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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

2008

Open to Public Inspection

A Fo	r the 2	2008 ca	lendar yea	r, or tax year beginning 10-01-2008	and ending 09-30-200)9	-	
		plicable	Please	C Name of organization			D Employer ide	ntification number
_	dress ch		use IRS	THE STUDENT CONSERVATION ASSOCIA	TION INC		91-088068	4
_	me char	-	label or print or	Doing Business As			E Telephone nu	
_		-	type. See				(603) 543-1	1700
_	tial retur		Specific Instruc-	Number and street (or P O box if mail i 689 RIVER RD P O BOX 550	s not delivered to street addr	ess) Room/suite	G Gross receipt	s \$ 30,722,280
	mınatıoı		tions.	OUS REVER RET & BOX 330				
- Am	ended r	eturn		City or town, state or country, and ZIP - CHARLESTOWN, NH 036030550	+ 4	•		
- Apı	plication	pending		CHARLESTOWN, NIT 030030330				
			F Nar	ne and address of Principal Officer		H(a) Is the	s a group return	for
			DALE	PENNY		affilia		「Yes ▼No
				VER ROAD ESTOWN, NH 03603				
r Ta	x-exem	nt status) (3) 4 (insert no)		` '	l affiliates include	·
					1 327	_		See instructions)
W	eb site	≥: ► WW	W THESC	AORG		H(c) Grou	ip Exemption Nu	mber 🕶
			<u> </u>	:ion		1	1054 1	S
СТур	e of org	anization	 ✓ Corporat	ion trust association other ►		L Year of Fo	rmation 1964 M	State of legal domicile NY
Pa	rt I	Sum	mary					
	1	Briefly	describe th	e organization's mission or most sig	gnificant activities			
2				EXT GENERATION OF CONSERVA				
Governance		ENVIR	ONMENT A	AND COMMUNITIES BY ENGAGIN	G YOUNG PEOPLE IN I	HANDS-ON S	ERVICE TO THE	ELAND
1							_	
5			,	if the organization discontinued its				
	3	Number	of voting i	nembers of the governing body (Par	t VI, line 1a)		_	28
o O	4	Number	ofindeper	ndent voting members of the govern	ing body (Part VI, line 1	b)	. 4 _	28
<u>₽</u>	5	Total n	ımber of er	nployees (Part V , line 2a)			5 _	639
Acumines &	6	Total nu	umber of vo	olunteers (estimate if necessary)			6 _	5
Ť	7a	Total gr	oss unrela	ted business revenue from Part VII	I, line 12, column (C)		7a _	7,737
	ь	Net unr	elated bus	iness taxable income from Form 990	O-T, line 34		7b	-258
						Pric	or Year	Current Year
	8	Contri	butions an	d grants (Part VIII, line 1h)			9,151,672	7,777,819
ΞE	9	Progra	m service	revenue (Part VIII, line 2g)		-	22,114,678	21,725,717
Reveni	10	Invest	ment incor	me (Part VIII, column (A), lines 3, 4	1, and 7d)		644,080	405,020
ď.	11	Other	revenue (P	art VIII, column (A), lines 5, 6d, 8e	c, 9c, 10c, and 11e)		10,817	7,737
	12	Totalı	evenue—a	dd lines 8 through 11 (must equal P	art VIII, column (A), lır	ne		
		12)					31,921,247	29,916,293
	13	Grants	and simila	ar amounts paid (Part IX, column (A), lines 1-3)		1,844,277	2,268,066
	14	Benefi	ts paid to c	or for members (Part IX, column (A)	, line 4)		0	0
ø	15		es, other co	ompensation, employee benefits (Pa	rt IX, column (A), lines	5 –	12 002 167	12 920 006
Expenses		10)	1.6				12,092,167	13,820,996
<u>ā</u>	16a			lraising fees (Part IX, column (A), li	,		0	0
ठ	b			penses, Part IX, column (D), line 25 <mark>2,084,</mark>				
	17	Other	expenses	(Part IX, column (A), lines 11a-11d	d, 11f-24f)		16,442,299	16,497,391
	18	Total	expenses—	add lines 13–17 (must equal Part I	(X, line 25, column (A))		30,378,743	32,586,453
	19	Reven	ue less exp	penses Subtract line 18 from line 1	2		1,542,504	-2,670,160
දීවේ			·			Beginn	ing of Year	End of Year
944	20	Total	assets (Pa	rt X, line 16)			25,203,990	23,433,651
net Assets of Fund Balances	21		•	Part X, line 26)			12,253,371	13,522,238
<u> </u>	22		•	id balances Subtract line 21 from li	ne 20		12,950,619	9,911,413
							12,950,619	9,911,413
Pal	rt II		ature Bl					h - h - h - f h l l
				erjury, I declare that I have examined this r correct, and complete Declaration of prepa				
Plea	ise	****	**			2010	-07-29	
Sigr		Sign	ature of office	er		Date		
Here	е	Rich	ard Seaman	Chief Financial Officer				
			or print nam					
		Dropara	'c h		Date	Check If	Preparer's PTIN (See Gen Inst)
Paid		Preparer signature		J KENNEY		self-		,
	arer's	F ,	r	COANT THEORY TO WA		empolyed 🕨		
			ame (or your nployed),	GRANT THORNTON LLP			EIN 🕨	
J 5 C	Only		and ZIP + 4	226 CAUSEWAY STREET				
				BOSTON, MA 021142155			Phone no 🕨 (6	17) 723-7900
/av	the IDS	S discus	e this retii	rn with the preparer shown above? ((See instructions)			Eyes ENO

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission	
	TO BUILD THE NEXT GENERATION OF CONSERVATION LEADERS AND INSPIRE LIFELONG STEWARDSHIP OF OUR ENVIRONMENT AND COMMUNITIES BY ENGAGII	NG
	YOUNG PEOPLE IN HANDS-ON SERVICE TO THE LAND	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting or make significant changes in how it conducts any program	
	services?	
	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 (4) organizations and 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		
	Conservation interns 3-12 month internship opportunities for individuals 18 years of age and older, primarily hosted by government agencies on public land Internships cover a wide range of areas including scientific research, wildlife studies, habitat restoration and visitor interpretive services. Approximately 1,625	
	were fielded in fiscal year 2009	incerns
4b	(Code) (Expenses \$ 8,453,626 including grants of \$ 1,345,819) (Revenue \$ 3,139,528)	
	Community crews Locally based programs for students aged 15-19 Summer and school-year programs offer projects in urban area parks and encompass a	a wide
	range of activities including trail maintenance, habitat restoration, field trips and community service projects. In fiscal year 2009 SCA fielded 152 crews in 14	
	with approximately 1,340 members	
4c	: (Code) (Expenses \$ 6,809,455 including grants of \$ 510,872) (Revenue \$ 5,162,007)	
	Conservation Corps Teams Teams of interns spend 3-10 months devoted to critical environmental issues such as wildfire management and education, trail	
	restoration and maintenance, environmental education, and invasive species eradication. Approximately 95 teams comprised of 400 members were fielded in vear 2009.	n fiscal
	year 2009	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 3,370,989 including grants of \$) (Revenue \$ 3,090,042)	
 4е		
	. 1 otal program service expenses ψ 27,555,205 must equal rait 1Λ, Line 25, Column (b).	

