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

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

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

OMB No. 1545-0047

2008Open to Public
Inspection**A** For the **2008** calendar year, or tax year beginning **OCT 1, 2008** and ending **SEP 30, 2009**

B Check if applicable: <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type: See Specific Instructions	C Name of organization THE CORPS NETWORK		D Employer identification number 52-1480202
		Doing Business As		
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1100 G STREET, NW 1000		E Telephone number 202-737-6272
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		G Gross receipts \$ 7,001,084.
		F Name and address of principal officer SALLY T. PROUTY SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: ▶ WWW.CORPSNETWORK.ORG K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ L Year of formation: 1986 M State of legal domicile: DC				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities. SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23
	5 Total number of employees (Part V, line 2a)	5	23
	6 Total number of volunteers (estimate if necessary)	6	0
Revenue	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	5,223,413.	6,525,480.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	544,597.	473,024.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,983.	2,580.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2.	7,001,084.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,783,995.	7,001,084.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	2,422,163.	4,792,787.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,209,843.	1,466,743.
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 85,810.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,581,337.	1,088,259.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,213,343.	7,347,789.
	19 Revenue less expenses. Subtract line 18 from line 12	570,652.	<346,705.>
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	2,080,205.	2,111,488.
	22 Net assets or fund balances. Subtract line 21 from line 20	832,418.	1,210,406.
		1,247,787.	901,082.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		
	Signature of officer: <i>Sally T. Prouty</i> Date: 8/5/10 SALLY T. PROUTY, PRESIDENT/CEO Type or print name and title		
Paid Preparer's Use Only	Preparer's signature: <i>John Woodson</i>	Date: 8/4/10	Check if self-employed: <input type="checkbox"/>
	Firm's name (or yours if self-employed, address, and ZIP + 4) CALIBRE CPA GROUP PLLC 1850 K STREET, N.W. WASHINGTON, DC 20006		Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ (202) 331-9880

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

☒ Yes ☐ No

SCANNED AUG 26 2010

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

**TO UNITE AND SUPPORT YOUTH CORPS AS A PREEMINENT STRATEGY FOR
ACHIEVING THE NATION'S YOUTH DEVELOPMENT, COMMUNITY SERVICE AND
ENVIRONMENTAL RESTORATION GOALS.**

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

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

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

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 6,639,895. Including grants of \$ 4,712,227.) (Revenue \$ 473,024.)
**SERVICE TO MEMBERS: GENERAL PUBLIC NEWLETTERS, WORKSHOPS, TECHNICAL
ASSISTANCE AND NEW CORPS DEVELOPMENTS. SERVICES TO STATE AND LOCAL
YOUTH CORPS AND OTHER SERVICE PROGRAMS.**

4b (Code:) (Expenses \$ 383,320. including grants of \$) (Revenue \$)
**GOVERNMENT RELATIONS AND PUBLIC AFFAIRS: RELATES TO FEDERAL GOVERNMENT
PARTICIPATION IN NATIONAL POLICY DEVELOPMENT ON YOUTH CORPS ISSUES AND
REPRESENTS CONSTITUENCY BEFORE VARIOUS PUBLIC AUDIENCES.**

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

4d Other program services. (Describe in Schedule O.)

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

4e Total program service expenses \$ 7,023,215. (Must equal Part IX, Line 25, column (B).)

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K</i> <i>If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

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Part IV Checklist of Required Schedules (continued)

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

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	8	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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	23	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
b	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter N/A		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

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

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.

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

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		X
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization? Describe the process in Schedule O (see instructions)		X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
MARTIN J. O'BRIEN - 202-737-6272
1100 G STREET, NW, #1000, WASHINGTON, DC 20005

