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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

7	A F	or the	e 2009 calendar year, or tax year beginning and er	nding		
E	B CI	heck if	Please use IRS C Name of organization		D Employer identific	ation number
		Addre chang	ss label or http://www.alaesa			
		Name chang	type		20-07	778121
		Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Ro	loom/suite	E Telephone number	
		Termi		50	(719)	577-7417
		Amen return	ded tions City or town, state or country, and ZIP + 4		G Gross receipts \$	570,471.
		Application	Colorado Springs, CO 80906		H(a) Is this a group ret	
		pendi	F Name and address of principal officer:Donald E. Addy		for affiliates?	Yes X No
_			same as C above		H(b) Are all affiliates incli	uded? Yes No
_	I T	ax-ex	empt status: X 501(c) (3) ◀ (insert no.)			ist. (see instructions)
			te: ▶ www.nhdf.org		H(c) Group exemption	
		_	forganization: X Corporation Trust Association Other	L Year o	of formation: 2004 M	State of legal domicile: CO
L	Pa	rt I	Summary			
	ø	1	Briefly describe the organization's mission or most significant activities: $\underline{\text{The}}$ $\underline{\text{Nation}}$			
	anc		Foundation's mission is to foster, develop	p and	promote amo	ong the
0	i i	2	Check this box f the organization discontinued its operations or disposed	ed of more	than 25% of its net ass	
2010	Governance	3	Number of voting members of the governing body (Part VI, line 1a)		3	7
0 2	8 G	4	Number of independent voting members of the governing body (Part VI, line 1b)		. 4	6
₩ ₩	Activities &	5	Total number of employees (Part V, line 2a)		5	3
(J	<u>x</u>	6	Total number of volunteers (estimate if necessary)		6	164
AUG	Act	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12		. 7a	0.
_		b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
SCANNED			RECEIVED		Prior Year	Current Year
Ž	ā	8	Contributions and grants (Part VIII, line 1h)	.	433,644.	274,326.
2	e	9	Program service revenue (Part VIII, line 2g)		394,734.	283,045.
င်	Revenue		. I OCT		11,557.	12,571.
S	-		Other revenue (Part VIII, column (A), lines 5, 6b, 8c, 9c, 10c, and 11e)			
_	_		Total revenue - add lines 8 through 11 (must equal Part VIII of With (A) line 12)		839,935.	569,942.
		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		240,276.	20,000.
		14	Benefits paid to or for members (Part IX, column (A), line 4)			101 500
	es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		118,882.	131,609.
	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	_		
	χ̈́		Total fundraising expenses (Part IX, column (D), line 25)	<u>8. </u>		2-4 400
	"		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	ļ	529,755.	351,480.
	-	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	ļ	888,913.	503,089.
-		19	Revenue less expenses. Subtract line 18 from line 12		<48,978.	66,853.
i	S or			Beg	inning of Current Year	End of Year
1	Sser		Total assets (Part X, line 16)		684,019.	735,767.
4	Net Assets or Fund Balances		Total liabilities (Part X, line 26)	.	29,846.	14,741.
		22	Net assets or fund balances. Subtract line 21 from line 20		654,173.	721,026.
L	Pa	rt II	Signature Block			holief it in true correct
			Under senalties of perjury, I declare that I have examined this return, including accompanying schedules and sand complete. Disclaration of preparer (other than officer) is based on all information of which preparer has any	statements, a y knowledge	nd to the best of my knowledge	B BNO Dellet, It IS true, correct,
			Mr. on & /1 de		10.0.1	5 xx10
	Sign		Sign wife of officer		Date	
ı	Here	Э			<i>/"</i> " ()	•
			Donald E. Addy, President			
-	—		A. Date	l Che	ck if Preparer	's identifying number
ı	Paid		Preparer S 7100 to 17/100	l self-	(see inst	ructions)
ı	Prep	arer's		O եւսե	ployed	P00294662
(Use (Only	Firm's name (or yours if self-employed). 630 Southpointe Court, Suite 200		EIN ► 84-0)884 <u>124</u>
					Dhana na 🕨 71	9.579.9090
-		4501	ZIP+4 Colorado Springs, CO 80906		Phone no. ► 71	. X Yes No
_			RS discuss this return with the preparer shown above? (see instructions)	to inch		Form 990 (2009)
,	∌320U	01 02-0 C	D4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the sepa See Schedule O for Organization Mission Sta	arate insu	ructions.	
		٥	ee Schedule O lot Organization Mission Sch	a ceme.	iic Concinuac	.104