art IV	Checklist o	f 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
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>	15		No
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		No
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>	17		N o
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		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
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		No
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νο
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?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
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		Νο
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		Νο

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			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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>	32		Νo
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
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		No
36	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		Νo
37	Did the organization conduct more than 5 percent 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		Νo

Pa	rt V	Statements Regarding Other IRS Filings and Tax Complianc	е				
						Yes	No
1a	Enter	r the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
		S. Information Returns . Enter -0- if not applicable					
			1a	24			
ь	Enter	r the number of Forms W-2G included in line 1a Enter -0- if not applicable					
			1b	0			
c		he organization comply with backup withholding rules for reportable payments to	o ven	dors and reportable			
	_	ng (gambling) winnings to prize winners?			1c	Yes	
2a		r the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> <i>ments</i> filed for the calendar year ending with or within the year covered by this					
	returi		2a	639			
ь	Ifatl	ı least one ıs reported ın 2a, dıd the organızatıon file all required federal employm	nent t	ax returns?			
	Not e	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this	s retui	rn.	2b	Yes	
3а		he organization have unrelated business gross income of \$1,000 or more during	g the	year covered by this	_	.,	
		n?	• •		3a	Yes	
		es," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i> e			3b	Yes	
4a		ny time during the calendar year, did the organization have an interest in, or a si · a financial account in a foreign country (such as a bank account, securities acc					
		unt)?		, or other interior	4a		No
b	Tf"Va	es," enter the name of the foreign country					
		the instructions for exceptions and filing requirements for Form TD F 90-22.1, <i>Re</i>	port o	f Foreign Bank and			
		cial Accounts.		_			
5a	Wast	the organization a party to a prohibited tax shelter transaction at any time durir	ng the	tax year?	5a		No
b	Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited	tax sł	nelter transaction?	5b		No
_	If "Ye	es," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exemp</i> a	t Entil	ty Regarding Prohibited			
·		ihelter Transaction?	•	· · ·	5с		
6a	Dıd tl	he organization solicit any contributions that were not tax deductible?			6a		No
b	If "Ye	es," did the organization include with every solicitation an express statement th	at su	ch contributions or gifts			
	were	not tax deductible?			6b		
7	Orgar	nizations that may receive deductible contributions under section 170(c).					
а		he organization provide goods or services in exchange for any quid pro quo con	trıbut	ion of \$75 or	7a		Νo
		7		10	ı	I	I
		es," dıd the organization notify the donor of the value of the goods or services pr			7b		
С		he organization sell, exchange, or otherwise dispose of tangible personal propei orm 8282?			7c		No
d		es," indicate the number of Forms 8282 filed during the year	7d				
-	1	as, material number of rorms of of med during the year.	7.4				
e		he organization, during the year, receive any funds, directly or indirectly, to pay					
		fit contract?			7e		No
f	Did tl	he organization, during the year, pay premiums, directly or indirectly, on a perso	onal b	enefit contract?	7f		No
g	Fora	ll contributions of qualified intellectual property, did the organization file Form 8	3899	as required?	7g		
h		ontributions of cars, boats, airplanes, and other vehicles, did the organization fi	ıle a F	orm 1098-C as	7h		
	•	red?		-1 500(-)(3)	711		
8		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds a orting organizations. Did the supporting organization, or a fund maintained by a s					
	exces	ss business holdings at any time during the	•	,	8		
		?					
9		on $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.					
а	Did tl	he organization make any taxable distributions under section 4966?	•		9a		
Ь		he organization make a distribution to a donor, donor advisor, or related person	· .		9b		<u> </u>
10	Sectio	on 501(c)(7) organizations. Enter	i	1			
		ation fees and capital contributions included on Part VIII, line 12	10a				
b		s receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	facılıt	TIES					
11	Secti	on 501(c)(12) organizations Enter					
а	Gross	s income from members or shareholders					
			11a				
b		s income from other sources (Do not net amounts due or paid to other sources	444				
	again	nst amounts due or received from them)..........[11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu	of Form 1041?	12a		
b	If "Ye	es," enter the amount of tax-exempt interest received or accrued during the	4				
	year		12b	l			l

No

Yes

Part VI	
	about policies not required by the Internal Revenue Code.)
Section	A. Governing Body and Management
	<u></u>

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumsta	ances,			
1a	Enter the number of voting members of the governing body	1a		28			
Ь	Enter the number of voting members that are independent	1b		28			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		•		2		Νo
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co				3		Νo
4	Did the organization make any significant changes to its organizational documents sfiled?	ince t	he prior Form 99:	0 was	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization	anızat	ion's assets? .		5		Νo
6	Does the organization have members or stockholders?				6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect governing body?			of the	7a		Νo
ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	r other persons?		7b		Νo
8	Did the organization contemporaneously document the meetings held or written activities year by the following	ons ur	ndertaken during	the			
а	the governing body?				8a	Yes	
b	each committee with authority to act on behalf of the governing body? \cdot . \cdot .				8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?				9a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the organization.		•	•	9b	Yes	
10	Was a copy of the Form 990 provided to the organization's governing body before it was describe in Schedule O the process, if any, the organization uses to review the		•		10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section Athe organization's mailing address? If "Yes," provide the names and addresses in Sc	,			11		Νo

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AL,AK,AZ,AR,CA,CT,FL,GA,ID,IL,IN,IA,KS, KY,LA,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY, NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA, WV,WI
- Section 6104 requires an organization to make its Form 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. I another's website.
- 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. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

RICHARD SEAMAN 689 RIVER ROAD P O BOX 550 CHARLESTOWN,NH 03603 (603) 543-1700

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

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

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees 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, or 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

The check this box in the organization and i	·	Posit	(C) chec	:k al				(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII	Continue	a
rait vii	Continue	u

