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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

		of the Trea		1	•	► The	orga	nızatıor	n may h	ave to	use a	сору о	fthi	s return to	o satı	sfy state r	epor	ting requ	ıırem	ents		nspect	ion
A F	or th	e 2008	cale	ndar			<u> </u>							2008, a			•	<u> </u>			30,2		
Вс	heck if ap	ppicable	Please	C N	ame of	organizi	ation	NATI	ONAL	ASS				CHOOL-			7	D Emplo	yer ic				
Х	¬	188	use IRS Label or		oing Bus												7	54-3	175	2058			
Г	7		print or	N	umber a	and stre	et (o	rPO bo	x if mail	s not d	elivered to	o street	addr	ess)		Room/sui	le I	E Telephone number					
	Initial	l return	type. See	11	00 G	St	NΝ	V								735	(202)638-5872						
Г	Term		Specific Instruc-	С	ity or to	wn, stat	e or c	country, a	nd ZIP +	- 4							T						
Г	Amen	nded	tions.	WA	SHIN	GTON	, [C 20	005								- 10	G Gross	recei	ots \$	1	, 930	,491.
	Applic pendi	cation I	F Na	me :	and add	dress (of pri	ncipal o	fficer	_							7	H(a) Is the		up retun	n for	Yes	X No
																	_ 1	H(b) Are a		ales ındı	ıded?	Yes	No
	Tax-ex	empt stat	us	Х	501(c)	(3)	▼	(insert i	10)	494	17(a)(1)	or	5	27				if "No	o," atta	ch a list	(see instr	ctions)	
ī	Websi	ite: 🕨	WWW.	NA	SBHC.	ORG											<u></u> 1	H(c) Group	p exen	nption nu	mber 🕨		
K	Туре с	of organiz	ation	Х	Corpon	ation	1	rust .	Assoc	ation	Ott	ner 🕨			L,	Year of form	natio	n 199	5 M	State	of legal d	omicile	VA
Pa	rt l	Sum	mary																				
	1	Briefly	descri	be th	ne orga	nızatıc	n's r	mission	or mos	t signif	icant ac	tivities											
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auc		CHIL	DRE	<u> </u>	ND Y	HTUC	TH	IROUG	H IN	ΓERD	ISCI	LI N	AR	AND	COL	LABOR	ATI	VE_					
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Governance	2															ore than 2							
∘ಶ	3	Numbe	r of vo	ting	memb	ers of	the g	governin	g body	(Part V	/I, line 1	a)								3			11
ctivities	4	Numbe	r of in	depe	endent	voting	men	nbers of	the go	vernin	ig body (Part V	1, lin	e 1b)						4			11
Ž	5	Total n	umber	of e	mploye	es (Pa	rt V,	line 2a)												5	_		17
Ac	6	Total n	umber	of v	oluntee/	ers (est	ımat	e if nece	ssary)											6			26
																				7a			
	ь	Net un	elated	bus	iness t	axable	inco	me fron	n Form	990-T,	line 34								<u></u>	7b			
																		Prior Y	ear_		Cu	rent Y	ear
ē	8	Contrib	ution	and	grants	(Part-V	#hj lu	ne 1h) .								L		1,863	3, 3	11.	1	<u>, 542</u>	,163.
Revenue	9_	-Prograi	T SOL	ceir	evebré	(Part \	∕ 11[, 1	ine 2g) .								L		42	3,8	45.		364	,976.
ě	1 p	Investo	eru	com	e (Pari	i-VIII,	o ju m	ın (A), lı	nes 3, 4	l, and 7	7d)							10,424.			2	,529.	
_	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Hotal revenue(spd/lines 8 through 11 (must equal Part VIII, column (A), line 12).								L		24,700.				20	,823.							
_	14 6	्र्य btal re	γępue	U (i)	ϸϸʹϳͿͿʹͿϼϸ	8 thic	անի	11 (mu	st equa	Part \	∕III, colu	mn (A)), lin	e 12) . .				2,322	2, 2	30.	1	930	,491.
	13	. Ć tants	ayd, s	mıla	r amou	nts pa	EFP)	art IX, co	olumn (/	A), line	s 1-3) .					L							NONE
	14	Benefit	s paid	t <u>o-</u> 0	for me	embers	(Pa	t IX, ∞	lumn (A), line	4)					L					_		NONE
es	1451	Salafie	al Athe	rico	meens	etlon	empl	byee be	nefits (f	Part IX,	, column	ı (A), lı	nes	5-10)		. L		93:	1,4	78.		902	,218.
Expenses	16 a	Profess	nonal	fund	raising	fees (P	art I	X, colum	ın (A), l	ine 11e	ө)					🖵							NONE
ă.	b	Total fu			-															_			
w	17																	1,160	8,0	96.		854	<u>,412.</u>
																		2,092	2,3	74.	1	756	<u>,630.</u>
	19	Revenu	e less	ехр	enses	Subtra	act lin	ne 18 fro	m line	12	<u></u>								9,9				<u>,861.</u>
s or																	Be	ginning	of Y	ar	En	d of Y	ar
Net Assets o Fund Balance	20	Total as	ssets (Part	X, line	¹⁶⁾										_		764	1,6	27.		922	,141.
ŽE AB	21	Total lia	bilitie	s (Pa	art X, lin	ıe 26) _.										_		83	3,9	39.		67	,642.
		Net ass				ces S	ubtra	act line 2	1 from	line 20	<u></u>	• • •		• • • •	• • •			680	0,6	38.		854	<u>,499.</u>
Pa	rt II	Sigi	natur	Bio	<u>ock</u>																		
		Under	penalti	s of	perjury,	, I decl	are ti	hat I hav	e exam	ined thi	is return,	includ	ling :	accompany	ying s	schedules and on all in	and :	statement	s, an	d to the	e best o	my ki	nowledge
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1,437,193. (Must equal Part IX, Line 25, column (B).)