Form 990 (2009) National Homeland Defense Foundation Part IV Checklist of Required Schedules

1 is the organization described in section 501(s)(3) or 4947(s)(1) (other than a private foundation)? 1 if Yes, "complete Schedule A 2 is the organization required to complete Schedule B, Schedule G, Centributions? 3 Did the organization engage in direct or indered political campaign activities on behalf of or in opposition to candidates for public office? if "Yes," complete Schedule C, Part II 5 Section 501(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? if "Yes," complete Schedule C, Part II 5 Section 501(c)(3) organizations. Did the organizations behalf of or in opposition to candidates for public office? if "Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(6), 401(c)(6), 4				Yes	No	
2 Is the organization required to complete Schedule B, Schedule of Confibitutions? 3 Did the organization required in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations is the organization subject to the section 603(s)(e)), and 501(c)(6) organization is the organization subject to the section 603(s)(e), and 501(c)(6), and 501(c)(6), and 501(c)(6) organizations is the organization subject to the section 603(s)(e), and the organization and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization reverse or hold a consensuation for accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 5 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts to listed in Part X; or provide credit counseling, dobt management, credit repair, or eight negotiation services? If "Yes," complete Schedule D, Part II 6 Did the organization report an amount for land, buildings, and equipment in Part X, line 10; if "Yes," complete Schedule D, Part IV, IVI, VIII, IX, or X as applicable 6 Did the organization report an amount for investments - program related in Part X, line 10; if "Yes," complete Schedule D, Part IV, IVII, IVI, IVI, IVI, IVI, IVI, IVI	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?				
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 II 5 Section 601(c)(4), S01(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(s) notice and reporting requirement and proxy tax? II "Yes," complete Schedule C, Part II 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts III "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? II "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical tressures, or other similar assets? If "Yes," complete Schedule D, Part IV 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? III "Yes," complete Schedule D, Part IV 11 Is the organization report an amount for land, buildings, and equipment in Part X, line 10? III "Yes," complete Schedule D, Part XI. 11 Did the organization report an amount for investments - other securities in Part X, line 10? III "Yes," complete Schedule D, Part XI. 12 Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? II "Yes," complete Schedule D, Part XI. 13 Did the organization report an amount for other assets in Part X, line 19? II "Yes," complete Schedule D, Part X. 14 Did the organization report an amount for investments - program related i		If "Yes," complete Schedule A	1	X		
public office? If "res," complete Schedule C, Part II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "res," complete Schedule C, Part II 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 "res," complete Schedule C, Part III Did the organization near any donor adversation easement, including easements to preserve open space, the environment, historic land areas, or instone structures? If "res," complete Schedule D, Part II Did the organization report an amount in Part X, ine 21; serve as a custodian for amounts on tisted in Part X; or provide adviced currently in the part X in the 21; serve as a custodian for amounts on tisted in Part X; or provide credit courseling, doth management, credit repair, or doth negotiation services? If "res," complete Schedule D, Part III Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "res," complete Schedule D, Part IV It is the organization report an amount for lind part X, inc. 21; serve as a custodian for amounts not listed in Part X, inc provide credit courseling, doth management, credit repair, or doth negotiation services? If "res," complete Schedule D, Part IV II be the organization report an amount for investments - togram related in Part X, line 10? If "yes," complete Schedule D, Part IV, III, IV, K, or X as applicable Did the organization report an amount for investments - program related in Part X, line 10? If "yes," complete Schedule D, Part X, III Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part X, III Did the organization orbid an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part X, III Did	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X		
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 603(6) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or inston structures? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 1 Is the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 1 Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV 2 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part X, II 2 Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, II 3 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, II 3 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, II 4 Did the organization in eport on Part IX, column (A), line 3, more t	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for				
5 Section 501e(16), 501e(16), and 501e(16) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit consessing, debt management, credit expair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," organizet Schedule D, Part IV III IX Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII IX IX Is the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII IX IX Is the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII IX IX III IX IX III IX IX IX IX IX I		public office? If "Yes," complete Schedule C, Part I	3		_X	
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provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide rectif counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-hendiu D, Part IV II Is the organization report any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. • Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. • Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. • Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part X. • Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part X. • Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part X. • Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part X. • Did the organization ore and the organization report and part		reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5			
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the environment, historic land areas, or histonic structures? If "Yes," complete Schedule D, Part III 5. A with the organization maintain collections of works of art, historical freasures, or other similar assets? If "Yes," complete Schedule D, Part III 9. Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part IV 9. Did the organization, directly or through a related organization services? If "Yes," complete Schedule D, Part V 10. Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, VX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization or port an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization is liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. Did the organization as eparate, independent audited financial statements for the tax year? If "Yes," complete Schedule E, Ala Did the organization have aggregate revenues or expenses of more than \$10,000 form grantmaking, fundraising, business, and program		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X	
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Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V III X Is the organization answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization option an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization option an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization option assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. Did the organization option an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization option assets in the part X in the part X in the X year? If "Yes," complete Schedule D, Part X, IX, IX, and XIII is optional Is the organization option option an amount for optional addition financial statements for the tax year? If "Yes," completing Schedule D, Part XI, XII, and XIII is		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	_7_		X	
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12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. 12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 17 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 18 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 Bid the organization operate one or more hospitals? If "Yes," complete Schedule H	•	•				
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If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization operate one or more hospitals? If "Yes," complete Schedule H			12			
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13	12A			ĺ		
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or entity located outside the United States? If "Yes," complete Schedule F, Part II	45		1410			
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	15		45		Y	
located outside the United States? If "Yes," complete Schedule F, Part III	40		15			
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	10		40		v	
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Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	17		47		Y	
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complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	10		10		- 41	
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	13	Consider Cohendate O. Donatti	10		x	
	20					
				990 c		

