Х	
public office? // "Yes," complete Schedule C, Part // Section 501(c)(3) organizations. Did the organizations is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax." If "Yes," complete Schedule C, Part if if it is defined by the property of the section 6033(e) notice and reporting requirement and proxy tax." If "Yes," complete Schedule C, Part if if it is defined and the provided advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1 if it is defined and areas, or historic structures? If "Yes," complete Schedule D, Part 1 if it is defined and areas, or historic structures? If "Yes," complete Schedule D, Part If it is often organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide oradic counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV is the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide oradic counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part V is 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, Part X, XII, and XIII is 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, Part X, XII, and XIII is be organization as chool as described in section 170(b)(1)(A)(V) If "Yes," complete Schedule E. Part II is Did the organization report on Part IX, column (A), line 3 in the organization and provided and the part of the Part XII is Did the organization report on Part IX, column (A), line 3 in the organization and provide schedule G. Part II is Did the organization report more than \$15,000 on Part IX, column (A), li					
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "res," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(6), organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "res," complete Schedule C, Part II 6 Did the organization maintain any domor 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 "res," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or historic structures? If "res," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "res," complete Schedule D, Part II 8 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 "res," complete Schedule D, Part IV 10 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 "res," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, line 21, 13, 15, or 23 if "res," complete Schedule D, Part V V 11 Did the organization report an amount in Part X, line 31, 11, 12, 15, or 23 if "res," complete Schedule D, Part X X, XII, and XIII 11 Is the organization report and accordance with GAAP? If "res," complete Schedule D, Part X X, XII, and XIII 12 Is the organization report and an amount in Part X, line 11, 12, 15, or 23 if Yes, and yet yet and yet yet yet and yet			3		Х
5 Section 501(c)(4), 501(c)(6), and 601(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and priory tax? If "Yes," complete Schedule C, Part II 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 I 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 I Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV I 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, dibit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 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, dibit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 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, dibit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X or provide schedule D, Part V V V V V V V V V V V V V V V V V V V	4		4		Х
reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 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 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide correct counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V 10 X Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with CAMPP If "Yes," complete Schedule D, Part X II, II X Did the organization a school as described in section 170(b)(II)(N)(P) if "Yes," complete Schedule E 11 X Did the organization neoport on Part IX, column (A), line 3, more than \$5,000 of garits or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garits or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report more than \$15,000 on Part X, column (A), line 110 II "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part IX, column (A), line 110 II "Yes," complete Schedule G, Part II Did the organization operate one or more hospitals? II "Yes					
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 II 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 8 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 negotation services? If "Yes," complete Schedule D, Part IV 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 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, Part XI, XII, and XIII 13 Is 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, Part XI, XII, and XIII 15 Is the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraising, business, and programs envire activates outside the U.S.? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 11 and 11	-		5		
on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 courseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? 11 "Yes," complete Schedule D, Part V 12 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? 13 "Yes," complete Schedule D, Part V, VII, VIII, IX, or X as applicable 12 Did the organization a school as described in esecunit or 10(H)(H)(P) If "Yes," complete Schedule D, Part V, VII, VIII,	6				
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part III 1 Did the organization manian collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2 Did the organization peport 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 3 Did the organization hold assets in term, perimaenti, or quasi-endowments? If "Yes," complete Schedule D, Part IV 4 Did the organization noted an amount in Part X, lines 10, 12, 13, 15, or 25? 11 "Yes," complete Schedule D, Part VI, VIII, IV, VIII, IV, or X as applicable 12 Did the organization as chool as described in section 170(b)(1)(A)(0) If "Yes," complete Schedule E 13 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 of "Yes," complete Schedule F, Part II 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 Did the organization report more than \$15,000 on Part IVII, line \$1 and \$2 or \$2	•	· · · · · · · · · · · · · · · · · · ·	6		Х
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part IV, IV, III, IV, IV, IV, IV, IV, IV, IV	7				
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 1 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 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part VI, VII, VII, IV, or X as applicable 11 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, Part XI, XII, and XIII 13 Is the organization a school as described in section 170(b)(1)(A)(IV) If "Yes," complete Schedule E 14 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 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 17 Did the organization report more than \$15,000 on Part KI, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 12e? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule B. Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule II, Parts I and III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule II, Parts I and III 21 Did the organization operate one or more hospitals? If "Yes," complete Schedule II, Parts I and III 22 Did the organization operate one or more hospitals? If "Yes," complete Schedule II, Part III 23 Did the			7		Х
Schedule D, Part III 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 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable 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, IP arts XI, XII, and XIII Is the organization a school as described in section 170(b)(1)(A)(i)(?) If "Yes," complete Schedule E The Did the organization maintain an office, employees, or agents usuated of the U S? If a Did the organization maintain an office, employees, or agents usuated of the U S? If a Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.Is ? If "Yes," complete Schedule F, Part II 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 III Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II Did the organization report more than \$5,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule I, Part I II Did the organization operate one or more hospitals? If "Yes," complete Schedule II Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part I II Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part II Did the organization newort more than \$5,000 on Part IX, column (A), line 2? If "Yes,"	8				
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 V 10 Did the organization of lad sests in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part VI, VIII, IX, or X as applicable 12 Did the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 11 X 13 X 14 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 II 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 Did the organization report more than \$15,000 of Part IX, column (A), line 110 Pres," complete Schedule G, Part II 16 Did the organization report more than \$15,000 of Part IX, column (A), line 110 Pres," complete Schedule G, Part II 17 X 18 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 16 Did the organization operator more than \$5,000 on Part IX, column (A), line 110 Pres," complete Schedule I, Part II 18 X 19 Did the organization operator more than \$5,000 on Part IX, column (A), line 110 Pres," complete Schedule I, Part II 18 X 19 Did the organization operator more than \$5,000 on Part IX, column (A), line 110 Pres," complete Schedule I, Part II 18 X 19 Did the organization operator more than \$5,000 on Part IX, column (A), line 110 Pres," complete Schedule I, Part II 18 X 19 Did the organization operator more than \$5,000 on Part IX,			8	1	X
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11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? 12 Did the organization report and amount in Part X, lines 10, 12, 13, 15, or 25? 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization a school as described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 15 Did the organization as chool as described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 16 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 16 Did the organization pert on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 17 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 18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 10 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and III 21 Did the organization have a taxexempt bond suse with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," complete Schedule I, Part II 22 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 23 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	10		10		X
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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 13 Is the organization a school as described in section 1700(h(1)(A)(P) if "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the U S? 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 II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garsts or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 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 II 16 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II 19 X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Part I I and II 19 X 19 Did the organization have a tax-exempt bond issue with an outstanding parnocipal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," complete Schedule I, Part II 19 Did the organiz		·	11	Х	
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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 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I I 18 Did the organization report more than \$15,000 total on Part VIII, line 9a? If "Yes," complete Schedule G, Part II I 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III I 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III I 21 Did the organization report more than \$5,000 on Part IX, column (A), line 11 If "Yes," complete Schedule I, Parts I and II I 22 Did the organization report more than \$5,000 on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II I 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 57 if "Yes," complete Schedule I, Parts I and III I 24 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 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 27 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 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," co	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			
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17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 21 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 22 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No", go to question 25 24a X 25b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 25c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25d 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 25d Was a loan to or by a current or former officer, director, trustee, key employee, inghly compensated employee, or disqualified person related to such an individual? If "Yes," complete Schedule L, Part III 27d 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 Sc	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 23 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 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 25c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 27d Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 27d 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 28d Section 50 related to such an individual? If "Yes," complete Schedule L, Part III 28d Contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 29d Contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 39d Contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		located outside the United States? If "Yes," complete Schedule F, Part III	16_		_X
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		contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		000 "	