				(tion that a			all			(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)		Estima amount o compens from t rganizati relati organiza	fother ation he on and ed
1b	Total		<u>.</u> .	<u>.</u>				<u> </u>	884,67	<u> </u> 	0		103,779
2	Total number of individuals (includicompensation from the organization		a) who	recei	ved			າ \$1	00,000 in reportab	le			
2			a) who	recei	ved			n \$1	00,000 in reportab	le		Yes	No
3	compensation from the organization Did the organization list any forme i	n ► 7	ctor or t	ruste	e, k	mor	re thar	/ee,	or highest compens	г		Yes	
3	Did the organization list any former on line 1a? If "Yes," complete Schedu	n⊫7 rofficer, direa ule J for such	ctor or t	ruste	e, k	ey e	employ	/ee,	or highest compens	sated employee	3	Yes	No No
	Did the organization list any former on line 1a? <i>If "Yes," complete Schede</i> For any individual listed online 1a, in organization and related organization	r officer, directule J for such	ctor or t	ruste u <i>al</i> i	e, k	ey e	employ	/ee, • and	or highest compens	sated employee n from the	3	Yes	
3 4	Did the organization list any former on line 1a? If "Yes," complete Scheduter for any individual listed online 1a, in organization and related organization and related organization.	r officer, directule J for such sthe sum of one greater the sum of	ctor or t individu reporta nan \$15	ruste ual ible c	e, k omp	ey e	employ ation (es," co	ee, and omp	or highest compension or highest compensation other compensation lete Schedule J for su	sated employee in from the uch	3	Yes	
3	Did the organization list any former on line 1a? <i>If "Yes," complete Schede</i> For any individual listed online 1a, in organization and related organization	r officer, directule J for such is the sum of ons greater the sum of one s	ctor or t Individu reporta nan \$15 • •	ruste ual oble c 50,00	ee, k omp 0? ;	ey e ens	employ ation cation many	ee, and omp	or highest compens other compensation lete Schedule J for su elated organization	sated employee from the ch for services			
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, i organization and related organization individual	r officer, directule J for such as the sum of ons greater the sum of ons greater the sum of ons greater the sum of accretions, "complete sum of accretions," complete sum of accretions, "complete sum of accretions, "comp	ctor or t Individu reporta nan \$15 • •	ruste ual oble c 50,00	ee, k omp 0? ;	ey e ens	employ ation cation many	ee, and omp	or highest compens other compensation lete Schedule J for su elated organization	sated employee from the ch for services	4		N o
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, i organization and related organization individual	r officer, directule J for such as the sum of ons greater the sum of ons greater the sum of ons greater the sum of the su	reportanan \$15 ue comp	ruste ual ible c 50,00 • oensa	omp omp oor i	ey e eens (f "Y froi	employ ation es," cc an many erson	and omp	or highest compension other compensation in the compensation in the compensation in the compensation in the compension in the compensation in the	sated employee on from the uch for services	4		N o
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization and related organization and vidual	r officer, directule J for such as the sum of ons greater the sum of ons greater the sum of ons greater the sum of the su	reportanan \$15 ue comp Schedula	ruste ual ible c 50,00 • oensa	omp omp oor i	ey e eens (f "Y froi	employ ation es," cc an many erson	and omp	or highest compens other compensation lete Schedule J for si elated organization sthat received mo	sated employee n from the uch for services	4	Yes	No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization and related organization and vidual	r officer, direct ule J for such s the sum of ons greater the eive or accru s," complete	reportanan \$15 ue comp Schedula	ruste ual ible c 50,00 • oensa	omp omp oor i	ey e eens (f "Y froi	employ ation es," cc an many erson	and omp	or highest compens other compensation lete Schedule J for si elated organization sthat received mo	sated employee n from the uch for services	4	Yes	No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization and related organization and vidual	r officer, directule J for such as the sum of ons greater the sum of ons greater the sum of ons greater the sum of the su	reportanan \$15 ue comp Schedula	ruste ual ible c 50,00 • oensa	omp omp oor i	ey e eens (f "Y froi	employ ation es," cc an many erson	and omp	or highest compens other compensation lete Schedule J for si elated organization sthat received mo	sated employee n from the uch for services	4	Yes	No
3 4 5	Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization and related organization and vidual	r officer, directule J for such as the sum of ons greater the sum of ons greater the sum of ons greater the sum of the su	reportanan \$15 ue comp Schedula	ruste ual ible c 50,00 • oensa	omp omp oor i	ey e eens (f "Y froi	employ ation es," cc ation many erson	and omp	or highest compens other compensation lete Schedule J for si elated organization sthat received mo	sated employee n from the uch for services	4	Yes	No

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated cam	npaigns 1a	47,122				
ants Ints	b	Membership d	ues					
Contributions, gifts, grants and other similar amounts	С	Fundraising ev	1b rents					
<u>a j</u>	d	Related organi	zations 1d					
ons, sím	e	Government gran		7,730,697				
ibatí Anter	"	f All other contributions, gifts, grants, and similar amounts not included above — 1f						
ng cart	g	Noncash conti lines 1a-1f \$	ributions included in 174,437					
O a	h		es 1a-1f)		7,777,819			
				Business Code				
E E	2a	CONTRACT AND A	AGENCY REVENUE	900,099	21,599,631	21,599,631		
exe exe	ь	APPLICATION FEE	S	900,099	126,086	126,086		
96 F	С							
ž 5	d							
ૐ ⊊	e							
Program Serwce Revenue	f	All other program service revenue						
<u>*</u>	g	Total. Add line ▶ \$ 21,725,71	e s 2a-2f 7					
	3		come (including divid	·	400.000			400.000
			mounts)	▶	486,206			486,206
	4	Income from inve	Income from investment of tax-exempt bond proceeds \blacktriangleright		0			
	5	Royalties .			0			
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental inco	ome or (loss) (i) Securities	(II) O ther				
	7a	Gross amount	724,801	(II) O ther				
		from sales of assets other						
	ь	than inventory Less cost or	805,987					
	"	other basis and sales expenses	000,501					
	с	Gain or (loss)	-81,186					
	d	Net gaın or (lo	ss)		-81,186			-81,186
Other Revenue	8a	events (not ind \$	s reported on line					
Ä			a					
ē	ь	Less directe	kpensesb					
₹	С	Net income or	(loss) from fundraisi	ıng events ▶	0			
	9a	Gross income activities See Complete Sched exceeds \$15,00	part IV , line 19 dule G if total					
	b	Less directe	xpensesb					
	с		(loss) from gaming a	activities •-	0			
	10a		inventory, less owances . a					
	b	Less cost of						
	С		(loss) from sales of		0			
	11-	Miscellaneou		Business Code 900,099	7,737		7,737	
	11a b	OTHERINCO	M F	500,039	1,131		1,131	
	C							
	d	All other rever						
	е	Total. Add line	:s 11a-11d	• • • • \$ 7,737				
	12	Total Revenue	Add lines 1h, 2g, 3	, 4, 5, 6d, 7d,	29,916,293	21,725,717	7,737	405,020
			1e	. ▶				