Form 990 (2008)

4e Total program service expenses ▶\$

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Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1 1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	- -		
•	candidates for public office? If "Yes," complete Schedule C, Part I	,		
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes." complete	3_		<u> </u>
4				
_	Schedule C, Part II	4_	х	
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	annulate Sabadula D. Bort IV	9		x
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
• •	Parts VI, VIII, IX, or X as applicable	11		
4.2	Did the organization receive an audited financial statement for the year for which it is completing this return		<u> </u>	
12		امدا		
4.0	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	_ <u>X</u>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>x</u>
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		_x_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		x
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5,? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24h-24d and complete Schedule K. If "No." go to guestion 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•	to defeace any tax exempt bonds?	246		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
		240		
25a	(
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	<u> </u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>x</u> _
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u> </u>
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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:			
а	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	28a		x
b				
	complete Schedule L, Part IV	28ь		х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
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		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	section 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	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	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, Part V, line 2	36		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? If "Yes," complete Schedule R, Part			
	VI	37		x

Form **990** (2008)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	·		-5-
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	X	<u> </u>
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 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3 a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 b		<u> </u>
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.	_		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	. .		
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? .	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		l
_	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·	7c	:	X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7.		
_	benefit contract?	7e 7f		X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	' y		
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7 h		
	required?			
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		İ
•	· · · · · · · · · · · · · · · · · · ·			
9 a	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		İ
-	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
10	Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
ıı a	Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a		12a		
b_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

Form 990 (2008) Page 6 54-1752058 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions 1a Enter the number of voting members of the governing body b Enter the number of voting members that are independent 11 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?... 4 Х Did the organization become aware during the year of a material diversion of the organization's assets? 5 х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body?..... 8a b Each committee with authority to act on behalf of the governing body? 8 b Х 9a Does the organization have local chapters, branches, or affiliates? 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? 9 b Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 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 Section B. Policies Yes Nο 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes, describe in Schedule O how this is done 12c Does the organization have a written whistleblower policy? 13 13 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 b Other officers or key employees of the organization? 15b Describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a 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

• •	List the states with which a copy of this Form 990 is required to be filed PDC.
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)
	available for public inspection. Indicate how you make these available. Check all that apply.

Own website Another's website X Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of 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 ▶Organization 1100 G St NW Washington, DC 20005

202-638-5872

Form 990 (2008)

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 com	i e	T	Jer,			r, aus	siee	1		
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee		Officer	Key employee	Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
ALLAN ALSON										
DIRECTOR	2.	x _	<u></u>	x						
TAMARA COPELAND										
DIRECTOR	2.	x		x	<u> </u>					
TJ COSGROVE										
DIRECTOR	2.	x	L	x						
CYNTHIA BARNES-BOYD			Γ							
DIRECTOR	2.	x	L	x						
KELLY DUNKIN										
DIRECTOR	2.	x		x						
ELIZABETH ERICKSON										
DIRECTOR	2.	x		x		<u> </u>	<u> </u>	<u> </u>		
MAUREEN HANRAHAN										
DIRECTOR	2.	x		X.						
PETER WALLACE						}				
DIRECTOR	2.	х	L	x						
PAUL MELINKOVICH, MD										
PRESIDENT ELECT	2.			x	L					
GERRY VAN DE VELDE										
TREASURER	2.		L	X	L					
KATE KELLER										
SECRETARY	2.			x	L					
LINDA JUSZCZAK										
EXECUTIVE DIRECTOR	40.		L	x				131,292.		10,849.
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JSA

Part VII Section A. Officers, Directors, T	rustees, K	y En	ıplo	ye	es,	and I	Higl	hest Compensat		s (continue	ed)
(A)	(B)		-		C)			(D)	(E)		(F)
Name and title	Average	Posit	ion (k all	that ap		Reportable	Reportable		timated
	hours per week	Individual trustee or director	inst	Officer	Į Š	릙	Former	compensation from	compensatio from related		ount of
	Week	ing vid	Institutional truste	g	Key employee	nest	190	the	organizations		other pensation
		학류	on al		B Oy	8 8		organization	(W-2/1099-MIS		om the
		l age	5		8	npe		(W-2/1099-MISC)		1 -	anization
		*	stee			Highest compensated employee				4	l related Inizations
	 	<u> </u>	_	<u> </u>	_	ă	<u> </u>		<u> </u>		
										i	
						-			<u> </u>		-
		<u> </u>		_							
									_		
		 -	_	H	-		_				
	· -										
		-	_			<u> </u>					
	·1										
	 	 	<u> </u>			<u> </u>				 	
	·	<u> </u>									
		\vdash		-	_	ļ					
	1										
		 			\vdash						
	<u> </u>	<u></u>									
1b Total	<u></u>	·····					>	131,292.			10,849.
2 Total number of individuals (including the organization ▶ 1	se in 1a) v	vho r	ecei	ived	l m	ore ti	han	\$100,000 in rep	oortable comp	ensation f	rom the
organization 1			-								Yes No
3 Did the organization list any former of											
employee on line 1a? If "Yes," complete Sche	dule J for su	ch ınd	ivid	ual				• • • • • • • • • • • • • • • • • • • •		. 3	X
4 For any individual listed on line 1a, is t the organization and related organization:											
individual										. 4	х
5 Did any person listed on line 1a rece services rendered to the organization? If "Yes	ve or accr	ue co	omp	ens	atio	n fro	m	any unrelated o	rganization fo	r . 5	
Section B. Independent Contractors	, comprete t	501100	<u> </u>	3 101	34	on per	3011	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·	·	X_
1 Complete this table for your five highest	compensa	ted in	dep	enc	lent	cont	rac	tors that received	more than	\$100,000	of
compensation from the organization. (A)	 					 -	T	(B)		(C)	
Name and business ac	dress							Description of ser	vices	Compens	
SEE STATEMENT 2							+				
		<u>. </u>					+				
							I				
O Total number of fact	dia atau di a	L									······································
2 Total number of independent contractors compensation from the organization ▶	(including t	nose	ın 1	i) V	vno	rece	ivec	a more than \$10	0,000 in		
											