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, Part IV b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV 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 28b		• • •		Yes	No
indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV 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 28b X 28b X 28b X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Ine 1 34 Was the organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
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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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	b	Have a family member who had a direct or indirect business relationship with the organization?			
corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		If "Yes," complete Schedule L, Part IV	28b		_X_
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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, III, IV, and V, line 1 Say Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30		corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X	
contributions? If "Yes," complete Schedule M 30	29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_	_X	
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	}		
If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		contributions? If "Yes," complete Schedule M	30_		_X_
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3° If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	31	Did the organization liquidate, terminate, or dissolve and cease operations?			
Schedule N, Part II 32 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° If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		If "Yes," complete Schedule N, Part I	31		_X_
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, III, IV, and V, line 1 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
sections 301 7701-2 and 301 7701-3° If "Yes," complete Schedule R, Part I 33 X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		Schedule N, Part II	32_		_X_
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33_		_X_
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	34	Was the organization related to any tax-exempt or taxable entity?			
If "Yes," complete Schedule R, Part V, line 2 35 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		_X_
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
		If "Yes," complete Schedule R, Part V, line 2	35		<u>X</u>
If "Yes." complete Schedule R. Part V. line 2	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
		If "Yes," complete Schedule R, Part V, line 2	36		<u>_x</u>
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37				
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			

Form **990** (2008)

008) MORRISSEY-COMPTON EDUCATIONAL CENTER
Statements Regarding Other IRS Filings and Tax Compliance 77-0004694 Page 5 Part V

	·		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 1			
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	l		}
	(gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 19			
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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	_3a_		X
þ	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		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		<u>X</u>
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).			
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		<u>X</u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u>X</u>
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		v
	benefit contract?	7e		<u>X</u> _
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_7f		<u>X</u> _
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	_7h		
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	8		
9	excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter. N/A	- 30		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		ľ	
11	Section 501(c)(12) organizations. Enter. N/A		į	
 а	Gross income from members or shareholders 11a		i	
	Gross income from other sources (Do not net amounts due or paid to other sources against			
~	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
			200	

Form 990 (2008) MORRISSEY-COMPTON EDUCATIONAL CENTER 77-0004694 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

sec	tion A. Governing Body and Management			
			Yes	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			
þ	Enter the number of voting members that are independent 1b 1	2	l	
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	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?	3	L.	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	L.,	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	<u></u>	X
6	Does the organization have members or stockholders?	6	<u> </u>	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
-	by the following			[
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
-	Does the organization have local chapters, branches, or affiliates?	9a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
~	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	30		
10	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	1,0		_
''		11		x
300	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies	1 11	<u> </u>	Δ.
	tion B. I onoics		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	140
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120		
IJ	to conflicts?	12b	x	
_	•	120		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	X	
40	In Schedule O how this is done .	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		.	
	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	Describe the process in Schedule O (see instructions)	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
	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	1		
	exempt status with respect to such arrangements?	16b	L	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial	
	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	tion.	·	
	MORRISSEY-COMPTON EDUCATIONAL CENTER - (650) 322-5910			

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

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

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

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

(A)	(B)		(C)				(D)	(E)	(F)
Name and Title	Average	١.	Position check all that app		 Reportable	Reportable	Estimated		
	hours per week	Individual trustee or director	Institutional trustee	all		Highest compensated de comployee	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
SARA SPANG									
PRESIDENT	2.00	X		X		<u> </u>	0.	0.	0.
CAMILLA NERI									
SECRETARY	2.00	X		X			0.	0.	0.
JACK MORTON									
TREASURER	2.00	X		X			0.	0.	0.
JEANNE WARE									
BOARD MEMBER	2.00	X					0.	0.	0.
GINNA LAZAR									
BOARD MEMBER	2.00	X					0.	0.	0.
REBECCA CHAVEZ	į								
BOARD MEMBER	2.00	X					0.	0.	0.
JEFF WILEY									
BOARD MEMBER	2.00	X			L		0.	0.	0.
RUDIE TRETTEN									
BOARD MEMBER	2.00	X					0.	0.	0.
PATRICIA MORRISSEY									
FOUNDER	40.00	X		X			37,532.	0.	0.
CAROLYN COMPTON								_	_
FOUNDER	40.00	X		Х		_	16,519.	0.	0.
JOHN BRENTAR								_	_
DIRECTOR	50.00				X		 204,700.	0.	0.
JESSICA MATTHEWS							440 555		
EMPLOYEE	40.00				X		113,777.	0.	0.
		_							· · · · · · · · · · · · · · · · · · ·
		<u> </u>				$\vdash \vdash$			 -
						$\vdash \vdash$			
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Par	t VII Section A. Officers, Directors, Tr	ustees, Key Er	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A) ·	(B)				C)			(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportable		Es	stimate	ed
		hours	(c	hecl	all	that	app	ly)	compensation	compensation from related		an	nount	of
		per week	ector			İ			from the	organizations		com	other pensa	tion
			Individual trustee or director	8			Highest compensated employee		organization	(W-2/1099-MIS			om th	
			rustee	Institutional trustee		æ	mpen		(W-2/1099-MISC)			_	anızat	
			dual	utiona		Key employee	estco	뉼	:				d relat anızatı	
			횰	Insti	Officer	ξ _φ	皇皇	Form				orga	ai iiZati	OHS
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		<u> </u>		<u> </u>	<u> </u>	ļ		L	372,528.		0.			0.
	Total Total number of individuals (including thos	o in 10) who ro	0011	od n		tha	n \$1	00.			<u> </u>			0.
2	compensation from the organization	e iii ia) wilo ie	Ceiv	eu II	ше	ша	ПФІ	00,	000 in reportable		•			2
	compensation non-the organization		-										Yes	No
3	Did the organization list any former officer	, director or tru	stee	, ke	y en	nplo	yee,	or h	nighest compensated en	nployee on	ĺ			
	line 1a? If "Yes," complete Schedule J for				-					•		3		<u>X</u>
4	For any individual listed on line 1a, is the s									the organization				
	and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sche	edule	e J f	for such individual			4	X	
5	Did any person listed on line 1a receive or				rom	any	unr/	elat	ted organization for servi	ces rendered to				
	the organization? If "Yes," complete Sched	dule J for such	pers	on								5		X
	tion B. Independent Contractors Complete this table for your five highest co	mnonostad in	400		nt c		roote		that recoved more than	\$100,000 of com	DODE	ation f	rom	
1	the organization NONE	ompensated in	Jeh	SHUE	: III C	.01111	acic	1151	mat received more main	\$100,000 OI COIII	pense	ation i	70111	
	(A)								(B)			(0		
	Name and business	address							Description of s	ervices	C		nsatio	n
	· · · · · · · · · · · · · · · · · · ·													
	····													
								1						
				-				\neg				_		
_														
2	Total number of independent contractors (including those	e in	1) wl	no re	ecer	ved i	mor	e than \$100,000 in com	pensation				
	from the organization	0												
												Form	990 (2	2008)