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23		x
24:	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			 -
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	-		
	Schedule K. If "No", go to line 25	24a		\mathbf{x}
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	 ^
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		_
•	any tax-exempt bonds?	04-		
		24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		├─
258	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		X
ľ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	_	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		ļ	
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
á	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
•	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1 1		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		Х
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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x _
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

Form **990** (2009)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O.

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns, Enter -0- if not applicable 1a 0 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .. . 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? X За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services X provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009) National Homeland Defense Foundation 20-0778121 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body . 1a	<u>7</u>		1				
b	Enter the number of voting members that are independent	<u>6</u>		1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2		X				
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision		l	i				
	of officers, directors or trustees, or key employees to a management company or other person?	3		X				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	<u> </u>	_X_				
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X				
6	Does the organization have members or stockholders?	6		X				
7a								
	governing body?	7a		X				
b		7b	ļ	Х				
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year								
	by the following:		x					
а								
b Each committee with authority to act on behalf of the governing body?								
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
0	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		T.,	Γ				
40-	December and a large trade to the state of t	40.	Yes	No				
_	Does the organization have local chapters, branches, or affiliates?	10a	-	X				
b		10ь						
44	and branches to ensure their operations are consistent with those of the organization?							
11								
11A								
12a	2a Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>							
U	to conflicts?	12b	x					
^		120		<u> </u>				
С	In Schedule O how this is done	12c	x					
13	Does the organization have a written whistleblower policy?	13	X					
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>				
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	x					
b	Other officers or key employees of the organization	15b		X				
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	1						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a	ļ	х				
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	1						
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶CO							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		_				
	public inspection. Indicate how you make these available. Check all that apply							
	Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ncial					
	statements available to the public.							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation: 🕨	-					
	<u>The Organization - (719) 577-7417</u>							
	1259 Lake Plaza Drive. No. 250. Colorado Springs. CO 80906							