Pai	t VII	Statement of Revenu	1 6		54-1752058								
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514					
. s	1a	Federated campaigns	1a	_									
ant	Ь	Membership dues	· · · · · 	42,500.									
בֿה בֿ בּ		Fundraising events	· · · · · 					İ					
ir a	١.	Related organizations	1										
s, g	a	•	· · · · ·	733,554.				1					
is:	,	Government grants (contribut	,			1							
ber P	'	All other contributions, gifts, grant	1	766,109.				I					
Contributions, gifts, grants and other similar amounts		and similar amounts not included											
ဒီ င်	g	Noncesh contributions included in Total. Add lines 1a-1f		1	1,542,163.								
_ <u>a</u>	_n_	Total, Aud lines Ta-11		Business Code	1,542,165.		***************************************						
en		NATUR GOVERNMENT		Business code	070 500	072 500		Ī					
ě	2 a	ANNUAL CONFERENCE			273,520.	273,520.							
- 8	b	CONTRACT SERVICES			91,456.	91,456.							
Ξ	C												
Š	d				-	<u> </u>		 					
ran	е	· · · · · · · · · · · · · · · · · · ·											
Program Service Revenue	f	All other program service reve			264 276								
	g	Total. Add lines 2a-2f		l l	364,976.		•••••						
	3	Investment income (including	-		0.500			2.500					
		other similar amounts)			2,529.			2,529.					
	4	Income from investment of ta			NONE								
	5	Royalties	(ı) Real	(II) Personal	NONE	<u> </u>							
		}		(II) I CISOIIAI		İ							
	6a	Gross Rents		ļ ———		į.							
	ь	Less ⁻ rental expenses		ļ		1							
	С	Rental income or (loss) l				!		1					
	d	Net rental income or (loss)			NONE		····						
	7a	Gross amount from sales of	(i) Securities	(II) Other		[1					
		assets other than inventory											
	ь	Less: cost or other basis				ł							
		and sales expenses				1							
	С	Gain or (loss)		L		!		İ					
	d	Net gain or (loss)			NONE								
	8a	Gross income from fu	undraising			Į.		İ					
흠		events (not including \$						į					
Ken		of contributions reported on I	ine 1c)										
æ		See Part IV, line 18	а			ł							
Other Revenue	ь	Less direct expenses	b	L		1		•					
ğ	С	Net income or (loss) from fun	draising events.	<u> </u>	NONE								
	9a	Gross income from gaming a						1					
		See Part IV, line 19	а			Ī							
	b	Less direct expenses	b	L									
	С	Net income or (loss) from gar	ming activities	<u></u>	NONE								
	10a	Gross sales of invento						•					
		returns and allowances	а										
	b	Less: cost of goods sold	b	L		1		‡					
	С	Net income or (loss) from sale			NONE								
		Miscellaneous Revent	ue	Business Code		1		‡					
	11a	PUBLICATION &											
	ь	RELATED SALES		<u> </u>	20,773.			20,773.					
	С	TOOL KIT SALES			50.			50.					
	a	All other revenue											
	e	Total. Add lines 11a-11d			20,823.								
	12	Total Revenue. Add lines 1h,	, 2g, 3, 4, 5, 6d.	7d, 8c,									
	L	9c, 10c, and 11e	-		1,930,491.	364,976.		23,352.					
		•											