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ANTHONY ANIKEEFF BOARD MEMBER	2.00	X						0.	0.	0.
MIKE BASSETT BOARD MEMBER	2.00	X						0.	0.	0.
HARRY BRUELL BOARD MEMBER	2.00	X						0.	0.	0.
KELLY CAUSEY BOARD MEMBER	2.00	X						0.	0.	0.
ANN COCHRANE BOARD MEMBER	2.00	X						0.	0.	0.
DEBORAH DORSETT BOARD MEMBER	2.00	X						0.	0.	0.
STEVE DUBIEL BOARD MEMBER	2.00	X						0.	0.	0.
JERRY KEIR BOARD MEMBER	2.00	X						0.	0.	0.
REGINALD MCCASKILL BOARD MEMBER	2.00	X						0.	0.	0.
LARRY MCCracken BOARD MEMBER	2.00	X						0.	0.	0.
JONATHAN MCKINNEY BOARD MEMBER	2.00	X						0.	0.	0.
DAVID MURAKI BOARD MEMBER	2.00	X						0.	0.	0.
JOE PARRISH BOARD MEMBER	2.00	X						0.	0.	0.
LEN PRICE BOARD MEMBER	2.00	X						0.	0.	0.
JOAN SHARPE BOARD MEMBER	2.00	X						0.	0.	0.
MARIE WALKER BOARD MEMBER	2.00	X						0.	0.	0.
DUSTIN WOODMAN BOARD MEMBER	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARILEE ECKERT BOARD MEMBER	2.00	X						0.	0.	0.
DWIGHT WASHABAUGH BOARD MEMBER	2.00	X						0.	0.	0.
CAROLYN ROSE BOARD MEMBER	2.00	X						0.	0.	0.
LORI GODOROV BOARD MEMBER	2.00	X						0.	0.	0.
MARK LAZZARA BOARD MEMBER	2.00	X						0.	0.	0.
JOHN LEONG BOARD MEMBER	2.00	X						0.	0.	0.
SALLY PROUTY PRESIDENT/CEO	40.00			X				135,000.	0.	13,232.
MARTY O'BRIEN SENIOR VICE PRESIDENT	40.00			X				96,300.	0.	9,841.
1b Total								231,300.	0.	23,073.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 1

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	5950904.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	574,576.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		6,525,480.			
Program Service Revenue	2 a	MEMBERSHIP DUES	Business Code 900099	292,564.	292,564.		
	b	HEALTH INSURANCE COMM	900099	85,603.	85,603.		
	c	REGISTRATIONS	900099	79,865.	79,865.		
	d	MISCELLANEOUS	900099	14,992.	14,992.		
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		473,024.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,580.			2,580.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
	c	Net income or (loss) from sales of inventory					
	Miscellaneous Revenue		Business Code				
	11 a						
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		7,001,084.	473,024.	0.	2,580.	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,792,787.	4,792,787.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	254,373.	218,959.	28,418.	6,996.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	995,977.	855,093.	87,292.	53,592.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	44,048.	37,549.	3,694.	2,805.
9 Other employee benefits	72,784.	62,808.	6,576.	3,400.
10 Payroll taxes	99,561.	85,529.	9,171.	4,861.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	42,940.		42,940.	
d Lobbying	11,250.	11,250.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	435,564.	408,515.	26,672.	377.
12 Advertising and promotion				
13 Office expenses	95,974.	86,070.	7,575.	2,329.
14 Information technology	43,136.	37,056.	3,974.	2,106.
15 Royalties				
16 Occupancy	139,489.	118,402.	13,781.	7,306.
17 Travel	99,881.	97,429.	1,585.	867.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	170,551.	167,302.	3,249.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	11,817.	9,806.	1,314.	697.
23 Insurance	10,381.	7,555.	2,424.	402.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>DUES AND MEMBERSHIPS</u>	27,141.	26,970.	99.	72.
b <u>MISCELLANEOUS</u>	135.	135.		
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	7,347,789.	7,023,215.	238,764.	85,810.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	200.	1	200.
	2 Savings and temporary cash investments	943,812.	2	693,438.
	3 Pledges and grants receivable, net	1,044,853.	3	1,366,797.
	4 Accounts receivable, net	34,926.	4	10,872.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	11,881.	9	7,465.
	10a Land, buildings, and equipment, cost basis	10a 72,502.		
	b Less accumulated depreciation. Complete Part VI of Schedule D	10b 39,786.	10c	32,716.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,080,205.	16	2,111,488.	
Liabilities	17 Accounts payable and accrued expenses	829,768.	17	1,203,996.
	18 Grants payable		18	
	19 Deferred revenue	2,650.	19	6,410.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	832,418.	26	1,210,406.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	676,524.	27	663,567.
	28 Temporarily restricted net assets	571,263.	28	237,515.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,247,787.	33	901,082.
	34 Total liabilities and net assets/fund balances	2,080,205.	34	2,111,488.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990. ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1709028.	1982045.	4674333.	5472196.	6818044.	20655646.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	1709028.	1982045.	4674333.	5472196.	6818044.	20655646.
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)						724,245.
6 Public Support. Subtract line 5 from line 4						19931401.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1709028.	1982045.	4674333.	5472196.	6818044.	20655646.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,412.	12,891.	17,201.	15,983.	2,580.	57,067.
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)	115.	2,500.	16,080.	2.		18,697.
11 Total support. Add lines 7 through 10						20731410.
12 Gross receipts from related activities, etc. (see instructions)					12	857,093.
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	96.14	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15		%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
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 <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly 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)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