				MPTON EDU	CATIONAL C	ENTER	<u>77-0004</u>	694 Page 9
Pa	rt V	III Statement of Reve	nue					
,		• •			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts tts	1 a	a Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	t	Membership dues	1b					
ts,	(Fundraising events	1c					
jg i	•	d Related organizations	1d					
ins,	•	 Government grants (contribute 	tions) <u>1e</u>					
er is	f	All other contributions, gifts, gran						
훈됨		similar amounts not included abo	ove 1f 2	234,078.		1		}
D D	_	Noncash contributions included in lines	s 1a-1f \$	50,000.				
0 6	<u>t</u>	Total. Add lines 1a-1f			234,078.			
				Business Code	700 F60	T00 T60		
်င့်	2 a		JA.I.TON	611710	722,763.			
e Š	t	THERAPY		611710	142,839.			
m S	•	SUMMER SCHOOL		611600	119,450.	119,450.		
gra Re	•	COUNTY CONTRACT	rs	611710	105,174.	105,174.		
Program Service Revenue	6	TUTORING FEES		611710	54,041. 49,096.	54,041. 49,096.		
_		All other program service reve	enue .		1,193,363.	49,096.		
\dashv	<u>.</u>	Total. Add lines 2a-2f	duudanda intar		1,193,303.			
	3	Investment income (including other similar amounts)	dividends, inter	esi, and	21,956.			21,956.
	4	Income from investment of ta	v.evemnt hand t	proceeds	21,550.			21,550.
	5	Royalties	x exempt bond (DI OCCEUS				
		rioyanios	(ı) Real	(ii) Personal				
	6 a	Gross Rents	1711001	(ii) / Grooniai				
	t							
	-	Rental income or (loss)						
		Net rental income or (loss)	<u> </u>	•				
i		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	136,028.					
	b	Less: cost or other basis						
		and sales expenses	178,911.	,				
1	c	Gain or (loss)	-42,883.	<u>, </u>				
	c	Net gain or (loss)			-42,883.	-42,883.		
Other Revenue	8 a	Gross income from fundraisin including \$						
ě		contributions reported on line	1c) See					
r e		Part IV, line 18	а					
된	b	Less direct expenses	b					
		Net income or (loss) from fund	-					
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	. а					
İ		Less direct expenses	. b	L				
		Net income or (loss) from gam	=					
	10 a	Gross sales of inventory, less						
		and allowances	a .					
		Less cost of goods sold	b					
H		Net income or (loss) from sale		D Code				
 	11	Miscellaneous Revenu		Business Code				
	11 a							
	b						·	
	ن بر	All other revenue						
	_	Total, Add lines 11a-11d	• •					
	12	Total Revenue. Add lines 1h 2g, 3,	4, 5, 8d, 7d 8c 9c 10	0c. and 11e	1,406,514.	1,150,480.	0.	21,956.
832009 02-02-						<u> </u>	<u> </u>	Form 990 (2008)

Form 990 (2008)

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). (C) Management and (B) Program service (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 160,899. 160.899. the U.S. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 335,275. 37,253. 372,528. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 595,256. 535,730 59,526. Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 5,121 51,212. 46,091 Other employee benefits 9 66,651. 6,665. 59.986. 10 Payroll taxes Fees for services (non-employees). Management Legal Accounting C Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees q Advertising and promotion 12 1,500. 23,812 19,931. 2,381. Office expenses 13 14 Information technology Royalties 15 63,034. 56,731. 6,303 16 Occupancy 2,844. 2,560. 284 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 11 10. 1. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 2,551. 2,296. 255. Depreciation, depletion, and amortization 22 20,562. 18.506. 2,056. 23 Insurance 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.) 15,000. 5,000. a <u>CONTRIBUTED</u> <u>SALARY</u> 50,000. 30,000. 2,723. 27,226. 24,503. SUPPLIES 19,311. 2,146. 21,457. BAD DEBT 11,631. 1,163. d PROFESSIONAL FEES 10,468. e CHALLENGE SCHOOL RENT 11,450. 10,305 1,145. 3,109. 31,095. 27,986. f All other expenses 16,500. 512,219. 1,360,588. 135,131. Total functional expenses. Add lines 1 through 24f 25 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

									
		•			(A)		[(t	B)	
					Beginning of year		<u> </u>	of year	
	1	Cash - non-interest-bearing		-	28,462.			$\frac{27}{60}$	
	2	Savings and temporary cash investments		-	109,883.		 '	<u>68,2</u>	<u> 134.</u>
	3	Pledges and grants receivable, net	-	····	3	 			
	4	Accounts receivable, net		4	 				
	5	Receivables from current and former officers, di		· · · · · · · · · · · · · · · · · · ·					
		employees, or other related parties. Complete P		ſ		5	 		
	6	Receivables from other disqualified persons (as				<u> </u>			
		4958(f)(1)) and persons described in section 495	68(c)(3)(B) Complete					
		Part II of Schedule L		-		6	ļ		
əts	7	Notes and loans receivable, net		. -		7	 		
Assets	8	Inventories for sale or use				8_	 		
⋖	9	Prepaid expenses and deferred charges				9	ļ		
	10a	Land, buildings, and equipment cost basis	10a	24,730.					
	b	Less accumulated depreciation Complete							
		Part VI of Schedule D	10b	18,514.	6,968.	10c	 	<u>6,2</u>	<u> 216.</u>
	11	Investments - publicly traded securities				11	<u> </u>		
	12	Investments - other securities See Part IV, line 1	1	1		12			
	13	Investments - program-related See Part IV, line	11	į	591,325.	13	4	<u>53,5</u>	<u> 69.</u>
	14	Intangible assets		. [14	ļ <u> </u>		
	15	Other assets See Part IV, line 11				15	ļ		
	16	Total assets. Add lines 1 through 15 (must equa	al line	34)	736,638.	16	5	<u>55,3</u>	<u> </u>
	17	Accounts payable and accrued expenses				17			
	18	Grants payable				18			
	19	Deferred revenue		19					
S	20	Tax-exempt bond liabilities		20					
	21	Escrow account liability Complete Part IV of Sch	nedule	· D		21			
Ĭ	22	Payables to current and former officers, director	s, trus	tees, key employees,					
Liabilities		highest compensated employees, and disqualifie	ed per	sons Complete Part II					
		of Schedule L			1,400.	22			
ļ	23	Secured mortgages and notes payable to unrela	ited th	ird parties		23			
	24	Unsecured notes and loans payable		<u> </u>		24			
	25	Other liabilities Complete Part X of Schedule D				25			
	26	Total liabilities. Add lines 17 through 25			1,400.	26	ļ		0.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete					
တ္မ		lines 27 through 29, and lines 33 and 34.							
ğ	27	Unrestricted net assets		<u></u>	116,413.	27	•	74,2	84.
lala	28	Temporarily restricted net assets			417,627.	28	2	<u>79,8</u>	<u> 371.</u>
B	29	Permanently restricted net assets			201,198.	29	21	<u>01,1</u>	<u>.98.</u>
Fund Balances		Organizations that do not follow SFAS 117, cl	neck h	nere 🕨 🔲 and					
ō		complete lines 30 through 34.							
Net Assets or	30	Capital stock or trust principal, or current funds				30			
ISS	31	Paid-in or capital surplus, or land, building, or eq	uipme	nt fund		31			
et /	32	Retained earnings, endowment, accumulated in	come,	or other funds		32			
ž	33	Total net assets or fund balances			735,238.	33	5!	<u>55,3</u>	<u>53.</u>
	34	Total liabilities and net assets/fund balances			736,638 <u>.</u>	34	5!	<u>55,3</u>	<u> 53.</u>
Par	t XI	Financial Statements and Reporting							
							,	Yes	No
1	Acco	ounting method used to prepare the Form 990.	X c	ash Accrual 🔲	Other				
2a		the organization's financial statements compiled			ccountant?		2a_	<u> </u>	<u> </u>
ь	Were	the organization's financial statements audited b	y an ır	ndependent accountant?			2b		<u> </u>
С		es" to lines 2a or 2b, does the organization have a			sibility for oversight of the	audit	i,		
		w, or compilation of its financial statements and s					2c		<u> </u>
За	As a	result of a federal award, was the organization red	quired	to undergo an audit or aud	its as set forth in the Sing	le Auc	dit	1	
		and OMB Circular A-133?					<u>3a</u>		X
b	If "Ye	es," did the organization undergo the required aud	it or a	udits?			3b		<u></u>
	1 12-18						Forr	n 990	(2008)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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) nonexempt charitable trusts.