Part IX Statement of Functional Expenses

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

Some Some		All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
Grants and other assistance to governments and organizations in the U.S See Part M, Inc. 21 NONE		• • • • • • • • • • • • • • • • • • • •	(A) Total expenses	Program service		Fundraising						
Organizations in the U.S. See Part IV, line 21 Cansis and other assistance to individuals in the U.S. See Part IV, line 17 Cansis and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 15 and 16 NONE	1	Grants and other assistance to governments and										
2 Grants and other assistance to individuals in the U Size Part V, line 22	-		NONE			<u> </u>						
3 Grants and other assistance to governments organizations, and individuals outside the US See Part IV, lines 15 and 16	2	Grants and other assistance to individuals in										
organizations, and individuals outside the U.S See Part V, lines 15 and 16 . 4 Benefits paid to or for members		the U.S. See Part IV, line 22	NONE									
organizations, and individuals outside the US See Part V, lines 15 and 16 . 4 Benefits paid to or for members . 5 Compensation of current officers, directors, trustees, and key employees . 6 Compensation not included above, to disqualified persons (see offined under section 4958)((1)8) and persons described in section 4958)((1)8) a	3	• 1										
A Benefits paid to or for members NONE		•			~ ~ .							
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8). 7 Other salaries and wages. 8 Penson plan contributions (include section 401 (k) and section 403(b) employer contributions). 9 Other employee benefits. 125,294. 98,636. 26,658. 10 Payrolit taxes. 11,817. 11 Fees for services (non-employees) 126,294. 18,177. 10 Lobbyng. 10 Lobbyng. 10 Lobbyng. 11 Lobbyng. 12 Advertising and promotion. 12 Advertising and promotion. 13 Office expenses. 142,141. 130,770. 11,371. 130,770. 11,371. 130,770. 11,371. 130,770. 11,371. 140,744. 1,817. 150,744. 1,817. 150,744. 1,817. 16 Lobyng. 180,785.			NONE			<u> </u>						
### ### ##############################	4	Benefits paid to or for members	NONE									
6 Compensation not included above, to disqualified persons (as defined under section 4958(c)(3)(8) 7 Other salaries and wages	5	· · · · · · · · · · · · · · · · · · ·										
persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(3)(8). 7 Other salaros and wages			142,141.	130,770.	11,371.							
Design Security	6	• • • • • • • • • • • • • • • • • • • •										
7 Other salares and wages. 8 Penson plane contributions (include section 401 (k) and section 403(b) employer contributions). 9 Other employee benefits		, , , , , , , , , , , , , , , , , , , ,										
Pension plan contributions (include section 401 () (and a section 403 (b) employer contributions). NONE	_	F										
(k) and section 403(b) employer contributions), 125,294 98,636 26,658 1	-	· · · · · · · · · · · · · · · · · · ·	583,222.	<u>499,997.</u>	83,225.	<u> </u>						
9 Other employee benefits	8	· · · · · · · · · · · · · · · · · · ·										
10 Payroll taxes				20 222	00 000							
11 Fees for services (non-employees): a Management												
a Management		· ·	51,561.	49,744.	1,817.							
b Legal												
C Accounting												
d Lobbying e Professional fundrialing services See Part IV, line 17 for Investment management fees					02 727							
e Professional fundralising services See Part IV, line 17 f Investment management fees					23,131.							
For Investment management fees NONE 318,741. 283,600. 35,141.		· •										
g Other												
12 Advertising and promotion				283 600	25 141							
13 Office expenses				283,000.	33,141.	-						
14 Information technology NONE 15 Royalties NONE 16 Occupancy 112,186 84,660 27,526 17 Travel 63,862 58,826 5,036 18 Payments of travel or entertainment expenses for any federal, state, or local public officials NONE 19 Conferences, conventions, and meetings 193,075 171,247 21,828 20 Interest NONE NONE 21 Payments to affiliates NONE 11,153 11,153 22 Depreciation, depletion, and amortization 11,153 11,153 11,153 23 Insurance NONE NONE NONE 24 Other expenses litemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 35,848 35,848 a LICENSE & FEES 5,793 2,410 3,383 b REPAIR & MAINTENANCE 35,848 35,848 c MISCELLANEOUS 15,532 5,940 9,592 d BaNK FEES 12,708 <td></td> <td>1</td> <td></td> <td>51 363</td> <td>10 414</td> <td><u> </u></td>		1		51 363	10 414	<u> </u>						
15 Royalites NONE 16 Occupancy 112 186 84 660 27 526 17 Travel 63 862 58 826 5 036 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 193 075 171 247 21 828 19 Conferences, conventions, and meetings 193 075 171 247 21 828 19 Apyments to affiliates NONE 171 172 172 172 173 10 Payments to affiliates NONE 173 174 175 175 10 Payments to affiliates NONE 175 171 175 175 10 Payments to affiliates NONE 175 175 175 10 Payments to affiliates NONE 175 175 11 153 11 153 11 153 12 Payments to affiliates NONE 175 175 11 153 11 153 11 153 12 Payments to affiliates NONE 175 175 13 Payments to affiliates NONE 175 175 175 14 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) 175		·		31,303.	10,313.							
112,186. 84,660. 27,526. 17 Travel				• •								
17 Travel		· ·		84.660	27 526							
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings		_ ` ' '										
19 Conferences, conventions, and meetings 193,075 171,247 21,828 19 Conferences, conventions, and meetings 193,075 171,247 21,828 193,075 171,247 21,828 10 Interest NONE 21 Payments to affiliates NONE 22 Depreciation, depletion, and amortization 11,153 11,153 23 Insurance NONE 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 LICENSE & FEES 5,793 2,410 3,383 b REPAIR & MAINTENANCE 35,848 35,848 c MISCELLANEOUS 15,532 5,940 9,592 d BANK FEES 12,708 12,708 e	18		3,000.	<u> </u>		-						
19 Conferences, conventions, and meetings		· ·	NONE									
20 Interest	19			171.247	21.828.							
21 Payments to affiliates	20	· · · · · · · · · · · · · · · · · · ·										
22 Depreciation, depletion, and amortization	21											
23 Insurance	22				11,153.							
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 LICENSE & FEES 5,793. 2,410. 3,383. b REPAIR & MAINTENANCE 35,848. 35,848. c MISCELLANEOUS 15,532. 5,940. 9,592. d BANK FEES 12,708. 12,708. e 12,708. 12,708. f All other expenses Add lines 1 through 24f 1,756,630. 1,437,193. 319,437. 25 Total functional expenses. Add lines 1 through 24f 1,756,630. 1,437,193. 319,437.	23											
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a LICENSE & FEES 5,793. 2,410. 3,383. b REPAIR & MAINTENANCE 35,848. 35,848. c MISCELLANEOUS 15,532. 5,940. 9,592. d BANK FEES 12,708. 12,708. e 12,708. 12,708. e 14,756,630. 1,437,193. 319,437. 26 Joint Costs. Check here I If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a	24				- · · · · · · · · · · · · · · · · · · ·							
5% of total expenses shown on line 25 below) a LICENSE & FEES		covered above (Expenses grouped together	-	1								
a LICENSE & FEES 5,793. 2,410. 3,383. b REPAIR & MAINTENANCE 35,848. 35,848. c MISCELLANEOUS 15,532. 5,940. 9,592. d BANK FEES 12,708. 12,708. e		· · · · · · · · · · · · · · · · · · ·										
b REPAIR & MAINTENANCE 35,848. c MISCELLANEOUS 15,532. 5,940. 9,592. d BANK FEES 12,708. 12,708. e		5% of total expenses shown on line 25 below)										
c MISCELLANEQUS 15,532. 5,940. 9,592. d BANK_FEES 12,708. 12,708. e 12,708. 12,708. f All other expenses 1,756,630. 1,437,193. 25 Total functional expenses. Add lines 1 through 24f 1,756,630. 1,437,193. 319,437. 26 Joint Costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a 1,437,193. 319,437.	а	LICENSE & FEES	5,793.	2,410.	3,383.							
d BANK FEES 12,708. 12,708. e	b	REPAIR & MAINTENANCE	35,848.		35,848.							
f All other expenses	С	MISCELLANEOUS	15,532.	5,940.	9,592.							
f All other expenses	d	BANK_FEES	12,708.		12,708.							
25 Total functional expenses. Add lines 1 through 24f 1,756,630. 1,437,193. 319,437. 26 Joint Costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a	е											
26 Joint Costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a	f	All other expenses										
SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a	25	Total functional expenses. Add lines 1 through 24f	1,756,630.	1,437,193.	319,437.							
reported in column (B) joint costs from a	26	Joint Costs. Check here ▶ If following										
		combined educational campaign and fundraising										
Solicitation	JSA	solicitation		_								