2008
Open to Public Inspection

▶ **To be completed by organizations described below.**
▶ **Attach to Form 990 or Form 990-EZ.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

THE CORPS NETWORK

Employer identification number

52-1480202

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768

(election under section 501(h)). See the instructions for Schedule C for details.

- A** Check ☐ if the filing organization belongs to an affiliated group.
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		830.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		37,665.													
c Total lobbying expenditures (add lines 1a and 1b)		38,495.													
d Other exempt purpose expenditures		7,309,294.													
e Total exempt purpose expenditures (add lines 1c and 1d)		7,347,789.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns		517,389.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		129,347.													
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a		0.													
i Subtract line 1f from line 1c. Enter -0- if line f is more than line c		0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	257,217.	383,436.	410,667.	517,389.	1,568,709.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,353,064.
c Total lobbying expenditures	57,664.	50,942.	35,343.	38,495.	182,444.
d Grassroots non-taxable amount	64,304.	95,859.	102,667.	129,347.	392,177.
e Grassroots ceiling amount (150% of line 2d, column (e))					588,266.
f Grassroots lobbying expenditures	5,453.	2,257.	1,801.	830.	10,341.

Schedule C (Form 990 or 990-EZ) 2008

Schedule D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Attach to Form 990. To be completed by organizations that
answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008Open to Public
Inspection

Name of the organization

THE CORPS NETWORK

Employer identification number

52-1480202**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the
organization answered "Yes" to Form 990, Part IV, line 6.

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

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

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

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

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

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

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

- (i) unrelated organizations
 (ii) related organizations

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		21,347.	7,929.	13,418.
d Equipment		51,155.	31,857.	19,298.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c))				32,716.

Schedule D (Form 990) 2008

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,001,084.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,347,789.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<346,705.>
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	0.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	<346,705.>

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

1	Total revenue, gains, and other support per audited financial statements	1	7,001,084.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
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	2e	0.
3	Subtract line 2e from line 1	3	7,001,084.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	7,001,084.

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

1	Total expenses and losses per audited financial statements	1	7,347,789.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	7,347,789.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	7,347,789.

Part XIV Supplemental Information

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

► Attach to Form 990.

Open to Public
Inspection

Name of the organization

THE CORPS NETWORK

Employer identification number
52-1480202

Part I General Information on Grants and Assistance

1 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 criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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 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. ☐

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) Purpose of grant or assistance
COCONINO RURAL ENVIRONMENT CORPS 5410 E. COMMERCE AVENUE FLAGSTAFF, AZ 86004	86-6000044	COCONINO COUNTY GOVT	112,899.	0.			CORPS RESPOND
CONSERVATION CORPS NORTH BAY 27 LARKSPUR ST. SAN RAFAEL, CA 94901	94-2831592	501(C)(3)	103,241.	0.			CORPS RESPOND
NORTHWEST YOUTH CORPS 2621 AUGUSTA ST. EUGENE, OR 97403	93-0818160	501(C)(3)	96,045.	0.			CORPS RESPOND
SOUTHWEST CONSERVATION CORPS 701 CAMINO DEL RIO, SUITE 101 DURANGO, CO 81301	84-1450808	501(C)(3)	115,037.	0.			CORPS RESPOND
VERMONT YOUTH CONSERVATION CORPS 1949 EAST MAIN STREET RICHMOND, VT 05477	03-0328834	501(C)(3)	156,802.	0.			CORPS RESPOND
WSOS QUILTER CORPS 109 S. FRONT STREET FREMONT, OH 43420	34-0975934	501(C)(3)	136,226.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS, CORPS RESPOND

2 Enter total number of section 501(c)(3) and government organizations

31.

3 Enter total number of other organizations

1.