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

Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

			MORRISS	EY-COMPTON E	DUCAT	TONAL	CENT	EK			<u> </u>	1094	
Pa	rt I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t) (see ins	tructions)				
The	organi	zation is not a	private foundation	because it is. (Please ch	eck only o	ne organiz	zation)						
1		A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i).				
2	X			'0(b)(1)(A)(ii). (Attach Sc									
3	\Box			tal service organization			170(b)(1)	(A)(iii). (At	tach Sche	dule H)			
4	一			operated in conjunction							ne hospita	l's name	e,
•		city, and stat	-						· · · · · · · ·	•			
5				benefit of a college or u	niversity o	wned or or	perated by	a govern	mental uni	t describe	ed in	-	
J		_	(b)(1)(A)(iv). (Comple		,		,	- 3-					
				ent or governmental uni	t describer	d in eactio	n 170(h)(·	WAW					
6	\vdash	•		ent of governmental and eives a substantial part					or from the	neneral r	nublic dosc	ribed ir	2
7	ш	-			oi its supp	on nom a	governme	intai unit t	n nom me	general p	Jubiic desc	, indea ii	•
_		•	b)(1)(A)(vi). (Comple		(Clata	Dod II)							
8	\vdash	-		section 170(b)(1)(A)(vi).				L .A					
9	ш			eives (1) more than 33									
				nctions - subject to certa									
				axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	inization a	itter June 3	30, 1975	5.
			509(a)(2). (Complete										
10				perated exclusively to te									
11				perated exclusively for the									r
				ations described in secti				2). See se e	ction 509(a)(3). Che	ck the box	(that	
		describes the	type of supporting	organization and compl	ete lines 1	1e through	11h				1		
	_	a Ll Type I		_ ,,		e III - Func	-	-		d	Type III - (
е				it the organization is not									1
				han one or more publicly						9(a)(1) or s	ection 509	∂(a)(2)	
f		If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		supporting of	rganization, check th	nis box						•			
g		Since August	t 17, 2006, has the o	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
		(i) A perso	n who directly or ind	irectly controls, either al	lone or tog	ether with	persons o	described	ın (ıı) and ((III) below,		Yes	<u>No</u>
		the gove	erning body of the si	upported organization?							11g(i)	$\downarrow \downarrow \downarrow$	
		(ii) A family	member of a persor	n described in (i) above?)						11g(ii)		
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	∍?					11g(iii)	ــــــــــــــــــــــــــــــــــــــ	
h		Provide the fo	ollowing information	about the organizations	the organ	ization sup	oports						
/i)	Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did yoi	notify the	(vi) ls	s the	(vii) Ar	nount of	ŀ
(1)		nization	(11) 2.114	organization (described on lines 1-9		sted in your		ion in col.	organizati (i) organiz	on in col. [red in the l		port	
	3			above or IRC section	governing	document?	(i) of you	r support?	Ü.S	.2			
				(see instructions))	Yes	No	Yes	No	Yes	No			

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

Schedule A	A (Form 990 or 990-EZ) 2008			
Part II	Support Schedule for Organizations	Described in Sections	170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)

Page 2

Section A. Public Support Calendary year (or fisal year tegniman yii) 1 Giffs, grants, controlutions, and membership fees received (Do not michide any "unusual grants.") 2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 4 Total. Add lines 1 - 3 5 The portion of total contributions by each person (other than a governmental unit to the organization without charge 4 Total. Add lines 1 - 3 5 The portion of total contributions by each person (other than a governmental unit or jublicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public Support Service in stem lines Section B. Total Support Calendar year (or fiscal year beginning ni) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 4 Scross income from miterest, dividendes, payments received on securities loans, reints, royalbes and mome from smilar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on or lost from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross recepts from related activities, site (see instructions) 13 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage Section C. Computation of Public Support Percentage Section C. Computation of Public Support deorganization and in the check the box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 1074 - Hack-sand-circumstances test - 2008, if the organization did not check be box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization and did not check		(Complete only if you checke	a the box on line :	5, 7, or 8 of Part I.)			·
1 Gifts, grants, controbutions, and mombership fees received (Do not molude any "unusual grants.") 2 Tax revenues leved for the organization of seenant and entire part to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total, Add ines 1-3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 25% of the amount shown on line 11, column (f) 6 Public Support, Seriest less from less Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total organization from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not income from unrelated business activities, whether or not the business is regularly carried to uniness activities, whether or not the business is regularly carried to uniness activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assess (Explain in Part IV) 11 Total support. Add lines 7 through 10 2 Gross recepts from related activities, etc. (see instructions) 12 Gross recepts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 16 Sa 31 1/3% support test 2007. If the organization did not check the box on line 13, 16a, or 16b, and line 14 is 10% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-	Se	ction A. Public Support					· • · · · · · · · · · · · · · · · · · ·	
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Include any "unusual grants.") 2 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 - 3 5 The portion of total contributions by each person (other than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public Support. Service time 5 from line 4 8 Gross income from ine 14 8 Gross income from the state of the state of the publicly supported organization and income from smaller state or the publicly supports. Service time 5 from line 4 8 Gross income from the state of the state of the public support. Service time 5 from line 4 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 950 is for the organization's first, second, third, fourth, or firth tax year as a section 501(x)3 organization, check this box and atop here. 5 Evolus support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 13 Gross receipts from related activities, etc. (see instructions) 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage from 2007 Schedule A, Part IVA, line 26f 15 Public support percentage from 2007 Schedule A, Part IVA, line 26f 15 Scholes as 31 /3% support 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 did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization of did to the ket, a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization of did to the ket,	1	Gifts, grants, contributions, and						
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tazton's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 - 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public Support. Settrate times from time. 8 Gross income from interest, dividends, payments received on securities (large from the safe of capital assets (Explain in Part IV) 10 Total support. Add lines 7 It include gain or loss from the safe of capital assets (Explain in Part IV) 11 Total support. Add lines 7 It include 10 Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 16 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 17 Amounts from the safe of capital assets (Explain in Part IV) 18 First five years. If the Form 990 is for the organization of column (f) divided by line 11, column (f)) 19 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 10 Other income. Do not include gain or loss from the safe of capital assets (Explain in Part IV) 19 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 10 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 11 Total support test - 2008. If the organization did not check the 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 and into 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 organizatio		ınclude any "unusual grants.")						
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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	15	Public support percentage from 2007	7 Schedule A, Part	: IV-A, line 26f			15	%
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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		stop here. The organization qualifies	as a publicly supp	oorted organizatio	n			
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and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization		and stop here. The organization qual	lifies as a publicly	supported organia	zation	•		▶□
·	17a	10% -facts-and-circumstances tes	t - 2008. If the org	janization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
. \square		and if the organization meets the "fac	cts-and-circumstar	nces" test, check t	this box and stop I	here. Explain in Pa	art IV how the organ	ization
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		meets the "facts-and-circumstances"	test The organiza	ation qualifies as a	publicly supporte	d 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	t	10% -facts-and-circumstances tes	t - 2007. If the org	anization did not	check a box on lin	e 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.		organization meets the "facts-and-circ	cumstances" test	The organization	qualifies as a publ	icly supported org	anization	▶□
	18	Private foundation. If the organization	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box	and see instructions	<u>s</u> ▶□
· ·	18	Private foundation. If the organization	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box	and see instructions	s