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
William H. Temby		x						0.	0.	•
<u>Director</u> Congressman Jim Turner		^				├	├	0.	<u> </u>	0.
Director		x						0.	0.	0.
Dr. Pamela Shockley-Zala		Λ			├	\vdash	├		<u></u>	
Director		x				1		0.	0.	0.
Jerry Buckwalter		22			\vdash			•	0.	
Director	•	x						0.	0.	0.
General Ralph E. Eberhar										
Chairman				x	•			0.	0.	0.
William J. Hybl, Jr.										
Vice Chairman and Treasu				X				0.	0.	0.
Donald E. Addy										
President	40.00			X		X		90,000.	0.	0.
Kyle Hybl										
General Counsel				X		<u>l</u> .		0.	0.	0.
					i					
										_

\$100,000 in compensation from the organization

Form 990 (2009)

	rt V	National Home	erand Der	ense round	ation	20-0776	IZI Page 9
ra	IL V	iii Statement of Nevenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-11 \$	274,326.				
<u>8</u> €		Total. Add lines 1a-1f		274,326.			
ľ		Annual Symposium Reven	Business Code 611430	283,045.	283,045.		
Program Service Revenue		d					
4	1	All other program service revenue					
		Total. Add lines 2a-2f	•	283,045.			
	3	Investment income (including dividends, inter other similar amounts) Income from investment of tax-exempt bond	▶	13,100.			13,100.
	5	Royalties .	•				
		(i) Real a Gross Rents Less. rental expenses Rental income or (loss)	(ii) Personal				
ŀ		Net rental income or (loss)	•			·	
	-	a Gross amount from sales of (i) Securities assets other than inventory	(ii) Other				
	•	and sales expenses Gain or (loss)	529. <529.				500
		d Net gain or (loss)	•	<529.	>		<529.
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
8		Less: direct expenses	·				
	9	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses	·				•
		Net income or (loss) from gaming activities Gross sales of inventory, less returns					
		Net income or (loss) from sales of inventory	•				
		Miscellaneous Revenue	Business Code				
	11 :	3 3					<u> </u>
		·					
		All other revenue					
	,	Total. Add lines 11a-11d	. •				
	12	Total revenue. See instructions.		569,942.	283,045.	0.	
93200 02-04	9 -10					-	Form 990 (2009)

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

	All other organizations must compl				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	20,000.	20,000.		<u></u>
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			· · · · · · · · · · · · · · · · · · ·	····
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.			į	
	See Part IV, lines 15 and 16	_			
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	00 000	54 500	12 500	1 000
	trustees, and key employees	90,000.	74,700.	13,500.	1,800.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	22 245	11 700	21 565	
7	Other salaries and wages	33,345.	11,780.	21,565.	
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits	8,264.	6,616.	1,510.	138.
10	Payroll taxes	0,204.	0,010.	1,510.	130.
11	Fees for services (non-employees):				
a	Management	95.	95.		-
b	Legal	10,953.	33.	10,953.	
9	Accounting Lobbying	10,933.		10,933.	
d	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
_	Other				
g 12	Advertising and promotion	29,917.	29,917.		
13	Office expenses	2,347.	20,02,0	2,347.	
14	Information technology	2,31,1		2/3476	
15	Royalties				
16	Occupancy				
17	Travel	5,852.		5,852.	-
18	Payments of travel or entertainment expenses	J / J J J J			-
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,321.	-	5,321.	
23	Insurance	3,949.	1,358.	2,591.	
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	Symposium Event Expense	239,983.	239,983.		
b	Miscellaneous	25,815.	21,440.	4,375.	
С	Printing	9,411.	6,848.	2,563.	
d	MFAP Direct Assistance	6,595.	6,595.		
е	Telephone	3,376.		3,376.	
f	All other expenses	7,866.	2,761.	5,075.	30.
25	Total functional expenses. Add lines 1 through 24f	503,089.	422,093.	79,028.	1,968.
26	Joint costs. Check here 🕨 🗶 If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					F 000 (0000