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

Schedule I (Form 990) 2008

Part III 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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: IN ORDER TO EFFECTIVELY MONITOR ITS SUBSITES

PARTICIPATING IN GRANT FUNDED PROJECTS, THE CORPS NETWORK REVIEWS THE

FINANCIAL AND PROGRAMMATIC DATA SUBMITTED ON A QUARTERLY BASIS TO DETERMINE

IF THE PROJECT GOALS AND DELIVERABLES ARE BEING ACHIEVED IN A TIMELY

MANNER. ADDITIONALLY, ALL SUBSITES PROVIDE STATUS REPORTS DURING

ONE-ON-ONE CONFERENCE CALLS SCHEDULED QUARTERLY AND ON AN AS-NEEDED BASIS.

AS A REQUIREMENT FOR RECEIVING SUBGRANTS, ALL SITES COMPLETE THE CORPS

NETWORK'S CORRECTIVE ACTION POLICY FORM WHICH DETAILS THE PROCESS FOR

SCHEDULE I-1
(Form 990)
Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047
2008

Open to Public
Inspection

Name of the organization

Employer identification number

THE CORPS NETWORK

52-1480202

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN NEW YORK AMERICORPS 2188 SENECA STREET BUFFALO, NY 14210	16-1596462	501(C)(3)	113,610.	0.			CORPS RESPOND, MLK DAY
HEART OF OREGON P.O. BOX 279 BEND, OR 97709	93-1303879	501(C)(3)	222,967.	0.			CNCS - CIVIC JUSTICE CORPS
NOISETTE FOUNDATION 1360 TRUXTON AVE, SUITE 200 NORTH CHARLESTON, SC 29405	56-2415954	501(C)(3)	202,966.	0.			CNCS - CIVIC JUSTICE CORPS
EARTH CONSERVATION CORPS 2000 HALF STREET, SW WASHINGTON, DC 20024	52-1683270	501(C)(3)	107,841.	0.			CNCS - CIVIC JUSTICE CORPS
AMERICAN YOUTH WORKS 1901 E. BEN WHITE BLVD AUSTIN, TX 78741	74-2197942	501(C)(3)	55,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS
CIVICCORPS 101 MYRTLE STREET OAKLAND, CA 94607	94-2941068	501(C)(3)	70,020.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS JUSTICE CORPS
FRESNO COUNTY ECO 1920 MARIPOSA MALL, SUITE 330 FRESNO, CA 93721	94-1606519	501(C)(3)	55,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS
GREATER MIAMI SERVICE CORPS 810 NW 28TH ST MIAMI, FL 33127	65-0221820	DADE COUNTY GOVT	55,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

SCHEDULE I-1
(Form 990)
Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047
2008
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Inspection

Name of the organization

Employer identification number

THE CORPS NETWORK

52-1480202

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILE HIGH YOUTH CORPS 6740 E. COLFAX DENVER, CO 80220	84-1182631	501(C)(3)	65,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS
OPERATION FRESH START, INC. 1925 WINNEBAGO STREET MADISON, WI 53704	23-7108090	501(C)(3)	70,523.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS, MEAP-INCLUSIVE CREW
SACRAMENTO REGIONAL CONSERVATION CORPS - 6101 27TH STREET - SACRAMENTO, CA 95822	68-0043298	501(C)(3)	50,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS
THE WORK GROUP, INC. 3720 MARLTON PIKE PENNSAUKEN, NJ 08110	22-2718636	501(C)(3)	60,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS
URBAN CORPS OF SAN DIEGO P.O. BOX 80156 SAN DIEGO, CA 92138-0156	33-0352148	501(C)(3)	65,000.	0.			GATES-CIVIC JUSTICE CORPS, OSI-CIVIC JUSTICE CORPS
UTAH CONSERVATION CORPS 7205 OLD MAIN HILL LOGAN, UT 84321	87-6000528	UTAH STATE UNIV	17,838.	0.			MEAF - INCLUSIVE CREW
MILWAUKEE COMMUNITY SERVICE CORPS 1441 N. 7TH STREET MILWAUKEE, WI 53205	39-1680843	501(C)(3)	49,299.	0.			RECOVERY CORPS
KEDILA FAMILY LEARNING CENTER, INC. - 6 FONTAINEBLEAU DRIVE - NEW ORLEANS, LA 70125	51-0536539	501(C)(3)	8,567.	0.			SE LOUISIANA YOUTH CAREER