Sch Pa	edule A (Form 990 or 990 EZ) 2008 irt III Support Schedule for ()rganizations	Described in	Section 509(a)(2) (Complete only	of you shooked the h	Page 3
	ction A. Public Support	Jigarii Zatioris	Described iii	000110110000	(Complete only	n you checked the b	ox on line 9 of Part 1.)
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	(a) 2004	(b) 2003	(0) 2000	(u) 2001	(6) 2000	(i) iotai
'	membership fees received (Do not						
	include any "unusual grants ")						
_	,					 	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 - 5						
_	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received		· · · · · · · · · · · · · · · · · · ·				
_	from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)					<u>.</u>	
Sec	ction B. Total Support	,		T =			
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income]		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization	's first, second, thu	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here	J			•		ightharpoons
Sec	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2008 (ine 8, column (f) c	divided by line 13,	column (f))		15	%
	Public support percentage from 2007			· · · · · · · · · · · · · · · · · · ·		16	%
	ction D. Computation of Inves			-		1	
17		_				17	%
18	Investment income percentage from:					18	%
	33 1/3% support tests - 2008. If the				15 is more than 3		
132	more than 33 1/3%, check this box a						▶ □
Į.	33 1/3% support tests - 2007. If the						and
C	line 18 is not more than 33 1/3%, che						▶ □
20	Private foundation. If the organization		•				
<u> 20</u>	Private foundation, if the organization	Train flot check a	DOX OF THE 14, 19	a, or 130, crieck tr	IIS DON ALIO SEE IN	and chons	

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047_ Open to Public

Inspection

Name of the organization MORRISSEY-COMPTON EDUCATIONAL CENTER 77-0004694

Employer identification number

Pa			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 advis	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds may be	e used only
	for charitable purposes and not for the benefit of the donor of		
Pa			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat	Preservation of certifi	
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a con	servation easement on the last day
_	of the tax year.		·
	5. 0.5 (0.7)		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re		
3	year >		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per		nd
•	enforcement of the conservation easements it holds?	3, -, ,	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the year	>
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		=: :
•	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizar		
	conservation easements		·
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther 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, no	t to report in its revenue statement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures,
_	or other similar assets held for public exhibition, education, of		
	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 tre	asures, or other similar assets for financia	
~	the following amounts required to be reported under SFAS 1		· • · · · · · · · · · · · · · · · · · ·
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		► \$ ► \$
D	resets included in Form 550, Fall A		

		EY-COMPTON							104694		
Par									_		
3	Using the organization's accession and other	records, check any	of the	following tha	at are a signif	ficant use	of its coll	ection ite	ems (chec	k all	
	that apply)										
а	Public exhibition	c	╸┕┈	Loan or exc	hange progr	ams					
ь	Scholarly research	e	. L_	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explai	n how t	hey further t	he organizat	ion's exer	npt purpo	se in Pa	rt XIV		
5	During the year, did the organization solicit or	r receive donations	of art, h	istorical trea	sures, or oth	er sımılar	assets				
	to be sold to raise funds rather than to be ma	untained as part of	the orga	inization's co	ollection?				Yes		No_
Par	t IV Trust, Escrow and Custodial	Arrangements	. Comp	lete if organi	zation answ	ered "Yes	s" to Form	990, Pa	rt IV, line 9	9, or	
	reported an amount on Form 990, Par	t X, line 21									
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for	contribution	ns or other as	ssets not	ıncluded				
	on Form 990, Part X?		,						Yes		No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table.	•						
	Tres, explain the analigement in tack xiv	and complete the re	,	tuoio.					Amount		
_	Beginning balance						1c		7 11.7.2.2.7.1		
9	Additions during the year						1d				
	Distributions during the year						1e				
e	• ,						1f				
f O-	Ending balance	orm 000 Doct V line	012				<u> </u>		Yes		No
2a	Did the organization include an amount on Fo	onn 990, Part A, inte							res		INO
Par	t V Endowment Funds. Complete if	organization analysis	arad "Va	o" to Form (DOO Doct IV	lino 10					
Fai	Lindowine it Funds. Complete ii		ľ				/ D Three	aara baak	(-) Four		
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back [(d) Three y	ears back	(e) Four	years t	Jack
1a	Beginning of year balance								 		
b	Contributions				<u> </u>				 		
С	Investment earnings or losses				ļ	-					
d	Grants or scholarships								ļ		
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance					1			<u> </u>		
2	Provide the estimated percentage of the year	end balance held a	as.								
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment ▶9	6									
За	Are there endowment funds not in the posses	ssion of the organiz	ation th	at are held a	ind administe	ered for th	ne organiz	ation	_		
	by									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	n Sche	dule R?					3b		
4	Describe in Part XIV the intended uses of the	organization's ende	owment	funds							
Par					, Part X, line	10					
	Description of investment	(a) Cost or o	ther	(b) Cost	or other (other)		epreciatio	n	(d) Book	value	,
	Land	223.5 (301)									
	Land			-		-					
	Buildings							-			
	Leasehold improvements		<u></u>		4 720		10 51	1.4		5 21	<u> </u>
	Equipment .				4,730.		18,5	14.		5,21	<u></u>
	Other					<u> </u>		_		1	-
<u>Total</u>	. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, colu	<u>ımn (B),</u>	iine 10(c))						<u>5,21</u>	<u>. o .</u>

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 MORRISSEY - Part VII Investments - Other Securities.	COMPTON EDUCAT	IONAL CENTER	77-0004694 Page 3
(a) Description of security or category	(b) Book value	(c) Method	of valuation
(including name of security)	(b) Book value	Cost or end-of-y	ear market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
	**		
			_
Table (Col./b) should equal Form 000. Bod V. col./D) line 12.)			
Total (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related.			
	(b) Book value	(c) Method	of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-y	ear market value
MONEY MARKET FUNDS	1,617.	END-OF-YEAR MAI	
MUTUAL FUNDS	451,952.	END-OF-YEAR MAI	RKET VALUE
			