Part X (A) Beginning of year (B) End of year 224,879. 378,704. 1 Cash - non-interest-bearing 1 271,755. 472,410. 2 2 Savings and temporary cash investments Pledges and grants receivable, net 18,220. 3 18,220. 3 1,600. 10,510. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 7 Notes and loans receivable, net Inventories for sale or use ... 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 26,756. basis. Complete Part VI of Schedule D 17,008. 10b 13,740. 10c 9,748. b Less accumulated depreciation Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 684,019. 735,767. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 14,276. 6,648. 17 17 Accounts payable and accrued expenses 18 Grants payable 18 5,070. 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 10,500. 8,093. Other liabilities Complete Part X of Schedule D 25 25 14,741. 29,846. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 342,574. 27 401,600. 27 Unrestricted net assets 311,599. 319,426. 28 Temporanly restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 654,173. 721,026. 33 33 Total net assets or fund balances 735,767. Total liabilities and net assets/fund balances 684,019

Form **990** (2009)

Form	990 (2009)	<u>National</u>	Homeland Defense Foundat	ion 20-077812	1 P	age 12
Pai	t XI Fina	ncial Statements and F	porting	-		
					Yes	No
1	Accounting	method used to prepare the F	m 990: Cash X Accrual Oth	er		
	If the organiz	zation changed its method of a	counting from a prior year or checked "Other," e	xplain in Schedule O.		
2a	Were the org	janization's financial statemen	compiled or reviewed by an independent accou	intant?	a	x
b	Were the org	janization's financial statemen	audited by an independent accountant?		ьХ	
c	If "Yes" to lir	ie 2a or 2b, does the organiza	on have a committee that assumes responsibility	for oversight of the audit,		
	review, or co	mpilation of its financial state	ents and selection of an independent accountant	t?	c X	
	If the organization	ation changed either its overs	ht process or selection process during the tax ye	ear, explain in Schedule O.		
d	If "Yes" to lir	ie 2a or 2b, check a box belov	to indicate whether the financial statements for t	he year were issued on a		
	consolidated	basis, sepa <u>rate</u> basis, or both				
	X Separa	ate basis Consolidate	basis	asis		
За	As a result o	f a federal award, was the org	nzation required to undergo an audit or audits as	set forth in the Single Audit		
	Act and OM	3 Circular A-133?		<u>.</u>	a	X
b	If "Yes," did	the organization undergo the i	quired audit or audits? If the organization did not	undergo the required audit		
	or audits, ex	plain why in Schedule O and c	scribe any steps taken to undergo such audits.	, 3	ь <u></u>	

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

National Homeland Defense Foundation 20-0778121

Pa	rt I	Reason	for Public Char	ity Status (All organi	zations mu	st comple	te this par	t.) See ins	tructions.				
The	organ	zation is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)	_	_			
1		A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)).				
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach So	hedule E.)								
3				tal service organization			170(b)(1)	(A)(iii).					
4		A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed ın se	ection 170	(b)(1)(A)(i	ii). Enter tl	he hospital	's name	∍,
		city, and stat	te:										
5		An organizati	ion operated for the	benefit of a college or u	niversity o	wned or o	perated by	a govern	mental un	nt describe	ed in		_
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		A federal, sta	ite, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7	\mathbf{x}	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	or from the	general p	oublic desc	ribed ır	1
	-	•	(b)(1)(A)(vi). (Comple	· · · · · · · · · · · · · · · · · · ·			J						
8				ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	\Box			eives: (1) more than 33			rom contri	butions, n	nembersh	p fees. an	d aross red	ceipts f	rom
_				nctions - subject to certa									
				axable income (less sec									
			509(a)(2). (Complete	•		,		•	,				
10				perated exclusively to te	st for publ	ıc safetv. S	See sectio	n 509(a)(4	4),				
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or												
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that												
		• •	• • • •	organization and compl		•		•	•				
	a Type I b Type II c Type III - Functionally integrated d Type III - Other												
е				it the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified p	ersons oth	er than	1
		foundation m	nanagers and other t	han one or more publicl	y supporte	d organiza	ations desi	cribed in s	ection 50	9(a)(1) or s	ection 509	(a)(2).	
f			_	ten determination from		-						,	
		_	rganization, check th			•		. ,.					
g			-	organization accepted ar	nv aift or c	ontribution	from any	of the follo	owina per	sons?	•		
Ū		-		rectly controls, either a			•					Yes	No
				upported organization?	•		•		• • • • • • • • • • • • • • • • • • • •	. , .	11g(i)		
				n described in (i) above?	•		•	•		•	11g(ii)		
		• •	•	person described in (i)		 ∍?	• •	• •	••	•••	11g(iii)		
h			· · · · · · · · · · · · · · · · · · ·	about the supported or			• ••	••	• •	• • • • •			
					J	` '							
/i\	Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	organization	(v) Did voi	u notify the	(vi) ls	the	/vii\ Am	ount of	
117		inization	(11) 2.11	organization		sted in your		ion ın col.	organizatı (i) organiz	ed in the l	sup		
	0-			(described on lines 1-9 above or IRC section	governing	document?	(i) of your	r support?	Ü.S	.7			
				(see instructions))	Yes	No	Yes	No	Yes	No			
					ì								
						-							
						<u> </u>		<u> </u>					
				_									
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			I .	i	1	I	I	I	I	1			