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

SCHEDULE I-1

(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE CORPS NETWORK

Employer identification number
52-1480202

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIMITLESS VISTAS, INC. 1215 PRYTANIA STREET, SUITE 370 NEW ORLEANS, LA 70130	75-3213594	501(C)(3)	609,579.	0.			SE LOUISIANA YOUTH CAREER
RECOVERY SCHOOL DISTRICT 1641 POLAND AVE NEW ORLEANS, LA 70117	72-6000745	LOUISIANA PARISH	753,372.	0.			SE LOUISIANA YOUTH CAREER
ST. BERNARD PARISH - CITY OF HOPE 7451 W. ST. BERNARD HIGHWAY ARABI, LA 70032	20-3852647	501(C)(3)	365,585.	0.			SE LOUISIANA YOUTH CAREER
ST. JAMES PARISH DEPT OF HUMAN RESOURCES - 5153 CANATELLA STREET - CONVENT, LA 70723	72-6001228	LOUISIANA PARISH	237,650.	0.			SE LOUISIANA YOUTH CAREER
ARC OF GREATER NEW ORLEANS 925 LABARRE ROAD METAIRIE, LA 70001	72-0456903	501(C)(3)	766,928.	0.			SE LOUISIANA YOUTH CAREER
CHARLES H. WRIGHT MUSEUM 315 E. WARREN AVENUE DETROIT, MI 48201	38-1882096	501(C)(3)	5,000.	0.			MLK DAY
DELTA SIGMA THETA SORORITY, INC. 222 GLENHAVEN CIRCLE HATTIESBURG, MS 39401	53-0215218	501(C)(7)	7,500.	0.			MLK DAY
HOPE WORLDWIDE LOS ANGELES 3731 WILSHIRE BLVD, SUITE 800 LOS ANGELES, CA 90010	95-4509867	501(C)(3)	9,999.	0.			MLK DAY

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

Employer identification number

52-1480202

2	Enter total number of Section 501(c)(3) and government organizations	▲
3	Enter total number of other organizations	▲

Part IV Supplemental Information

ADDRESSING ANY CONCERNS IDENTIFIED THROUGH THE INFORMATION GATHERED ON
QUARTERLY REPORTS OR CONFERENCE CALLS.

SITES MAY ALSO BE SELECTED TO PARTICIPATE IN AN ON-SITE MONITORING VISIT
BASED ON THE FOLLOWING FACTORS:

- REQUIREMENT SET BY FUNDER
- FIRST-TIME SUBSITE TO THE CORPS NETWORK
- FIRST-TIME SUBRECIPIENT TO AWARDING FEDERAL AGENCY
- PAST PERFORMANCE ISSUES DOCUMENTED AS PART OF THE CORPS NETWORK'S
CORRECTION POLICY
- MULTIPLE SUBGRANTS RECEIVED THROUGH THE CORPS NETWORK
- STAFFING CHANGES
- REQUESTED BY THE SUBSITE

IF SELECTED FOR AN ON-SITE MONITORING VISIT, SUBSITES ARE PROVIDED WITH A
MONITORING CHECKLIST DETAILING THE SPECIFIC DOCUMENTS AND MATERIALS TO BE
REVIEWED DURING THE VISIT, AS WELL AS A LIST OF STAFF MEMBERS THAT WILL
NEED TO BE AVAILABLE. ONCE THE VISIT HAS BEEN COMPLETED, THE CORPS NETWORK
PROVIDES A WRITTEN SUMMARY OF FINDINGS ALONG WITH RECOMMENDATIONS FOR
IMPROVEMENT. IF ANY ISSUES OF NONCOMPLIANCE ARE IDENTIFIED, THEY MUST BE
ADDRESSED PRIOR TO RECEIVING ADDITIONAL SUBGRANT FUNDS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

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Name of the organization

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Employer identification number

52-1480202

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO UNITE AND SUPPORT YOUTH CORPS AS A PREEMINENT STRATEGY FOR ACHIEVING
THE NATION'S YOUTH DEVELOPMENT, COMMUNITY SERVICE AND ENVIRONMENTAL
RESTORATION GOALS.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

RECOVERY CORPS: \$1,288,799 GRANT FROM THE CORPORATION FOR NATIONAL AND
COMMUNITY SERVICE, TO TRAIN CORPSMEMBERS FROM 11 SUBSITES TO
PARTICIPATE IN WEATHERIZATION AND OTHER ENERGY EFFICIENCY WORK,
INCLUDING BUT NOT LIMITED TO EXPAND, STRENGTHEN, OR EXPLORE EXPANSION
IN THE HOUSING, ENERGY EFFICIENCY AND GREEN WORKFORCE FIELDS. GRANT
RUNS THROUGH SEPTEMBER 30, 2010.