Pa	rt X	Balance Sheet								
			(A) Beginning of year			B) of yea	r			
_	1	Cash - non-interest-bearing	<u> </u>	1						
	2	Savings and temporary cash investments	657,295.			600,	956			
	3	Pledges and grants receivable, net				279,				
	4	Accounts receivable, net					462.			
	5	Receivables from current and former officers, directors, trustees, key					102.			
		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						
S	7	Notes and loans receivable, net		7						
Assets	8	Inventories for sales or use		8						
As	9	Prepaid expenses and deferred charges STMT. 4	17,590.	9		2.	443.			
		Land, buildings, and equipment: cost basis 10a 86,735	27,1000.				<u></u>			
		Less: accumulated depreciation. Complete								
	~	Part VI of Schedule D	36,664.	10c		27.	611.			
	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)	764,627.			922,	141			
	17	Accounts payable and accrued expenses	79,536.				189.			
	18	Grants payable	13,330.	18		<u> </u>	<u> 109.</u>			
	19	Deferred revenue		19						
	20	Tax-exempt bond liabilities		20	•					
Liabilities	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	4,453.	 			453.			
	26	Total liabilities. Add lines 17 through 25	83,989.				642.			
		Organizations that follow SFAS 117, check here ► X and complete	03,303.		··············		<u> </u>			
es		lines 27 through 29, and lines 33 and 34.		lt						
2	27	Unrestricted net assets	380,033.	27		365,	<u>514.</u>			
39	28	Temporarily restricted net assets	300,605.	28		488,				
or Fund Balano	29	Permanently restricted net assets		29						
5		Organizations that do not follow SFAS 117, check here ▶ □ and								
7		complete lines 30 through 34.								
ts	30	Capital stock or trust principal, or current funds		30						
ssets	31	Paid-in or capital surplus, or land, building, or equipment fund	<u> </u>	31						
⋖	32	Retained earnings, endowment, accumulated income, or other funds		32						
Net	33	Total net assets or fund balances	680,638.	33		85 <u>4</u> ,	499.			
_	34	Total liabilities and net assets/fund balances	764,627.	34		922,				
-Pa	rt-X-l-		, , , , , , , , , , , , , , , , , , , ,							
		· · · · · · · · · · · · · · · · · · ·				Yes	No			
1	Acco	unting method used to prepare the Form 990 Cash X Accrual Othe	er				i			
2a	Were	the organization's financial statements compiled or reviewed by an independent account	tant?		. 2a		х			
b		e the organization's financial statements audited by an independent accountant?				х				
С		es" to lines 2a or 2b, does the organization have a committee that assumes responsibility								
audit, review, or compilation of its financial statements and selection of an independent accountant?										
3a		result of a federal award, was the organization required to undergo an audit or audits as s								
		Single Audit Act and OMB Circular A-133?		<i></i> .	За	x				
b	lf "Y∈	es," did the organization undergo the required audit or audits?	<u></u>	<u></u> .	. 3b	x				
						n 990	(2008)			

(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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Nam	e of t	he organizatio	n NATIONAL	ASSEMBLY ON SC	HOOL-BA	SED			Employe	r identifica	tion number
		CARE								54-17	52058
Par	t I	Reason for	or Public Chari	ity Status (All organ	ızatıons m	ust comp	lete this	part.) (se	e instru	ctions)	
The	orga	nization is no	ot a private found	dation because it is: (P	lease check	only one o	organizati	on.)			
1	Ш	A church, co	onvention of chu	rches, or association	of churches	s described	in sectio	n 170(b)(1)(A)(i).		
2	Ш	A school de	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sched	ule E.)					
3	Ш	-		hospital service organ							•
4		A medical	research organiz	zation operated in co	njunction v	with a hos	pital des	cribed in	section	170(b)(1)	(A)(iii). Enter the
			ame, city, and sta								
5	Ш	An organiza	ation operated for	or the benefit of a col	llege or un	iversity ow	ned or o	perated I	by a gove	ernmental	unit described in
	_		(b)(1)(A)(iv). (Co								
6	Ш			vernment or governme							
7	Ш	-		lly receives a substan		its support	t from a q	governme	ental unit	or from t	he general public
_	$\overline{}$			(1)(A)(vi). (Complete F							
8	Ш		•	d in section 170(b)(1)	· · · · ·		•				
9	<u>X</u>	_		lly receives: (1) more							•
				ted to its exempt fun		-			, .		
			•	ment income and un				-		511 tax)	from businesses
			•	after June 30, 1975.					•		
10	Н	-	-	ind operated exclusive	-		-			•	•
11	Ш	_	-	and operated exclusion	-						-
			•	ublicly supported orga at describes the type o					•	•	
		a Typ	~	—		e III - Func					pe III - Other
e			_	ertify that the organiz			_	-			•
_	ш	-	-	ion managers and oth				-			•
			section 509(a)(-	ici tilali oli	c or more	publicly (зарропсс	organiz	ations de	Scribca in Section
f		, ,, ,	` , ,	l a written determina	tion from	the IRS tha	atitisa	Type I	Type II o	r Type III	supporting
•		=	n, check this box					.,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,	
g		-		the organization acce	pted any d	ift or contri	bution fro	m any of	the		
		following pe		G	,,,,,						
				or indirectly controls	, either ale	one or tog	ether wit	h person	s descrit	oed in (ii)	Yes No
				erning body of the sup				•		` `	11g(i) X
		(il) A famil	y member of a p	erson described in (i) a	bove?						11g(il) X
		(iii) A 35%	controlled entity	of a person described	l in (i) or (ii)	above?					11g(ili) X
h		Provide the	following inform	ation about the organi	zations the	organizati	on suppo	rts.			
1 (i)		of supported	(ii) EIN	(iii) Type of organization						s the	(viı) Amount of
	orga	inization		(described on lines 1-9 above or IRC section		sted in your document?	the orgar col (i)	nization in of your		tion in col. zed in the	support
				(see instructions))	90,0,,,,,		supt	ort?		S?	
			·		Yes	No	Yes	No	Yes	No	
									ł		
		_									
									<u>-</u>		<u> </u>
							1				
								<u> </u>	ļ <u></u>		
						<u> </u>	ļ	<u> </u>	<u></u> _		
Tota									ŧ		
			L	Notice coethe instructions		<u> </u>	L	l,	t	<u> </u>	m 990 or 990 EZ) 2009