	177		
		······	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		·-	
Part IX Other Assets. See Form 990, Part X, Irr	ne 15 a) Description		(b) Book value
	<u></u>		
		· · · · · · · · · · · · · · · · · · ·	

Total. (Column (b) should equal Form 990, Part X, col (B)	line 15)		>
Part X Other Liabilities. See Form 990, Part 3	K, line 25		
(a) Description of liability		(b) Amount	
Federal income taxes			
Total. (Column (b) should equal Form 990, Part X, col (B)		No. 4	.b.)d., far, marster to 4
In Part XIV, provide the text of the footnote to the organi	zation's financial statements f	mai reports the organization's lia	tomey for uncertain tax positions

Sche	dule D (Form 990) 2008 MORRISSEY - COMPTON EDUCATION					<u>/ - 01</u>	004694	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Finar	ncial Stat	temen	ıts			
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			1,406	<u>,514.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			1,512	<u>,219.</u>
3	Excess or (deficit) for the year Subtract line 2 from line 1			3				,705.
4	Net unrealized gains (losses) on investments			4			-74	,180.
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			-74	,180.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10			-179	,885.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Reve	nue p	er Ret	urn		
1	Total revenue, gains, and other support per audited financial statements					1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12							
_ a	Net unrealized gains on investments	2a	İ					
b	Donated services and use of facilities	2b						
c	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIV)	2d		-				
e	Add lines 2a through 2d				2	e		
3	Subtract line 2e from line 1					3		
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)	4b						
c	Add lines 4a and 4b		l		4	c		
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)							
Pai	t XIII Reconciliation of Expenses per Audited Financial Statement	ents \	Vith Exp	enses	per Re	eturr)	
1	Total expenses and losses per audited financial statements					1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25							
a	Donated services and use of facilities	2a				- 1		
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				2	e		
3	Subtract line 2e from line 1					3		
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	1			-		
h	Other (Describe in Part XIV)	4b						
6	Add lines 4a and 4b		·		4	c		
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			_		5		
	t XIV Supplemental Information							
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III rt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	, lines	1a and 4; P	art IV, lii	nes 1b a	nd 2b	, Part V, line	4, Part
							<u>.</u> .	

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990 or Form 990-EZ.

Employer identification number 77-0004694

	MORRISSEY-COMPTON EDUCATIONAL CENTER 77	-0004	<u> 1694</u>	
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	_1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarship	s? 2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain	3	Х	
	THE ADVERTISEMENT STATES "NONDISCRIMINATORY ADMISSIONS			
	POLICY." BROCHURES ALSO HAVE THE SAME STATEMENT.	_		
		_		
		_		
4	Does the organization maintain the following?	_		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
C				
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		T	
		_ [
		_		
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X_
С	Employment of faculty or administrative staff?	5c		X
d	Scholarships or other financial assistance?	5d		X
е	Educational policies?	5e		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h	ļ	X
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		İ	
		_		
		_		
		_		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		X
b	Has the organization's right to such aid ever been revoked or suspended?	6b	<u> </u>	<u>X</u>
	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of			
	Rev. Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	7	X	

SCHEDULE I Form 990)			Grants and	Grants and Other Assistance to Organizations,	to Organizations	ō			OMB No 1545-0047
Department of the Treasury nternal Revenue Service		▲ Comple	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.	n answered "Yes," on F	ans in the C.S. " on Form 990, Pe n 990.	art IV, lines 21 or 22.			Open to Public Inspection
Vame of the organization	n MORRISSEY-COMPTON	1	EDUCATIONAL	4				Employer iden	Employer identification number 77-0004694
Part I General Inf	General Information on Grants and Assistance	nd Assistance							
1 Does the organize	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select		
criteria used to av 2 Describe in Part IV	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	stance? ocedures for monite	oring the use of grant	funds in the United	J States			×	X Yes . No
Part II Grants and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments and	Organizations in the	United States. C	omplete if the orga	anization answered "Y	es" on Form 990, Part	t IV, line 21, for a	any
recipient th	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	55,000 Check this	box if no one recipien	it received more th	an \$5,000 Use Pa	irt IV and Schedule I-1	(Form 990) if addition	ial space is need	☐ A per
1 (a) Name and add	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purp or as	(h) Purpose of grant or assistance
								TO ENABLE LOWER INCOME	OWER INCOME
				-				FAMILIES TO OBTAIN	OBTAIN
4 INDIVIDUALS		APPLIED FOR		0	160,899.	FMV	FEE ADJUSTMENTS	PROGRAM BENEFITS	RITS
2 Enter total numbe 3 Enter total numbe	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	nd government org	ganizations			77.1			
HA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule	Schedule I (Form 990) 2008

Page 2 Schedule I (Form 990) 2008 (f) Description of non-cash assistance 77-0004694 (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance MORRISSEY-COMPTON EDUCATIONAL CENTER (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2008 832102 12-18-08 Part III Part IV

SCHEDULE J (Form 990)

Compensation Information

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

2008

OMB No 1545-0047

Open to Public Inspection

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 23.

MORRISSEY-COMPTON EDUCATIONAL CENTER

Employer identification number 77-0004694

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			}
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b		ļ
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
_	CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	,			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a.			
	Receive a severance payment or change of control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ū	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	The foot of any of miles ha of mot the persons and provide the applicable amounts for each norm.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	İ		
•	contingent on the revenues of			
а	The organization?	5a	x	
	Any related organization?	5b		X
-	If "Yes," to line 5a or 5b, describe in Part III			=
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the net earnings of.			
а	The organization?	6a		x
	Any related organization?	6b		X
_	If "Yes" to line 6a or 6b, describe in Part III		1	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<u> </u>		
0	unitial contract exception described in Point 550, Fait VIII, paid of accided pulsuant to a contract that was subject to the		l	x

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

Schedule J (Form 990) 2008

NTER 77-0004694

Page 2

MORRISSEY-COMPTON EDUCATIONAL CENTER

Schedule J (Form 990) 2008

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

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(Q)	(E)	(F) .
(A) Name	-	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Deferred compensation	Nontaxable benefits	Total of columns (B)(I)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	Ξ	204,700.	0	0	0	0	204.700.	0
JOHN BRENTAR	(ii)		0.	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	Ξ							
	(ii)							
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Schedule J (Form 990) 2008

SCHEDULE L

Department of the Treasury

(Form 990 or 990-EZ)

Transactions with Interested Persons

➤ Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, lines 38a or 40b.