GREEN PATHWAYS TO POSTSECONDARY SUCCESS PROJECT SEEKS TO MAP CURRENT
KNOWLEDGE AND PRACTICE OF PATHWAYS TO POSTSECONDARY SUCCESS AND
ACHIEVEMENT USING GREEN STRATEGIES AND RESOURCES, BUILD STRATEGIC
PARTNERSHIPS, AND BEGIN A NATIONAL DIALOGUE AND CONSENSUS AROUND THE
NEED TO ESTABLISH CREDENTIALLED PATHWAYS THAT WILL RESULT IN AN
INCLUSIVE, GREEN WORKFORCE. THIS PROJECT IS FUNDED BY THE BILL &
MELINDA GATES FOUNDATION (\$191,501) AND THE W.K. KELLOGG FOUNDATION
(\$50,000) AND IS EXPECTED TO RUN THROUGH MAY 2010.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

SE LOUISIANA YOUTH CAREER GRANT - THIS PROJECT, FUNDED BY THE US DEPT
OF LABOR, HAD 6 SITES IN WHICH CORPSMEMBERS ENGAGED IN SERVICE-LEARNING
PROJECTS FOCUSED ON ENVIRONMENTAL AND COMMUNITY SUSTAINABILITY FOR FOUR
MONTHS, GAINING VALUABLE WORK AND ACADEMIC EXPERIENCE, AND DEVELOPING

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

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2008

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THE CORPS NETWORK

Employer identification number
52-1480202

TOOLS INCLUDING RELIABILITY AND PRACTICAL LIFE SKILLS; DURING FY09

\$3,547,500 WAS SPENT ON THE SUBSITES (\$2,741,681) AND THE HEADQUARTERS (\$805,819) ACTIVITIES. THIS SUPPORT ENDED JULY 31, 2009.

BILL AND MELINDA GATES FOUNDATION - CIVIC JUSTICE CORPS - \$356,121 WAS USED TO SUPPORT 10 SUBSITES (\$327,020) AND HEADQUARTERS (\$29,101) IN FURTHERING THE CJC MODEL TO ENGAGE YOUNG PEOPLE, WHO ARE NEITHER WORKING NOR IN SCHOOL, IN SERVICE AND SERVICE-LEARNING OPPORTUNITIES. SERVICE PROJECTS ARE FOCUSED ON ENVIRONMENTAL AND COMMUNITY SUSTAINIBILITY AND PREPARE CJC MEMBERS FOR CAREERS IN THE GREEN ECONOMY.

MARTIN LUTHER KING SERVICE DAY INITIATIVE - 21 SITES (\$80,554) AND HEADQUARTERS (\$12,875) TO PROMOTE A DAY OF COMMUNITY SERVICE THAT HELPED EMPOWER AND STRENGTHEN LOCAL COMMUNITIES THROUGH CNCS TOOLS AND RESOURCES TO HONOR MLK ON THE FEDERAL HOLIDAY.

FHWA MOU - TO DEVELOP A GUIDE FOR TRANSPORTATION FUNDING OPPORTUNITIES FOR SERVICE AND CONSERVATION CORPS, WITH PARTICULAR EMPHASIS ON THE RECREATIONAL TRAILS PROGRAM. THE PROJECT WHICH BEGAN IN FY08 AND ENDED IN FY09 WAS BUDGETED FOR \$49,963. IT CAME IN UNDER BUDGET AT \$40,491.65 OF WHICH \$15,315.81 WAS INCURRED DURING FY09.

FORM 990, PART VI, SECTION A, LINE 6: YES THE ORGANIZATION HAS THREE CLASSES OF MEMBERSHIPS: ORGANIZATIONAL MEMBERS, AFFILIATE MEMBERS AND SUPPORTING MEMBERS. ORGANIZATIONAL MEMBERS HAVE VOTING RIGHTS AND THEIR REPRESENTATIVES (TYPICALLY THE PRESIDENT OR DIRECTOR OF THE CORPS) ARE ELIGIBLE FOR ELECTION TO THE BOARD OF DIRECTORS. SUPPORTING MEMBERS HAVE ACCESS TO THE HEALTH PLAN AND DISCOUNTED REGISTRATION TO THE CORPS NETWORK

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE CORPS NETWORK

Employer identification number

52-1480202

EVENTS.