Sche	dule A (Form 990 or 990-EZ) 2008			<u>54</u>	<u>-1752058</u>		Page 2					
Pai	Support Schedule for Org (Complete only if you chec	anizations D ked the box o	Described in Son line 5, 7, or	Sections 170(b 8 of Part I.)	o)(1)(A)(iv) and	170(b)(1)(A)(v	/i) 					
Sec	tion A. Public Support											
Cale	endar 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	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			_								
5	The portion of total contributions by each		1									
	person (other than a governmental unit or			1								
	publicly supported organization) included											
	on line 1 that exceeds 2% of the amount											
	shown on line 11, column (f)											
6	Public support. Subtract line 5 from line 4			<u> </u>	<u> </u>		<u> </u>					
	tion B. Total Support	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
Çale	endar year (or fiscal year beginning in)	(a) 2004	(B) 2003	(6) 2006	(a) 2007	(e) 2006	(I) Total					
7 8	Amounts 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			<u> </u>	<u> </u>							
12	Gross receipts from related activities, etc. (S	See instructions)				12						
13	First five years. If the Form 990 is for the o	organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a 501(c)(3)							
	organization, check this box and stop here			<u> </u>		<u> </u>	<u></u> ▶					
<u>Sec</u>	tion C. Computation of Public Supp											
14	Public support percentage for 2008 (lin	ne 6, column (f	f) divided by line	: 11, column (f))		14	%					
15	Public support percentage from 2007						%					
16a	33 1/3% support test - 2008. If the or	rganization did	not check the b	oox on line 13, a	and line 14 is 33	1/3% or more,	check this box					
	and stop here. The organization qualifi											
Ь	33 1/3% support test - 2007. If the or	rganization did	not check a bo	x on line 13 or 1	16a, and line 15	is 33 1/3% or n	nore, check this					
	box and stop here. The organization q	ualifies as a pı	ublicly supported	dorganization .			▶ □					
17a	10%-facts-and-circumstances test - 2	-										
	is 10% or more, and if the organization meets the "fact-and-circumstances" test, check this box and stop here. Explain											
	in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported											
	organization						▶∟					
b	10%-facts-and-circumstances test - 2						l line					
	15 is 10% or more, and if the organiza											
	Explain in Part IV how the organization	meets the "fac	cts-and-circums	tances"" test. Th	ne organization o	iualifies as a pub	licly					

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

Schedule A (Form 990 or 990-EZ) 2008

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 Grfts, grants, contributions, membership fees received (Do not include any "unusual grants ") 842,834 1,259,627 1,394,071 1,925,236 1,542,163 6,963,931. 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 298,518 264,417. 347,363 361,920 364,976 1,637,194. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 1,141,352 1,524,044 1,741,434 2,287,156 1,907,139 8,601,125. 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 c Add lines 7a and 7b. Public support (Subtract line 7c from 8,601,125. Section B. Total Support (e) 2008 (c) 2006 (a) 2004 (b) 2005 (d) 2007 (f) Total Calendar year (or fiscal year beginning in) 9 Amounts from line 6 1,141,352 1,524,044 1,741,434 2,287,156 1,907,139 8,601,125. 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 16,213 32,455 26,606 10.424 2,529 88,227. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 88,227. 16,213 32,455 26,606 2,529 10,424 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 6,083. 17,507 26,281 24,700. 20,823. 95,394. Total support. (Add lines 9, 10c, 11, 8,784,746. 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 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 97.91% <u>81.47%</u> Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 1.00% 17 17 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h. 18 1.22% 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

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

JSA 8E1221 1 000

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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(cy)(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.

	` ', '	s," to Form 990, Part IV, line 5 (Proxy Ta		(17) Complete Fart II-B Botte	accomplete Full III-A
	of organization	ONAL ASSEMBLY ON SCHOOL	-BASED	Employer identi	fication number
HEA	LTH CARE			54-17	752058
	t I-A To be complete	d by all organizations exempt ons for Schedule C for details.	under section 50		
1		ne organization's direct and indirect			
2	Political expenditures			▶ \$	
3	Volunteer hours		• • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	- ·
Par	See the instruction	d by all organizations exempt ons for Schedule C for details.			
1	Enter the amount of any	excise tax incurred by the organizat	ion under section 49	955 ▶ \$	
2	Enter the amount of any	excise tax incurred by organization	managers under se	ction 4955 ▶ \$	
3 4a b		d a section 4955 tax, did it file Forn			
	t I-C To be complete	ed by all organizations exempted by all organizations exempted by all organizations.	t under section 50	01(c), except section 50)1(c)(3).
1	Enter the amount directly	expended by the filing organization	n for section 527 e	xempt function	
	activities			▶\$	
2	Enter the amount of the fil	ing organization's funds contributed	d to other organizati	ions for section	
	527 exempt function activ	rities		▶ \$	
3	Total of direct and indirect	t exempt function expenditures. Add	d lines 1 and 2 and	enter here and	
_	on Form 1120-POL, line 1	7b	• • • • • • • • • •	▶ ♥	
4		file Form 1120-POL for this year? .			
5	were made. Enter the an contributions received and	es and employer identification number nount paid and indicate if the amount of promptly and directly delivered to ittee (PAC). If additional space is ne	ount was paid from a separate political	the filing organization's organization, such as a se	funds or were political
	(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-

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

JSA 8E1264 1 000 Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008					752058_	Page 2
Part II-A To be completed b (election under sec	y organ	izations e (h)). See	xempt under sec	tion 501(c)(3) to	that filed Form 5768 r details.	<u> </u>
A Check ▶ If the filing orga	nization	belongs to	an affiliated grou	p.		
B Check ▶ if the filing orga	<u>nization</u>	checked	box A and "limited	control" provisi	ons apply.	
Limits (The term "expendi		ying Expen eans amou		l.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to i	nfluence	public opini	ion (grass roots lob)	bying)		
b Total lobbying expenditures to i						
c Total lobbying expenditures (ad						
d Other exempt purpose expendi						
e Total exempt purpose expendit	ures (ado	l lines 1c ar	nd 1d)	· [
f Lobbying nontaxable amount. E	nter the	amount fro	m the following table	e in both	_	
columns.						
If the amount on line 1e, column (a) or (b) is:	The lobbyi	ng nontaxable amount	is:		
Not over \$500,000		20% of the	amount on line 1e			
Over \$500,000 but not over \$1,000	0,000	\$100,000 p	lus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000	\$175,000 p	lus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$17,	000,000	\$225,000 p	lus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000		<u>.</u>		
g Grassroots nontaxable amount						
h Subtract line 1g from line 1a. E						
i Subtract line 1f from line 1c. Er	nter -0- if	line f is mo	re than line c			
j If there is an amount other than			·	•	•	
section 4911 tax for this year?			<u> </u>	<u> </u>	<u> </u>	Yes No
	ions that	made a se	raging Period Unde ection 501(h) election tructions for lines 2	on do not have t	o complete all of the fi	ve
	Lobb	ying Expe	nditures During 4-Y	ear Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	(a) 2	005	(ь) 2006	(c) 2007	(d) 2008	(e) Total
2 a Lobbying non-taxable amount						
b Lobbying ceiling amount (150% line 2a, column(e))						
c Total lobbying expenditures		,				
d Grassroots non-taxable amount		······································				
e Grassroots ceiling amount						