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				
Do 1	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	·		<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	2,268,066	2,268,066		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	775,399	493,874	269,410	12,115
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	11,050,319	9,520,265		991,768
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	244,851	209,842	8,263	26,746
9	Other employee benefits	803,074	673,043	49,459	80,572
10	Payroll taxes	947,353	790,670	68,737	87,946
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	108,420	70,473	37,947	
c	Accounting	115,672		115,672	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	16,297		16,297	
g	Other	482,119	225,169	18,496	238,454
12	Advertising and promotion	0			
13	Office expenses	1,307,829	949,945	86,309	271,575
14	Information technology	252,148	173,558	21,695	56,895
15	Royalties	0			
16	Occupancy	545,710	497,332	32,252	16,126
17	Travel	3,519,021	3,421,087	23,882	74,052
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	133,651	17,918	114,894	839
20	Interest	326,600		326,600	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	730,294	491,579	136,747	101,968
23	Insurance	664,011	544,489	112,882	6,640
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)				
а	SUBSISTANCE, HOUSING, HEALTH	5,961,329	5,961,329		
ь	TRAINING, ORIENT & CAREER SVC	687,794	651,252	34,614	1,928
c	BAD DEBT EXPENSE	438,813		438,813	
d	CONTRACT SERVICES	260,344	197,365	25,853	37,126
e	UNIFORMS	236,906	236,906		
f	All other expenses	710,433	539,127	91,456	79,850
25	Total functional expenses. Add lines 1 through 24f	32,586,453	27,933,289	2,568,564	2,084,600
26	Joint Costs. Check 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				

Dart V	Balance	Shoot
Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			118,187	1	74,646
	2	Savings and temporary cash investments			738,852	2	115,473
	3	Pledges and grants receivable, net			677,229	3	443,071
	4	Accounts receivable, net			10,602,249	4	9,397,922
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L	ployees or		5		
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use				8	
2	9	Prepaid expenses and deferred charges			1,061,127	9	706,086
Assets	10a	Land, buildings, and equipment cost basis	_{10a}	9,815,870			
•	b	Less accumulated depreciation Complete Part VI of Schedule D	10b	4,176,446	5,518,639	10c	5,639,424
	11	Investments—publicly traded securities			6,386,137	11	6,768,164
	12	Investments—other securities See Part IV, line 11 Complete Pa Schedule D	rt VII of			12	
	13	Investments—program-related See Part IV, line 11 Complete Part IV, lin	ort VIII			13	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	101,570	15	288,865		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			25,203,990	16	23,433,651
	17	Accounts payable and accrued expenses .			2,769,450	17	2,211,832
	18	Grants payable		18			
	19	Deferred revenue		0	19	338,150	
	20	Tax-exempt bond liabilities			2,566,585	20	2,500,000
<u>, 6</u>	21	Escrow account liability Complete Part IV of Schedule D				21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ï		persons Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		5,628,722	23	6,945,324	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D			1,288,614	25	1,526,932
	26	Total liabilities. Add lines 17 through 25			12,253,371	26	13,522,238
S 0 S		Organizations that follow SFAS 117, check here ▶ ↓ and complethrough 29, and lines 33 and 34.	ete lines	s 27			
Balance	27	Unrestricted net assets			8,572,450	27	5,236,717
Ba	28	Temporarily restricted net assets			712,500	28	900,358
됟	29	Permanently restricted net assets		3,665,669	29	3,774,338	
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and lines 30 through 34.	te				
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other fur		32			
Ŋĕţ	33	Total net assets or fund balances		12,950,619	33	9,911,413	
_	34	Total liabilities and net assets/fund balances			25,203,990	34	23,433,651
Pa	rt XI	Financial Statements and Reporting					

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
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?	2c	Yes	
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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

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As Filed Data -

DLN: 93493218010090

Employer identification number

OMB No 1545-0047

Public Charity Status and Public Support

(Form 990 or 990EZ)

SCHEDULE A

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public Inspection

THE S		T CONSERVATION	ON ASSOCIATION IN	NC .					pioyei ide		abc	•
								91	-088068	4		
	rt I			harity Status (to be co					Instruct	ions)		
The	rganı	zation is not	a private found	ation because it is (Please	check onl	ly one org	anızatıon))				
1	Γ	A church, c	onvention of ch	iurches, or association of ch	urches de	scribed in	Section 1	L70(b)(1)	(A)(i).			
2	Γ	A school de	escribed in Sect	i on 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)						
3	Γ	A hospital	or a cooperative	e hospital service organizati	on descril	bed in Sec	tion 170(l	o)(1)(A)(i	ii). (Attac	h Schedu	le H)	
4	Γ	A medical i	research organı	zatıon operated ın conjunctı	on with a l	hospital d	escribed ii	n Section	170(b)(1)	(A)(iii). E	nter the	
		hospital's r	name, city, and	state								
5	Γ	An organiza	atıon operated f	or the benefit of a college or	universit	y owned o	r operated	by a gove	ernmental	unıt desc	rıbed ın	
		Section 170	D(b)(1)(A)(iv).	(Complete Part II)								
6	Γ	A federal, s	tate, or local go	overnment or governmental	unıt descr	ıbed ın Se	ct ion 170	(b)(1)(A)	(v).			
7	<u>~</u>	An organiza	ation that norma	ally receives a substantial p	art of its s	support fro	m a gove	rnmental u	ınıt or fron	n the gene	eral publi	с
		described i	n Sect ion 170())(1)(A)(vi) (Complete Par	tII)							
8	Γ	A communi	ty trust describ	ed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)					
9	Γ	An organiza	ation that norma	ally receives (1) more than	331/3% 0	fits supp	ort from co	ontribution	ıs, membe	ership fees	s, and gro	ss
		receipts fro	m activities rel	ated to its exempt functions	s—s ubject	to certair	n exceptio	ns, and (2) no more	than 331/	′3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess sectio	on 511 ta:	x) from bu	sınesses	
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ction 509	(a)(4). (S	ee instruc	tions)	
11	Γ	-	-	and operated exclusively fo					,	•		
				orted organizations describe		٠,	` '	•	, , ,	Section 5	09(a)(3)	.Check
				type of supporting organiza Type II c			nes fre c nally Intec		'' d	□ Type	III - Ot	her
e	\vdash		• •	rtify that the organization is	′ '		, -	•				
	•	-		agers and other than one or						-		
_		section 50										
f		If the organ		d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r I ype III	supportir	ng organi:	zation,
g				as the organization accepted	d any gift	or contrib	utıon from	any of the	<u></u>			'
_		following pe	ersons?					·				
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes	No
				ng body of the the supported	_	tion?				11g	(i)	
		(ii) a family	/ member of a p	erson described in (i) above	?					11g((ii)	
		(iii) a 35%	controlled enti	ty of a person described in (i) or (ii) al	bove?				11g(iii)	
h		Provide the	following inform	nation about the organizatio	ns the org	janization	supports					
							1				T	
		ame of oorted	(ii) EIN	(iii) Type of organization (described on lines 1-9		s the ation in		ou notify inization		is the ation in	1	nount of port?
		nization		above or IRC section		listed in	_	i) of your		organized	Supp	,011.
(See Instructions)) your governing support? in the U.S.												
		document?										
					Yes	No	Yes	No	Yes	No		