OMB No 1545-0047

2008 Open To Public Inspection

Schedule L (Form 990 or 990-EZ) 2008

Name of the organization

Employer identification number

MO:	<u>RRISSEY</u>	-C01	MPT	ON_	EDUCATION	ONAL C	ENTER			<u> 7-00</u>	<u>0469</u>	4	
Part I Excess Benefit													
To be completed by	y organization	s that a	answe	red "Y	es" on Form 9	90, Part IV	, line 25a or	25b, or l	orm 99	0-EZ, Pa	rt V, line	40b	
1 (a) Name of dis	soualified ner	son				(b)	Description	of transa	ection			(c) Cor	rected?
(a) Name of the		3011										Yes_	No
							_						
			-				_						
						-							
													ļ
	- 							 -					
													<u> </u>
2 Enter the amount of tax imp section 4958	osea on the t	organiz	ation	manag	jers or disquaii	neo persor	is during the	year ur	idei	▶ ¢			
3 Enter the amount of tax, if a	inv. on line 2	ahove	reimh	ursed	by the organiz	ation .						•	
5 Enter the amount of tax, if a	iriy, Ori iiric 2,	above,	TOME	,ui 3cu	by the organiz	ation				•			
Part II Loans to and/o	r From Int	erest	ed P	erso	ns.								
To be completed by	v organization	s that a	answe	red "Y	es" on Form 9	90, Part IV.	line 26, or f	orm 990)-EZ, Pa	rt V, line	38a		
(a) Name of interested	(b) Loan		- 1		iginal principal	Τ΄	ance due	T) In	(f) App	oroved	(g) W	ritten
person and purpose	the orga	nızatıor	n?	` '	amount	` ′		def	ault?		ard or uttee?	agree	ment?
	То	Fro	m					Yes	No	Yes	No	Yes	No
y = 440 - 12													
	_							1					
	<u> </u>					<u> </u>						<u> </u>	
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						-		ļ		<u> </u>			
F-1-1			1		▶ \$	<u> </u>		<u> </u>			<u> </u>		
<u>Fotal</u> Part III │ Grants or Assis	stance Ber	nefitir	na In	teres				<u> </u>		I .		ı	
To be completed by			-				line 27						
(a) Name of interested		3 triat c			ationship betw			and		(c) Amou	unt of ar	ant or tv	pe
(2)	po		'	(5) 110.		rganization		uu			f assista		F
												-	
													
Dart IV Dusiness Trans		1			stad Damas				1.				
Part IV Business Trans			_						_				
To be completed by		s that a								D		(e) Sha	aring of
(a) Name of interested	person				ship between i and the organi		(c) Amo			Descript transacti		organiz	ation's
			F									rever	No
JACK MORTON		 	R∩∆1	י מא	MEMBER'S	FTRM	1	725	тах	. & A	CCOIT	Yes	X
CAM NERI					MEMBER'S					ESTM			X
		Ť		4				. , _ , _					
										-			
						-			1				_

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

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

SCHEDULE M (Form 990)

NonCash Contributions

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

2008 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Employer identification number

MORRISSEY-COMPTON EDUCATIONAL CENTER

77-0004694

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line			g	
1	Art - Works of art							
2	Art - Historical treasures		-					
3	Art - Fractional interests	- · · ·					_	
4	Books and publications							
5	Clothing and household goods				·	_		
6	Cars and other vehicles							
_	Boats and planes				-	-		
7	Intellectual property							-
8	· · ·					***		
9	Securities - Publicly traded		-			-		_
10	Securities · Closely held stock				 			
11	Securities · Partnership, LLC, or							
	trust interests							
12	Securities · Miscellaneous							
13	Qualified conservation contribution			•,				
	(historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate Residential							-
16	Real estate - Commercial				_			
17	Real estate - Other					_		
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (SALARIES)	X	2	50,000	.FMV			
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	g the tax year t	or contributions				
	for which the organization completed Form 828	33, Part IV, I	Donee Acknow	rledgment 2	9			
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property	reported in Part I, lines 1	-28 that it must hold for			
	at least three years from the date of the initial of							
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II		•					
31	Does the organization have a gift acceptance p	olicy that re	equires the rev	iew of any non-standard o	contributions?	31		X
	Does the organization hire or use third parties of							
	contributions?		J.:	, ,,		32a		Х
h	If "Yes," describe in Part II				•			
33	If the organization did not report revenues in co	olumn (c) fo	r a type of pror	perty for which column (a)	is checked.			
-	describe in Part II	2.3 (0) 101	- 1,000,000	,				

SCHEDULE O

(Form 990)

832211 12-18-08

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

2008
Open to Public Inspection

Name of the organization

MORRISSEY-COMPTON EDUCATIONAL CENTER

Employer identification number 77 - 0004694

Schedule O (Form 990) 2008

FORM 990, PART VI, SECTION A, LINE 2: BUSINESS RELATIONSHIPS WITH OTHER
DIRECTORS: A BOARD MEMBER'S FIRM PROVIDES PERSONAL TAX SERVICES TO
ORGANIZATION'S FOUNDERS. ANOTHER BOARD MEMBER'S FIRM PROVIDES PERSONAL
INVESTMENT SERVICES ALSO TO ORGANIZATION'S FOUNDERS.
FORM 990, PART VI, SECTION A, LINE 10: EACH MEMBER OF THE BOARD OF
DIRECTORS RECEIVES A COPY OF THE 990 TO REVIEW, AND ANY QUESTIONS ARE
ANSWERED AT THE NEXT BOARD MEETING.
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD ANNUALLY REVIEWS ITS
CONFLICT OF INTEREST POLICY AND VIOLATIONS OF POLICY ARE MONITORED UNTIL
RESOLVED.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD REVIEWS COMPENSATION OF
KEY EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 19: MORRISSEY COMPTON EDUCATION CENTER
PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL
STATEMENTS TO ANYONE REQUESTING THEM. FURTHERMORE, THE CALIFORNIA ATTORNEY
GENERAL MAINTAINS A PUBLICLY VIEWABLE WEBSITE WITH SCANNED COPIES OF THE
ORGANIZATION'S 990 INFORMATION RETURNS.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: JACK MORTON
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD MEMBER'S FIRM PROVIDES DISCOUNTED TAX & ACCOUNTING SERVICES TO MCEC.

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

SCHEDULE 0

(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.

2008
Open to Public Inspection

Employer identification number

77-0004694 MORRISSEY-COMPTON EDUCATIONAL CENTER (D) DESCRIPTION OF TRANSACTION: TAX & ACCOUNTING SERVICES INCLUDING PREPARATION OF ANNUAL FINANCIAL STATEMENTS AND FEDERAL AND STATE NON-PROFIT TAX RETURNS NET OF \$1,975 IN CONTRIBUTED SERVICES (A) NAME OF PERSON: CAM NERI (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: BOARD MEMBER'S FIRM PROVIDES INVESTMENT SERIVCE TO MORRISSEY COMPTON (D) DESCRIPTION OF TRANSACTION: INVESTMENT SERVICES