f Grassroots lobbying expenditures

Έ	To be completed by organizations exempt under section 501(c)(3) that have 5768 (election under section 501(h)). See the instructions for Schedule C for d			Form			
		(a)		(b)	
		Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local	- 1					
	legislation, including any attempt to influence public opinion on a legislative matter or						
_	referendum, through the use of:	i					
a	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>				
b		X					
C	Media advertisements?		<u> </u>				
đ e	Mailings to members, legislators, or the public?	-	x x				
f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?	\dashv	X				
ı g	Direct contact with legislators, their staffs, government officials, or a legislative body?	.	Х.				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?	X X		_			447
ï	Other activities? If "Yes," describe in Part IV	^	x				447
j	Total lines 1c through 1i					21	447
, 2 а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1	x				32/
b	If "Yes," enter the amount of any tax incurred under section 4912						
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?]	x				
	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion		(c)(5)	. or		
	section 501(c)(6). See the instructions for Schedule C for details.		•••	(=)(=)	,		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		• • •		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				3		
Pa	t III-B To be completed by all organizations exempt under section 501(c)(4), se						
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No	o" O	R if	Part I	II-A,		
	question 3 is answered "Yes." See Schedule C instructions for details.						
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amount	nts (of				
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due:	3.,		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	obyin	g				
_	and political expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)			4			
5			·_•	5			
	t IV Supplemental Information						
Con	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C,	line	5 and	d Part	I-B, li	ne 1i.	
Alsc	, complete this part for any additional information.						
			- -				
							

Scriedare o (i	OIII 350 G 350-LZ/ 2000	54-1752056	Page 4
Part IV	Supplemental Information (continued)		
raitiv	Supplemental information (continued)	· · · · · · · · · · · · · · · · · · ·	
			·
			

Schedule C (Form 990 or 990-EZ) 2008

ECHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name	e of the organization NATIONAL ASSEMBLY ON SCHOOL-BASED	Employer identification number
HEA	ALTH CARE	54-1752058
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds of the organization answered "Yes" to Form 990, Part IV, line 6.	or Accounts. Complete if
	the organization answered fies to Form 990, Part IV, line 6. (a) Donor advised funds	(h) Funda and other gooding
		(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 o	
_	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fur used only for charitable purposes and not for the benefit of the donor or donor advisor or ot	
	impermissible private benefit?	
Par	t II Conservation Easements. Complete if the organization answered "Yes" to I	Form 990 Part IV line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply).	3111 330,1 are 14, 1110 7.
•		of an historically importantly land area
		of certified historic structure
	Preservation of open space	of certified historic structure
2	Complete lines 2a-2d if the organization held a qualified conservation contribution in the for	m of a consensation easement
_	on the last day of the tax year.	iii oi a conservation easement
	on the last day of the lax year.	Held at the End of the Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	
C	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06	
3	Number of conservation easements modified, transferred, released, extinguished, or termi	
	the taxable year	natou by the organization during
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, v	iolations, and
	enforcement of the conservation easements it holds?	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of s	-
	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	, , , , , , , , , , , , , , , , , , , ,
9	In Part XIV, describe how the organization reports conservation easements in its revenue as	nd expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's finan	cial statements that describes
	the organization's accounting for conservation easements.	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Oth Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	er Similar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education, or reseprovide, in Part XIV, the text of the footnote to its financial statements that describes these its	earch in furtherance of public service.
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research 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:	
а	Revenues included in Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	
For F	Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2008

Par	t III Organizations Maintaining Coll	ections of Art, Histo	rical Treasure	s, or Ot	her Similar A	ssets (continued)
3	Using the organization's accession and other	er records, check any	of the following t	hat are	a significant us	e of its collection
	items (check all that apply):	_	- .			
а	Public exhibition	d _	Loan or ex	-	-	
b	Scholarly research	e	Other			
C	Preservation for future generations		_			
4	Provide a description of the organization's of	collections and explain	how they further	r the org	anization's exe	empt purpose in
	Part XIV.					
5	During the year, did the organization solicit					
	assets to be sold to raise funds rather than					
Par	Trust, Escrow and Custodial Ar Part IV, line 9, or reported an ar	rangements. Comp mount on Form 990,	lete if organiza Part X, line 21.	tion ans	swered "Yes"	to Form 990,
		,				
1a	Is the organization an agent, trustee, custoo	lian or other intermed	iary for contribut	ions or c	ther assets no	t <u> </u>
	included on Form 990, Part X?				. .	Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table:			
					A	mount
C	Beginning balance					
d	Additions during the year			1 d		
e	Distributions during the year					
f	Ending balance					
2a	Did the organization include an amount on		21?		. .	Yes No
	If "Yes," explain the arrangement in Part XIV		 			
Par	t V Endowment Funds. Complete it	f organization answe	ered "Yes" to Fo	orm 990		
		rent Year (b) Prior y	ear (c) Two ye	ars back	(d) Three year	rs back (e) Four years back
1 a	Beginning of year balance					
b	Contributions			· · · · · · · · · · · · · · · · · · ·		
C	Investment earnings or losses					
d	Grants or scholarships					
е	Other expenditures for facilities .					
	and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the ye	ar end balance held as	::			
а	Board designated or quasi-endowment ▶_	%				
b	Permanent endowment ▶ %					
C	Term endowment ▶%					
3a	Are there endowment funds not in the poss	session of the organiza	ation that are hel	d and a	dministered for	
	organization by:					Yes No
	(i) unrelated organizations					
	(ii) related organizations					
b	If "Yes" to 3a(ii), are the related organization	•				3b
4	Describe in Part XIV the intended uses of the					
Par	t VI Investments - Land, Buildings, a	and Equipment. See	Form 990, Pa	rt X, lin	e 10.	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	r (c	c) Depreciation	(d) Book value
1a	Land					
b	Buildings					
C	Leasehold improvements		4,30	00.	1,720.	2,580.
d	Equipment		82,4:	35.	57,402.	25,033.
	Other					
Tota	. Add lines 1a-1e. (Column (d) should equal	Form 990, Part X, colu	umn (B), line 10(c).)	▶	27,613.