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 National Homeland Defense Foundation Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2005 (e) 2009 Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 503,463. 400,952. 433,644. 274,326. include any "unusual grants.") 297,372. 1909757. 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 297.372. 503,463. 400,952. 433,644. 274.326. 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 1026563. 883,194. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006(c) 2007(d) 2008 (e) 2009 (f) Total 297,372. 503,463. 400,952. 433,644. 274,326. 1909757. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 17,589. 25,205. 24,182. 11,557. 13,100. 91,633. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 3,424 <529. 2.895. assets (Explain in Part IV.) 2004285. 11 Total support. Add lines 7 through 10 2,234,668. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 44.07 % 39.78 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

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

Schedule A (Form 990 or 990-EZ) 2009

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 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 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006(d) 2008 (e) 2009 (c) 2007 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f) 17 % 18 18 Investment income percentage from 2008 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

National Homeland Defense Foundation

Employer identification number

20-0778121 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 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring 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 important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 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 Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c 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 the tax 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? . In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Assets included in Form 990, Part X

		1 Homeland					-0778121	
	t III Organizations Maintaining C							
3	Using the organization's acquisition, access	ion, and other record	ls, check any of t	he following tha	t are a sıgı	nificant use	of its collection	rtems
	(check all that apply).							
а	Public exhibition	d		exchange progra				
b	Scholarly research	е	Other				<u> </u>	
C	Preservation for future generations							
4	Provide a description of the organization's c	ollections and explai	n how they furthe	er the organization	on's exem _l	pt purpose i	n Part XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, historical t	reasures, or othe	er sımılar a	ssets		
	to be sold to raise funds rather than to be m						Yes	No_
Pa	t IV Escrow and Custodial Arran	gements. Comple	ete if organizatior	answered "Yes	" to Form	990, Part IV	, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.						
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribut	tions or other as	sets not in	cluded		
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:					
		•	J				Amount	
С	Beginning balance					1c		
d	Additions during the year	• • • • • • • • • • • • • • • • • • • •	•	• • •	•	1d		
_	Distributions during the year				•	T . 1	·	
e	Fadina balanca					1e		
f				• • • •		1f		
	Did the organization include an amount on F		217	•			L Yes	∐ No
_	If "Yes," explain the arrangement in Part XIV			F 000 P1	N/ b 40			
Pai	t V Endowment Funds. Complete			1				
		(a) Current year	(b) Prior year	(c) Two year	s dack (d) Three years	back (e) Four y	ears back
1a	Beginning of year balance			 				
þ	Contributions							
C	Net investment earnings, gains, and losses							
d	Grants or scholarships		-:					
е	Other expenditures for facilities				[
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year	r end balance held a	ıs:					
а	Board designated or quasi-endowment		%					
ь	Permanent endowment	%	_					
С	Term endowment	 %						
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held	d and administer	red for the	organizatio	n	
-	by:					g		'es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations	• ••	• •• •				3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	 n lieted an required o	 n Sahadula D2	••	•		3b	
		· · · · · · · · · · · · · · · · · · ·			÷		. 30	
Pai	Tescribe in Part XIV the intended uses of the VI Investments - Land, Building			On Part V line 1	n			
, a							(n D 1	
	Description of investment	(a) Cost or o	1 ' '	ost or other		umulated	(d) Book	value
	 	basis (investri	Das	sis (other)	depre	ciation	+	
1a	Land						+	
b	Buildings				_			
C	Leasehold improvements	·						
d	Equipment	. 26,	756.		1	.7 <u>,008</u> .	. 9	<u>,748.</u>
_е	Other						<u> </u>	
Total	. Add lines 1a through 1e. (Column (d) must e	aual Form 990. Part	X. column (B), lin	e 10(c).)		•	9	,748.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 National Ho	meland	Defense	<u>Foundati</u>	on 20	-0778121	Page 3
Part VII Investments - Other Securities. Se	e Form 990, I	Part X, line 12.		<u> </u>		
(a) Description of security or category (including name of security)	(b) Boo	k value	Cos	(c) Method of valua st or end-of-year mar		
Financial derivatives						
Closely-held equity interests					<u> </u>	
Other	<u> </u>					
						