Total

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box of	1 lille 3, 7, 01	o or Part 1.)				
	ıblic 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	5 242 542	5 222 225	7 520 060	0.454.670		7 777 040	25 425 446
	membership fees received (Do not	5,342,510	5,333,285	7,529,860	9,151,672		7,777,819	35,135,146
_	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 line 1-3	5,342,510	5,333,285	7,529,860	9,151,672		7,777,819	35,135,146
5	The portion of total contribution by each							
•	person (other than a government unit or							
	publicly supported organization) included							2,724,472
	on line 1 that exceed 2% of the amount							2,727,772
	shown on line 11, column							
	(f)							
6	Public Support subtract line 5 from line							32,410,674
	4							
	otal Support			Т				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	5,342,510	183,992	7,529,860	9,151,672		7,777,819	35,135,146
8	Gross income from interest, dividends,							
	payments received on securities loans,	266,519	183,992	210,167	305,672		486,206	1,452,556
	rents, royalties and income from similar							
_	sources Net income from unrelated business							
9	activities, whether or not the business is						7,737	7,737
	regularly carried on						,,,,,,	,,,,,,
10	Other income Do not include gain or loss							
	from the sale of capital assets (Explain in	98,345	72,291	15,235	10,817			196,688
	Part IV)							
11	Total Support (Add lines 7 through 10)							36,792,127
12	Gross receipts from related activities, etc	(See instruction	s)		•	12		97,764,886
13	First Five Years. If the Form 990 is for the	organization's fir	et second thir	d fourth or fifth	tay year as a 5	01(6)	.3.) 	
13	organization, check this box and stop here	organization s in	st, second, tilli	u, iouitii, oi iiitii	tax year as a s	01(0)		▶ ┌
	organization, check this box and stop here							- 1
C	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	olumn (f))		14		88.091 %
15	Public Support Percentage for 2007 Sched		•	. , ,				
						15		94.948 %
16a	33 1/3% Test - 2008. If the organization die				3 1/3% or more,	check	this box	E -
	and stop here. The organization qualifies as				15 - 22 4/20/			►V
D	33 1/3% Test - 2007. If the organization di				L5 IS 33 1/3% 0	r more	, cneck th	ıs ► □
172	box and stop here. The organization qualific 10% Facts and Circumstances Test - 2008.				3 162 or 16b s	and lin	o 14 ic 10	•
1/4	more, and if the organization meets the "fac	_						
	organization meets the "facts and circumst							». ►
ь	10% Facts and Circumstances Test - 2007.			•		_		•
_	more, and if the organization meets the "fac	_						
	the organization meets the "facts and circu							
18	Private Foundation. If the organization did							
	instructions							▶ ┌

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	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	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	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	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% 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 **33 1/3% 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

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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)

- ◆ 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 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ 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 ILB, Do not complete Part ILA

lf th		es," to Form 990, Part IV, Line 5 ((III)) Complete Part IPB Don	ot complete Part II-A
N a	ame of the organization E STUDENT CONSERVATION ASSOCIATE	·			tification number
Par		oy all organizations exemp		91-0880684 n 501(c) and section	527
1	Provide a description of the or	ganization's direct and indirect pol	ıtıcal campaıgn act	tivities in Part IV	
2	Political expenditures				\$
3	V olunteer hours				
Pai	rt I-B To be completed I for Schedule C for d	oy all organizations exemp etails.)	t under section	n 501(c)(3). (See the	instructions
1	Enter the amount of any excis	e tax incurred by the organization i	ınder section 4955	5	\$
2	Enter the amount of any excis	e tax incurred by organization mana	agers under sectio	n 4955	\$
3	If the organization incurred in	a section 4955 tax, did it file Form	4720 for this year	r?	┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
ь	If "Yes," describe in Part IV				
Pai		by all organizations exempts for Schedule C for details.)	t under section	n 501(c), except sect	ion 501(c)(3).
1	Enter the amount directly exp	ended by the filing organization for	section 527 exemp	pt function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contrib	outed to other orga	nizations for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add lin	es 1 and 2 and ent	ter here and on Form	\$
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes ┌ No
5	were made Enter the amount political contributions receive	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly deliver action committee (PAC) If addition	paid from the filing ed to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

	(election under sec	organizations exempt under section 501(tion 501(h)). (See the instructions for Schedul belongs to an affiliated group		768
	<u> </u>	checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000	The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (ente	r 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	m 4720 reporting	┌ Yes ┌ 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 1a through 1f 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							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
С	Total lobbying expenditures							
d	Grassroots non-taxable amount							
e	Grassroots ceiling amount (150% of line d, column (e))							
f	Grassroots lobbying expenditures							

Part II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form
	5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

		(a	1)	(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes		
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		9,065
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		No	
i	Other activities If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1:			9,065
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
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			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Dar	* TIT-A To be completed by all organizations exempt under section F01(c)(4) s	oction	E01/6	\/E\ or

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(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		

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b \$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
lobbying acitivites	·	lobbying activities are primarily limited to one staff person located in the Washington, D C office who spends time on meetings or calls with government officials

1 \$

Part IV Supplemental I	rt IV Supplemental Information						
Ident if ier	Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury

► Attach to Form 990. To be completed by organizations that

Supplemental Financial Statements

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer identification number Name of the organization THE STUDENT CONSERVATION ASSOCIATION INC 91-0880684 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 Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space 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 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? 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.