Part VII Investments - Other Securities. See I	orm 990, Part X, lin	ne 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year mark	
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
		<u> </u>	
			
			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related. See		ne 13.	<u> </u>
(a) Description of investment type	(b) Book value	(c) Method of valuati	on'
(a) Description of investment type	(b) Book Value	Cost or end-of-year mark	et value
			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X,		I	
	Description		(b) Book value
			(-,
			· - · · · · · · · · · · · · · · · · · ·
	,		
	<u> </u>	<u> </u>	
Part X Other Liabilities. See Form 990, Part	X, line 25.		······
(a) Description of liability	(b) Amount		
Federal income taxes			
DUE TO PASBHC	4,453.		
T-1/0-1			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	4,453.	<u> </u>	<u></u>

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

UNCERTAINTY IN INCOME TAXES," NASBHC HAS DEFERRED THE APPLICATION OF THIS

PRONOUNCEMENT UNTIL ITS FIRST FISCAL YEAR BEGINNING AFTER DECEMBER 15,

2008. NASBHC'S POLICY IS TO EVALUATE UNCERTAIN TAX POSITIONS IN

ACCORDANCE WITH "ACCOUNTING FOR CONTINGENCIES."

Schedule D (Form 990) 2008

Schedule D (Fo	m 990) 2008	<u>54-1752058</u>	Page 5
Part XIV	Supplemental Information (continued)	· · · · · · · · · · · · · · · · · · ·	
- Cart	- Cappionetta montation (Continuou)		
			_

Schedule D (Form 990) 2008

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	NATIONAL ASSEMBLY ON SCHOOL-BASED	Employer Identification number
HEALTH CARE		54-1752058
MANAGEMENT COM	PENSATION	
PART IV, SEC B	3, LINE 15	
EXECUTIVE DIRE	CTOR COMPENSATION WAS SET BY THE BOARD OF DIRECTORS	AFTER
CONSULTATION W	ITH AN EMPLOYMENT CONSULTANT FIRM.	
_		
· — —		
	~~ ~~~	

31

Schedule O (Form 990) 2008	
Name of the organization NATIONAL ASSEMBLY ON SCHOOL-BASED	Employer identification number
HEALTH CARE	54-1752058
FORM 990 REVIEW	
PART VI, SEC A, LINE 10	
THE FORM 990 IS REVIEWED BY THE ADMINISTRATIVE DIREC	CTOR. EXECUTIVE
DIRECTOR, AND BOARD TREASURER.	

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO PROMOTE AND ASSURE QUALITY PRIMARY HEALTH CARE FOR AMERICA'S CHILDREN AND YOUTH THROUGH INTERDISCIPLINARY AND COLLABORATIVE EFFORTS. THE ASSEMBLY SUPPORTS INSTITUTIONALIZATION OF SCHOOL-BASED HEALTH CARE NATIONWIDE TO IMPROVE CHILDREN'S LIVES AND OPPORTUNITIES FOR SUCCESS IN SCHOOL AND SOCIETY. IT SUPPORTS ITS MEMBERS BY PROVIDING GOVERNMENT ADVOCACY, INFORMATION, EXCHANGE OF KNOWLEDGE, NETWORKING OPPORTUNITIES AND TECHNICAL ASSISTANCE.

• 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS

DESCRIPTION OF SERVICES COMPENSATION

CHILDWORKS, PLLC 3800 CATHEDRAL AVENUE

WASHINGTON, DC 20016

POLICY CONSULTANT

113,870.

TOTAL COMPENSATION

113,870.

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FORM 990, PART VIII - INVESTMENT INCOME

BUSINESS REV. UNRELATED <u>ပ</u> EXEMPT REVENUE RELATED OR (B) 2,529. REVENUE TOTAL **€** INTEREST INCOME DESCRIPTION

TOTALS

EXCLUDED REVENUE 9 2,529.

2,529.

2,529.

STATEMENT

** FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

 2008

54-1752058•

NATIONAL ASSEMBLY ON SCHOOL-BASED Description of Property

DEPRECIATION													
Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Ending Accumulated Accumulated depreciation depreciation	Ending Accumulated Medepreciation thod	Conv	Life	ACRS CRS class class	A Current-year (S) 179 ss expense	Current-year depreciation
LEASEHOLD IMPR	01/01/2007	4,300.	100.000			4,300.	.098	1,720. SL		5.000			.098
FURN & EQUIP	11/01/2000	6,013.	100.000			6,013.	6,013.	6,013. SL		5.000	_		
FURN & EQUIP	11/01/2004	3,563.	100.000			3,563.	3,563.	3,563. SL		3.000			
FURN & EQUIP	05/01/2005	2,468.	100.000			2,468.	2,468.	2,468. SL		3.000			
FURN & EQUIP	06/01/2006	4,959.	100.000			4,959.	3,719.	4,959. SL		3.000			1,240.
FURN & EQUIP	05/01/2006	2,725.	100.000			2,725.	1,272.	1,817. SL		5.000			545.
FURN & EQUIP	08/07/2007	3,099.	100.000			3,099.	1,119.	2,152. SL		3.000			1,033.
FURN & EQUIP	09/01/2007	23,751.	100.000			23,751.	23,751.	23,751. SL		3.000			
FURN & EQUIP	09/01/2007	11,456.	100.000			11,456.	2,291.	4,583. SL		5.000			2,292.
LAPTOP	12/01/2007	1,332.	100.000			1,332.	370.	814. SL		3.000			444.
2 LAPTOPS	02/01/2008	2,415.	100.000			2,415.	537.	1,342. SL		3.000			805.
LAPTOP	02/01/2008	1,242.	100.000			1,242.	276.	690. St		3.000			414.
COPIER	04/01/2008	17,310.	100.000			17,310.	1,730.	5,192. SL		5.000			3,462.
2 DESKTOPS	09/01/2009	2,102.	100.001			2,102.		58. SL		3.000			58.
										•			
											_		
Less Retired Assets			·····										
Subtotals		86,735.				86,735.	47,969.	59,122.					11,153.
Listed Property				•	•								
											+		
									1				
- Constant Accept										1	-	-	
Less Adilled Assets							:						
Subtotals													
AMORTIZATION		86,735.				86,735.	47,969.	59,122.					11,153.
	Date	Cost						Ending		L			
Asset description	placed in service	or basis					Accumulated	Accumulated amortization Code	e Lrfe				Current-year amortization
											-		
											-		
									1				
										_			
TOTALS													
*Assets Ketired													
8X9024 1 000		,						č					

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