FORM 990, PART VI, SECTION A, LINE 7A: ALL ORGANIZATIONAL MEMBERS MAY VOTE FOR MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 10: THE FINAL DRAFT 990 IS CIRCULATED ELECTRONICALLY TO THE FINANCE AND AUDIT COMMITTEE MEMBERS BEFORE IT IS SUBMITTED TO THE IRS. THE COMMITTEE MEMBERS MEET VIA CONFERENCE CALL TO DISCUSS AND APPROVE THE RETURN. A NOTICE WILL THEN BE SENT TO THE FULL BOARD THAT THE RETURN IS AVAILABLE FOR THEM TO REVIEW ELECTRONICALLY.

FORM 990, PART VI, SECTION B, LINE 15: THE CORPS NETWORK CONTRACTED WITH HR DYNAMICS IN 2008 TO COMPLETE A WAGE COMPARISON ANALYSIS FOR THE CEO AND THE OTHER STAFF. THIS REPORT CONCLUDED THAT WAGES FOR SENIOR STAFF AT THE CORPS NETWORK LAGGED CONSIDERABLY BEHIND THE MARKET, ESPECIALLY FOR THE CEO. THE PERSONNEL COMMITTEE MET IN JULY, 2008, TO REVIEW THE REPORT, AND AGAIN IN SEPTEMBER WITH THE HR DYNAMICS CONSULTANT TO REVIEW THE RECOMMENDATIONS OF THE STUDY. THE COMMITTEE MET AGAIN IN DECEMBER TO CONSIDER DATA COLLECTED IN 2006 BY THE CORPS NETWORK IN A SURVEY OF CEO SALARIES. THE PERSONNEL COMMITTEE USED THIS AS A BASIS FOR COMPARABLES, WITH ANNUAL ADJUSTMENTS MADE FOR COLA. IN JANUARY 2009, THE PERSONNEL COMMITTEE HELD A JOINT CALL WITH THE EXECUTIVE COMMITTEE TO FINALIZE A RECOMMENDATION FOR SALLY PROUTY'S COMPENSATION. THIS RECOMMENDATION RESPONDED TO THE RECOMMENDATIONS OF THE HR DYNAMICS STUDY IN RELATION TO THE DATA ON CEO COMPENSATION AVAILABLE FROM CORPS. THE BOARD FOLLOWED AN EXTENSIVE AND DELIBERATE PROCESS TO DETERMINE A REASONABLE SALARY FOR THE

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

THE CORPS NETWORK

Employer identification number

52-1480202

CEO.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE ON A REQUEST ONLY BASIS.

FORM 990, PART XI, LINE 2C

OVERSIGHT OF THE ORGANIZATION'S AUDIT PROCESS

FINANCE COMMITTEE. THE CHAIR SHALL APPOINT A FINANCE COMMITTEE. THE TREASURER SHALL CHAIR THE FINANCE COMMITTEE. THE FINANCE COMMITTEE SHALL PREPARE AND RECOMMEND THE ANNUAL BUDGET FOR THE ORGANIZATION AND FISCAL POLICIES AS NEEDED, MONITOR IMPLEMENTATION OF THE BUDGET, MAKE RECOMMENDATIONS REGARDING THE EMPLOYMENT OF THE AUDITOR, AND REVIEW THE AUDITED STATEMENTS PRIOR TO SUBMISSION TO THE FULL BOARD. THE CHAIR SHALL CONVENE SUBCOMMITTEES AS NEEDED TO ASSIST WITH INVESTMENT STRATEGIES, OR OTHER FISCAL MATTERS.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you 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 (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization THE CORPS NETWORK	Employer identification number 52-1480202
	Number, street, and room or suite no. If a P.O. box, see instructions. 1100 G. STREET, NW SUITE 1000	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20005	

Check type of return to be filed (File a separate application for each return):

- | | | | |
|--|---|--------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of
- THE ORGANIZATION**

Telephone No. **202-737-6272**FAX No. **202-737-6277**

- 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 this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **AUGUST 15**, 20**10**.
- 5 For calendar year _____, or other tax year beginning **OCT. 1**, 20**08**, and ending **SEPT. 30**, 20**09**.
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension **ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION TO COMPLETE THE RETURN.**

8a 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.	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 \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$ 0.00

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶

*Craig A Stevens*Title ▶ **CPA**Date ▶ **5-4-10**

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