- 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

- \$

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

Revenues included in Form 990, Part VIII, line 1

- \$

b Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D

Schedule D (Form 990) 2008

Part		Organizations Maintaining Co	llections of Art,	His	<u>tori</u>	<u>cal Trea</u>	sures, or C)the	<u>r Similaı</u>	r Asse	ts (co	ntınued)
3		g the organization's accession and other s (check all that apply)	r records, check any	of th	e foll	owing that	are a signific	ant u	se of its co	ollection	1	
а	Γ	Public exhibition		d	\sqcap	Loan or e	xchange prog	rams				
b	Γ	Scholarly research		e	Γ	Other						
С	Γ	Preservation for future generations										
4	Prov Part	ide a description of the organization's co	ollections and explair	n how	v the y	further th	ne organizatior	n's ex	empt purp	ose in		
5		ng the year, did the organization solicit o its to be sold to raise funds rather than t							ular	Г	Yes	Г No
Par	t IV	Trust, Escrow and Custodial A Part IV, line 9, or reported an an						nsw	ered "Yes	s" to Fo	orm 99	90,
1a	included on Form 990, Part X?											
b	If"Y	es," explain why in Part XIV and comple	te the following table				-					
										A mou	ınt	
c	Begi	inning balance						1c				
d	Add	itions during the year						1d				
e	Dıst	ributions during the year						1e				
f	End	ing balance						1 f				
2a	Dıd t	he organization include an amount on Fo	orm 990, Part X, line	21?						Γ	Yes	┌ No
b	If "Y	es," explain the arrangement in Part XIV										
Pai	rt V	Endowment Funds. Complete										
4-	D		(a)Current Year 7,835,362	(b)) Prior	Year (c	:)Two Years Back	(d)	Three Years	Back (e)Four Ye	ears Back
1a L		nning of year balance	410,849									
b c		estment earnings or losses	127,726									
d		nts or scholarships	12.7,120									
e		er expenditures for facilities	230,086									
-		programs										
f	Adm	ninistrative expenses	16,297									
g	End	of year balance	8,127,554									
2	Prov	ide the estimated percentage of the yea	r end balance held as	;								
а	Boar	d designated or quasi-endowment 🕨	50 75 %									
b	Perm	nanent endowment 🕨 46 44 %										
c	Term	n endowment 🕨 281%										
3a		there endowment funds not in the posses	ssion of the organizat	ion t	hat a	re held an	ıd admınıstere	d for	the			
	-	nization by nrelated organizations								3a(i)	Yes	No No
		related organizations		•	•			•		3a(ii)		No
ь		es" to 3a(II), are the related organization			ched	ule R?	· . · . · . · .	٠.		3b		
4	Desc	cribe in Part XIV the intended uses of th	e organization's endo	wme	nt fu	nds						
Par	t VI	Investments—Land, Buildings	s, and Equipmen	t. S	ee F	orm 990,	, Part X, line	10.				
		Description of investment				Cost or othe s (investmer			(c) Depred	ciation	(d) Bo	ok value
1 a l	and						34	4,500				34,500
b E	Buildii	ngs					5,35	7,335	1,0	15,441		1,341,894
c l	ease	hold improvements										
d E	Equip	ment					4,424	4,035	3,1	61,005		1,263,030
e (Other											

uncertain tax positions under FIN 48

	I I	(c) Method of valuation
(a) Description of security or cateory (including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) >	
Part VIII Investments—Program Related	See Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
		_
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) F	
Part IX Other Assets. See Form 990, Part	•	
		(h) Book value
	scription	(b) Book value
BOND ISSUANCE COSTS	scription	96,248
	scription	
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS	scription	96,248
BOND ISSUANCE COSTS CHARITABLE REMAINDER TRUSTS		96,248
BOND ISSUANCE COSTS CHARITABLE REMAINDER TRUSTS	line 15.)	96,248
BOND ISSUANCE COSTS CHARITABLE REMAINDER TRUSTS Total. (Column (b) should equal Form 990, Part X, col.(B)	line 15.)	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P. (a) Description of Liability	line 15.)	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes	line 15.)	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P. (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST	line 15.)	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.)	96,248
BOND ISSUANCE COSTS CHARITABLE REMAINDER TRUSTS Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	line 15.) art X, line 25. (b) A mount 1,072,490 110,345	96,248
Total. (Column (b) should equal Form 990, Part X, col.(B) Part X Other Liabilities. See Form 990, P (a) Description of Liability Federal Income Taxes LIABILITY UNDER SPLIT-INTEREST CAPITAL LEASE OBLIGATION	Inne 15.) art X, line 25. (b) A mount 1,072,490 110,345 344,097	96,248

Par	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	29,916,293
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	32,586,453
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,670,160
4	Net unrealized gains (losses) on investments	4	-369,046
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	-369,046
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,039,206
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	29,530,950
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-369,046
3	Subtract line 2e from line 1	3	29,899,996
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 16,297		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	16,297
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	29,916,293
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	32,570,156
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Losses reported on Form 990, Part IX, line 25 2c		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	32,570,156
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 16,297		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	16,297
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	32,586,453

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
intended use of endowment funds		endowment funds are invested for the long term benefit OF THE ORGANIZATION INCOME DERIVED FROM THOSE FUNDS ARE TRANSFERRED TO OPERATIONS ON AN ANNUAL BASIS ACCORDING TO THE BOARD APPROVED SPENDING POLICY TO SUPPORT OPERATIONS AND/OR SPECIFIC PROGRAM OBJECTIVES
O ther Revenue	SCH D, Part XIV, Line 2d	Change in Value of Interest Rate Swap (148,925) Change in Actuarial Value of Split-Interest Agreements (77,368) (226,293)

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THE STUDENT CONSERVATION ASSOCIATION INC

Grants and Other Assistance to Organizations,

OMB No 1545-0047

2008

DLN: 93493218010090

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Governments and Individuals in the U.S.