	 	-				
	 -					
						
	<u> </u>			-		
	-					
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)						
Part VIII Investments - Program Related. S	See Fo <u>rm</u> 990,	Part X, line 13.				
(a) Description of investment type	(b) Boo	k value	_	(c) Method of valua		
	(5, 500		Cos	st or end-of-year man	ket value	
	 					
					<u> </u>	
				· · · · · ·		
		·				
					-	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)						
Part IX Other Assets. See Form 990, Part X, line						
(a)	Description				(b) Book va	lue
						
	.,					
· · · · · · · · · · · · · · · · · · ·						
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)			▶		
Part X Other Liabilities. See Form 990, Part X,	line 25.	- , - , - , - , - , - , - , - , - , - ,	<u> </u>			
1. (a) Description of liability			(b) Amount			
Federal income taxes			0 003			
Pledges Payable			8,093.			
		-				
		·				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25) .	>	8,093.			···-
2. FIN 48 Footnote. In Part XIV, provide the text of the foo	tnote to the o	rganization's fi	inancial statements	that reports the orga	anızatıon's lıabilıt	y for

	dule D (Form 990) 2009 National Homeland Defense Foundation		<u> 20-07:</u>	78121 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	cial Stat	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		569,942.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		503,089.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		66,853.
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Pnor period adjustments	7		
8	Other (Describe in Part XIV.)	8		
9	Total adjustments (net). Add lines 4 through 8	9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		66,853.
	t XII Reconciliation of Revenue per Audited Financial Statements With Rever		Return	00,033.
1	Total revenue, gains, and other support per audited financial statements		1	597,272.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			331,2121
	Not unrealized some on investments			
a		7,330	-	
b		1,330	' -	
c	Recoveries of prior year grants		-	
d	Other (Describe in Part XIV.)		┥_ ┃	27 220
е	Add lines 2a through 2d		2e	<u>27,330.</u>
3	Subtract line 2e from line 1		3	569,942.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b		4	
b	Other (Describe in Part XIV.)		4	
С	Add lines 4a and 4b	-	4c	<u> </u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	569,942.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses pe	r Return	
1	Total expenses and losses per audited financial statements		1	530,419.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities . 2a 2	<u>7,330</u> .	<u>.</u>]	
b	Prior year adjustments 2b		_	
С	Other losses		_	
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d		2e	27,330.
3	Subtract line 2e from line 1		3	503,089.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	·		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV.)		1	
-	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	•••	5	503,089.
	rt XIV Supplemental Information		1 3 1	203,003.
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pare 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide the second			