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

990

Attachment Sequence No 67

OMB No 1545-0172

Business or activity to which this form relates

Identifying number

MORRISSEY-COMPTON EDUC						AGE 10	V hefore	77-0004694
				steu pr	эрепу, с	ompiete rait	1	
1 Maximum amount See the instructions for a higher limit for certain businesses							2	250,000.
2 Total cost of section 179 property placed in service (see instructions)						3	800,000.	
3 Threshold cost of section 179 property before reduction in limitation						4	800,000.	
4 Reduction in limitation. Subtract line 3 fr		·					5	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost							 	
6 (a) Description of proj			(5) 0001 (5001)	1000 000	Jy)	(0) 2.00.00		-
-								
								1
·		1						
7 Listed property. Enter the amount from					7			_
7 Listed property Enter the amount from I8 Total elected cost of section 179 proper		s in column (c	\ lines 6 and	1 7	, ,		8	
9 Tentative deduction Enter the smaller of	•	s in column (c	, anes o and	,			9	
10 Carryover of disallowed deduction from		007 Form 456	30				10	
11 Business income limitation. Enter the sm	•			ro) or li	no 5		11	,
12 Section 179 expense deduction Add lin		•		•	ile J		12	
13 Carryover of disallowed deduction to 20				 	13		12	
Note: Do not use Part II or Part III below for					13_			<u> </u>
Part II Special Depreciation Allowan	 			de liste	ed prope	erty)		
Openial Deprendation Amortan	oc and other D	cp. colation (100 1100	30	о р.оро	, ,		
14 Special depreciation for qualified proper	ty (other than lis	ted property)	nlaced in se	rvice d	uring the	e tax vear	14	
15 Property subject to section 168(f)(1) elec	• .	tea property,	placed iii se	i vice a	uning tile	o tax year	15	
16 Other depreciation (including ACRS)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						16	2,551.
Part III MACRS Depreciation (Do not	ınclude listed pi	roperty) (See	instructions)			, 10	2/3310
	<u> </u>		ction A	<u>, </u>				
17 MACRS deductions for assets placed in	service in tax ve	ears beginning	n before 200	8		·	17	
18 If you are electing to group any assets placed in serving	•	•			eck here		ר 🗀	
Section B - Assets F						eral Deprecia	ition Sys	tem
(a) Classification of property	(b) Month and year placed in service	(business/in	depreciation vestment use nstructions)		Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property	İ							
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property								
g 25-year property				2	5 yrs		S/L	
	1			27	.5 yrs	MM	S/L	
h Residential rental property	/			27 5 yrs		MM	S/L	
	/			39	yrs	MM	S/L	
i Nonresidential real property	/					MM	S/L	
Section C - Assets PI	aced in Service	During 2008	Tax Year U	sing th	e Alterr	native Deprec	iation Sy	stem
20a Class life							S/L	
b 12-year				1:	2 yrs		S/L	
c 40-year	/			41) yrs	ММ	S/L	
Part IV Summary (See instructions.)								
21 Listed property Enter amount from line	28						21	
22 Total. Add amounts from line 12, lines 1		es 19 and 20	ın column (g), and l	ine 21			
Enter here and on the appropriate lines	-					<u>- </u>	22	2,551.
	-		•	ſ		-		T
23 For assets shown above and placed in s	ervice during the	e current year	, enter the		1			

Form 4562 (2008) MORRISSEY-COMPTON EDUCATIONAL CENTER Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment. Part V recreation or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? Yes Yes Nο (b) (c) (e) (i) (a)
Type of property Date Business/ Elected Depreciation Method/ Cost or Recovery (business/investment placed in investment section 179 (list vehicles first) other basis period Convention deduction service use percentage use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use % % % 27 Property used 50% or less in a qualified business use S/I % S/L -% % S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 Yes Yes 34 Was the vehicle available for personal use Yes No Yes No Yes No Nο No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons No 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (f) (a) (b) (c) (d) (e) Description of costs Date amortization Amortizable amount Code section Amortization Amortization for this year period or percentage beains 42 Amortization of costs that begins during your 2008 tax year

43

44

43 Amortization of costs that began before your 2008 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

Page	2
, ugo	_

Form 8868 (Rev. 4-2009)

• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and che	eck this box		>	X	
	Only complete Part II if you have already been granted an automatic 3-month extension on a previo	ously filed F	orm 8868			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)					
Part	II Additional (Not Automatic) 3-Month Extension of Time. Only file the original Additional (Not Automatic) 3-Month Extension of Time.			 		
Туре	Name of Exempt Organization	I	Employer identification number			
print	i		77 0004604			
File by ti	MORRISSEY-COMPTON EDUCATIONAL CENTER	 ,	77-0004694			
extended due date	Number, street, and room or suite no. If a PO box, see instructions	}'	For IRS use only			
filing the	2555 TIME BEVE, NO. 1					
return S						
	t type of return to be filed (File a separate application for each return). Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 10	141.A	Form 5227	,	rm 8870	
=	Form 990	=	Form 6069		1111 0070	
	-om 990-BL Form 990-PF Form 990-1 (trust other than above) Form 47					
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on	a previous!	y filed Form	8868.		
	MORRISSEY-COMPTON EDUCATIONAL CENT	ER				
• The	books are in the care of > 2555 PARK STREET, SUITE 20 - 9430	<u>6-1919</u>				
Tele	ephone No ▶ <u>(650) 322-5910</u> FAX No. ▶					
If th	ne organization does not have an office or place of business in the United States, check this box			>		
If th	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this	is for the who	ole group, ch	eck this	
box 🕨	If it is for part of the group, check this box 🕨 🔛 and attach a list with the names and E	EINs of all m	embers the e	xtension is f	or	
	request an additional 3-month extension of time until	_				
			<u>UG 31,</u>			
6	If this tax year is for less than 12 months, check reason Linitial return Linitial return Change in accounting peri					
	State in detail why you need the extension			- NO.		
DOCUMENTATION NEEDED TO FILE A COMPLETE AND ACCURATE RETURN IS NOT						
	AVAILABLE AT THIS TIME. AN EXTENSION OF TIME IS T	1	RE REQ	<u>UESTED</u>	•	
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any)				
-	nonrefundable credits. See instructions		8a \$			
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated						
tax payments made Include any prior year overpayment allowed as a credit and any amount paid						
-	previously with Form 8868		8b \$			
	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, dep			17	/ 3	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See inst	tructions	8c \$	N,	<u>/A</u>	
	Signature and Verification			امط المصمحمات	l. o.f	
under p	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements e, correct, an d co mplete, and that I am authorized to prepare this form.	, and to the D	est of my knov	vieuge and Dei	iei,	
			Date ► 4	. 1.5	./)	
Signatu	re Tamillarian Title LIV			orm 8868 (Re		
			' '	(110		

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Internal Revenue Service File a separate application for each return.	
● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	► X
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this 	
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously	filed Form 8868.
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and co	mplete
Part I only	▶ ∟
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a to file income tax returns	n extension of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extens noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or composite to you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic to www.irs.gov/efile and click on e-file for Charities & Nonprofits.	nically if (1) you want the additional onsolidated Form 990-T Instead,
Type or Name of Exempt Organization	Employer identification number
print	
MORRISSEY-COMPTON EDUCATIONAL CENTER	77-0004694
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions	
filing your return See 2555 PARK BLVD, NO. 1	
Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions	
PALO ALTO, CA 94306	
Check type of return to be filed (file a separate application for each return)	
X Form 990 Form 990-T (corporation) Form 4	720
Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5	
Form 990-EZ Form 990-T (trust other than above) Form 6	
Form 990-PF Form 1041-A Form 8	
MORRISSEY-COMPTON EDUCATIONAL CENTER	
• The books are in the care of \blacktriangleright 2555 PARK STREET, SUITE 20 - 94306-193	19
Telephone No ► <u>(650) 322-5910</u> FAX No ►	
 If the organization does not have an office or place of business in the United States, check this box 	▶ 🗀
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the second content of	
box 🕨 . If it is for part of the group, check this box 🕨	members the extension will cover
	
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time ur	
APRIL 15, 2010 , to file the exempt organization return for the organization named	above. The extension
is for the organization's return for	
calendar year or	
► X tax year beginning <u>SEP 1, 2008</u> , and ending <u>AUG 31, 2009</u>	
2 If this tax year is for less than 12 months, check reason Initial return	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits See instructions	3a \$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
tax payments made Include any prior year overpayment allowed as a credit	3b \$
	1 1
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	
	3c \$ N/A

Cauton. If you are going to make an older of and warranger and are a constraint of a constrain