Open to Public Inspect ion

Employer identification number

						91-0880684	
Part I General Infor	mation on Gra	nts and Assistance	e				
 Does the organization method the selection criteria use Describe in Part IV the organization 	ed to award the gra	nts or assistance?					F Yes □ I
Form 990, Part Part IV and Sch	IV, line 21 for a nedule I-1 if addi	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the of the first the office of the contract o	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	,	(h) Purpose of grant or assistance
2 Enter total number of seconganizations					•		
3 Enter total number of oth For Paperwork Reduction Act No			<u> </u>	Cat No 50055			hedule I (Form 990) 2008

Part III	Grants and Other Assista	nce to Individ	uals in the Uni	ted States.	Complete if the	organızatıon	answered	"Yes"	on Form 990,	Part IV,	line 22
	Use Schedule I-1 (Form 990) if additional si	ace is needed.								

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
STUDENT GRANTS AND AWARDS	2249	1,691,799			

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

See Additional Data Table

Ident if ier	Return Reference	Explanation
records to substantiate grants		PARTICIPANTS GO THROUGH AN APPLICATION AND SELECTION PROCESS WHERE ELIGIBILITY IS DETERMINED ON SCA AND PARTNER CRITERIA ALL APPLICATION AND ELIGIBILITY DOCUMENTS ARE MAINTAINED IN A PARTICIPANT FILE GRANT AND AWARD AMOUNTS ARE PAID OUT AND TRACKED THROUGH A THIRD PARTY PAY SYSTEM ACCORDING TO THE AGREEMENT BETWEEN SCA AND THE PARTNER

DLN: 93493218010090

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

2008

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Open to Public Inspection

Name of the organization

THE STUDENT CONSERVATION ASSOCIATION INC

Employer identification number

91-0880684

Pa	Tt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	First class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t		·			
	✓ Compensation committee	I⁻	Written employment contract			
	Independent compensation consultant	ᅜ	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	iqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-l	pased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"		,	7	Yes	
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		N o

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

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

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

(A) Name	(B) Breakdown	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
DALE PENNY (I	180,77	9 13,000	14,410 0	30,112 0	12,269 0	250,570 0	193,977 0
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanat ion
non-fixed compensation	sch j, part i, line 7	BONUS COMPENSATION FOR CEO IS DETERMINED ANNUALLY BASED ON EXCEEDING GOALS AGREED TO BETWEEN THE CHAIRMAN OF THE BOARD OF DIRECTORS AND THE CEO within sixty days of the end of each year of the contract BONUS IS APPROVED BY THE BOARD'S EXECUTIVE COMMITTEE
nonqualified retirement plan	sch J, part ı, lıne 4 b	Dale Penny earned \$43,000 from a deferred compensation plan for 9/30/09

Schedule J (Form 990) 2008

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DLN: 93493218010090

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Open to Public Inspect ion Employer identification number

	e of the organization	0.014.710.11.11.0								Employer	identifica	tion numl	er	
IHE	STUDENT CONSERVATION ASS	OCIATION INC								91-088	0684			
Pa	art I Bond Issues (Require	d for 2008)								'				
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	(f) Description of Purpose		(g) De	efeased	(h) O n Behalf of Issuer	
											Yes	No	Yes	No
A	NH Business Finance Authority	52-1304598	64468kbe5	10-22-	2007	2,6	500,000	building reno	uilding renovation/expansion			x		x
Pa	rt III Proceeds (Optional for	r 2008)		_		_								
1				-	A	<u> </u>	B	•	:		D	-	E	
2	Gross Proceeds in Reserve Fund	S												
3	Proceeds in Refunding or Defeas	ance Escrows											,	
4	Other Unspent Proceeds													
5 Issuance Costs from Proceeds														
6 Working Capital Expenditures from Proceeds														
7	Capital Expenditures from Proce	eds												
8	Year of Substantial Completion					•								
9	Were the bonds issued as part of	f a current refunding iss	sue?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	<u> </u>	No
10	Were the bonds issued as part of	fan advance refunding	ıs sue ?											
11	Has the final allocation of procee	ds been made?												
12	Does the organization maintain a final allocation of proceeds?	dequate books and rec	ords to support the											
Pai	rt IIII Private Business Use	(Optional for 2008)			_				Г				
				Yes	A No	Yes	B No	C			D N=	- Var	<u>E</u>	
1	Was the organization a partner in which owned property financed by		mber of an LLC,	res	NO	res	IAO	Yes	No	Yes	No	Yes		No
2	Are there any lease arrangement which may result in private busin	•	nanced property											
For I	Paperwork Reduction Act Notice, see t	he Instructions for Form	n 990.			Cat No 501	L93E			s	chedule K	(Form 99	0) 2008	į.

Schedule K	(Form 990) 20	800	
Part III	Private Bu	siness Use	(Continued)

		Α		E	3	С		D		I	E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?										
3b	Are there any research agreements with respect to the financed property which may result in private business use?										
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?										
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										
Pai	rt IV Arbitrage (Optional for 2008)										
		ı	Α	E	3	(<u>c</u>	D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?										
2	Is the bond issue a variable rate issue?										
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?										
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5											
	Were any gross proceeds invested beyond an available temporary period?										

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization THE STUDENT CONSERVATION ASSOCIATION INC 91-0880684 Part I Types of Property

		(a) Check ıf	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d Method of de reven	etermı	nıng	
		applicable		1 g				
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household							
6	goods							
_	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	4,630	174 437	cost or selling pric			
	Securities—Closely held stock .		4,030	174,437	cost of senting pric			
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other (describe)							
	Other (describe)							
	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement			ar for contributions for	29			0
			-			I	Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must			
	hold for at					, , , ,	'	
	least three years from the date of		contribution, and which is	not required to be used for a	exempt purposes			
	for the entire holding period? .					30a		No
ь	If "Yes", describe the arrangeme	ent in Part I	Ι					
31	Does the organization have a gif		. ,	•		31	Yes	
32a	Does the organization hire or use contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
ь	If "Yes", describe in Part II							
	If the organization did not report	revenuesı	n Column (c) for a type of p	roperty for which Column (a	a) is			
	checked, describe in Part II			•				
For P	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990	Cat No 512271	Schedule	M (For	m 990	2008

Page 2 Schedule M (Form 990) 2008 Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. ReturnReference Identifier Explanation Sch M, line 32a The Association retains a broker (WELLS FARGO) to whom it Sales of noncash investments sends all donated stock. The broker sells the stock as of the date received and remits all proceeds (net of any fees) directly to SCA

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE 0

(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.

Name of the organization
THE STUDENT CONSERVATION ASSOCIATION INC

Employer identification number

91-0880684

ldentifier	Return Reference	Explanation
review of form 990 prior to filing	i nart vi lina illi	COPIES OF FORM 990 ARE PROVIDED TO ALL VOTING MEMBERS OF THE BOARD, AND THE REVIEW IS CONDUCTED BY THE CFO, CONTROLLER, AND GENERAL COUNSEL PRIOR TO FILING

ldentifier	Return Reference	Explanation
conflict of interest policy	part vı, line 12c	ALL OFFICERS, DIRECTORS AND MANAGEMENT STAFF ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT ANNUALLY THE CEO REVIEWS ALL EMPLOYEE STATEMENTS, THE BOARD CHAIRMAN REVIEWS THOSE FOR THE DIRECTORS

ldentifier	Return Reference	Explanation							
compensation determination	part vı, line 15b	FOR CEO, VP OF HUMAN RESOURCES COMPILES DATA AND INFORMATION FROM INDEPENDENT PERSONS AND COMPARABILITY DATA RESULTS ARE FORWARDED TO COUNSEL FOR REVIEW COUNSEL RECOMMENDS COMPENSATION TO EXECUTIVE COMMITTEE of BOARD, WHICH THEN DECIDES AND APPROVES COMPENSATION AMOUNT THIS IS DONE ANNUALLY AND RECORDED IN THE MINUTES ALL OTHER OFFICER OR KEY EMPLOYEE COMPENSATION IS REVIEWED ANNUALLY BY THE VP OF HR AND APPROVED BY THE CEO							

	ldentifier	Return Reference	Explanation							
- 1	public disclosure	part vı, line 19	The organization's financial statements, governing documents and conflict of interest policy are available upon request							

Identifier	Return Reference	Explanation
other program services	Part III, line 4d	National High School Crew's 6-8 high school aged students under the leadership of SCA hired and trained leaders performing trail construction and rehabilitation projects on public lands. In fiscal year 2009 approximately 120 crew's with total members of 650 were fielded. Also includes specific multi-year recovery programs in Mt Rainier and Delaw are Water Gap, both programs were concluded during the fiscal year. Expenses \$3,370,989 Grants. none Revenues \$3,090,042

ldentifier	Return Reference	Explanation
2005 and 2006 forms 990 not yet amended as reported on 2008 form 990	Schedule J	The 2007 Form 990 included a disclosure that the 2005 and 2006 Forms 990 for fiscal years ended 9/30/06 and 9/30/07 were being amended to include the president's nonqualified deferred compensation amounts earned but not vested, in the amounts of \$17,200 and \$15,288 respectively. The amendments have not yet been made. It was also disclosed on the 2007 Form 990, that the president's nonqualified deferred compensation that vested in 2002 and prior would be paid during calendar year 2009 and that this amount would be reported on the 2009 Form 990 for fiscal year ending on 9/30/2010. Additionally, it was disclosed that this would be reported on a 2009 W-2 in accordance with the duty of consistency doctrine, as it had not previously been reported on a form w-2. This payment was not made in 2009, but is expected to occur in 2010.

ldentifier	Return Reference	Explanation
NUMBER OF VOTING BOARD MEMBERS	PART I, LINE 3	The number of voting Board members as listed on Schedule J-2 (34) differs from the number on page 1, line 3 (28) due to six directors who completed their terms during the tax year. Those members are as follows 1) William Coleman 2) Patricia Elias 3) Miranda Henning 4) Fred Prescott 5) Gene Reineke 6) Richard Resch

Software ID: Software Version:

EIN: 91-0880684

Name: THE STUDENT CONSERVATION ASSOCIATION INC

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa										
		Posit t	(C tion (hat a	chec		I		(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			Estimated amount of other compensation from the organization and related organizations
ROBERT ALDAG III , DIRECTOR	1 0	X						0	0	0
PATRICIA BACON, DIRECTOR	1 0	X						0	0	
MELANIE BELLER , DIRECTOR	1 0	Х						0		
THOMAS C COLLIER JR , DIRECTOR	1 0	Х						0		
JOAN COUSAR , DIRECTOR	1 0	X						0		
CLYDIA J CUYKENDALL , DIRECTOR	1 0	Х						0		
CHARLES D DICKEY III , DIRECTOR	1 0	X						0		
DAYTON R DUNCAN , DIRECTOR	1 0	X						0		
DEAN W FISCHER , DIRECTOR	1 0	Х						0		
DAVID D FITCH , DIRECTOR	1 0	Х						0		
FRASER BREWER GILBANE , DIRECTOR	1 0	×						0		
JANE O GOEDECKE , DIRECTOR	1 0	X						0		
CHARLES GREGG , DIRECTOR	1 0	X						0		
PETER HAYES , DIRECTOR	1 0	Х						0		
ALAN R JONES , DIRECTOR	1 0	X						0		
JAMES D MADDY , DIRECTOR	1 0	X						0		
PATRICIA MERRITT , DIRECTOR	1 0	Х						0		
JOAN B MURPHY , DIRECTOR	1 0	Х						0		
REGINALD C SHIVERICK , DIRECTOR	1 0	Х						0		
JOSHUA C STEARNS , DIRECTOR	1 0	Х						0		
CHRISTINA WONG , DIRECTOR	1 0	X						0		
EDMUND BARTLETT , DIRECTOR	1 0	Х						0		
CHARLES HARVEY , DIRECTOR	1 0	Х						0		
SHANNON QUIST , DIRECTOR	1 0	Х						0		
STEVEN T SEWARD , DIRECTOR	1 0	X						0		
THOMAS B SHEPARD , DIRECTOR	1 0	X						0		
LESLIE TURNER , DIRECTOR	1 0	Х						0		
ROB WALLACE, DIRECTOR	1 0	Х						0		
William coleman , director	1 0	Х						0		
patricia elias , director	1 0	Х						0		

Form 990, Part VII - Section Aaa

·										
(A) Name and Title	(B) Average hours per week	stan				Highest compens employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
mıranda hennıng , dırector	1 0	Х						0		
fred prescott , director	1 0	Х						0		
gene reineke , director	1 0	Х						0		
rıchard resch , dırector	1 0	Х						0	0	0
DALE PENNY , PRESIDENT AND CEO	40 0			Х				208,189	0	42,381
MARK BODIN , COO	40 0			Х				128,516	0	15,902
VALERIE BAILEY , EXECUTIVE VP	40 0			Х				108,049	0	9,315
RICHARD SEAMAN , CFO	40 0			Х				113,454	0	15,488
SCOTT WEAVER , SENIOR VP	40 0			Х				109,512	0	15,021
ROBERT HOLLEY , VP FOR ADVANCEMENT	40 0					Х		112,000		5,636
REGINALD HAGOOD , SENIOR VP STRATEGIC INITIATIVE	40 0					Х		104,950		36