Employer identification number (h) Purpose of grant Award to competition or assistance Yes Program Support recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any winners Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, o. (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. 10,000, 10,000, (d) Amount of cash grant National Homeland Defense Foundation (c) IRC section if applicable 501(c)6 501(c)3 20-8123646 13-1610451 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Colorado Homeland Defense Alliance 1 (a) Name and address of organization United Service Organization, Inc. 3595 East Fountain Blvd., Ste B2 2111 Wilson Blvd, Ste 1200 Colorado Springs, CO 80910 or government Name of the organization Arlington, VA 22201 Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Partl Part II

% ×

20-0778121

Open to Public

Inspection

OMB No 1545-0047

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

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

Enter total number of other organizations

Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) (Form 990) 2009 National Homeland Defense Foundation

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance 26 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 932102 02-02-10

Page 2

20-0778121

Schedule I (Form 990) 2009

Part III | Grants and Othe

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV. line 23.

2009

Open to Public

Name of the organization

► Attach to Form 990. ► See separate instructions.

National Homeland Defense Foundation

Employer identification number 20-0778121

Questions Regarding Compensation No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply. Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? X 4h c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? X 5a X **b** Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. The organization? 6a X **b** Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2009

ation 20-0778121

Page 2

National Homeland Defense Foundation

Schedule J (Form 990) 2009

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

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

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

	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E) Total of columns	(F)
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)(i)(a)	reported in prior Form 990-EZ
(3)							
(ii)							
0)							
(ii)	,						
(9)							
(0)							
8							
(ii)							
(0)							
(ii)	(
(0)							
(ii))						
(0)							
(ii)							
(9)							
(ii)							
9							
(ii)							
(9)							
(ii)							
8							
(ii)							
(9)				-			
(0)							
(9)							
(ii)	7						
8							
(ii)						-	
9							
(11)	1						
<u>e</u>							
((i))							

Schedule J (Form 990) 2009

932112 02-02-10

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

2009

Open to Public Inspection

Name of the organization

National Homeland Defense Foundation

Employer identification number 20-0778121

Schedule M (Form 990) 2009

Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of d reven	etermini	ng	
1	Art - Works of art			<u> </u>				
2	Art - Historical treasures			-				
3	Art - Fractional interests						_	
4	Books and publications						_	
5	Clathing and baycachald accords							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property		-	<u> </u>				
9	Securities - Publicly traded							
10	Securities - Closely held stock		-					
11	Securities - Partnership, LLC, or					-		
••	trust interests							
12	Securities Miscellaneous				· · · · · ·			
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial	Х	1	27,330.	Fair Value	of I	ea	se
17	Real estate - Other							
18	Collectibles							
19	Food inventory						_	
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other • ()				<u> </u>			
27	Other ()							
28	Other (-					
29	Number of Forms 8283 received by the organi	zation during	the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part IV, [Oonee Acknowledg	gment 29				
						`	Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	oorted in Part I, lines 1-28 tha	at it must hold for		- 1	
	at least three years from the date of the initial	contribution,	and which is not	required to be used for exem	pt purposes for	i i	1	
	the entire holding period?					30a		<u>X</u>
b	If "Yes," describe the arrangement in Part II.						ŀ	
31	Does the organization have a gift acceptance	policy that re	quires the review	of any non-standard contrib	utions?	31		<u> </u>
32a	Does the organization hire or use third parties	or related or	ganızatıons to solı	cit, process, or sell noncash				
	contributions?		•			32a		<u>X</u>
b	If "Yes," describe in Part II.							
33	If the organization did not report revenues in c	olumn (c) for	a type of property	for which column (a) is che	cked,			
	describe in Part II.							

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

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury

Department of the Treasury internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

National Homeland Defense Foundation

Employer identification number 20-0778121

Form 990, Part I, Line 1, Description of Organization Mission:

citizens of the United States of America, governmental entities and

business and non-profit sectors a greater understanding and awareness
of homeland defense and its practical and theoretical applications.

The Foundation pursues the following specific projects in the
futherance of its mission: serves as the source of best practices and
innovation in homeland defense by providing education, training and
research; developing a blueprint and implementation plan for a response
system between government and communities and as a source of
information for offices of emergency management and other State
Homeland Security Advisors. The Foundation conducts an annual
symposium to facilitate their outreach in education, training and plan
development.

Form 990, Part III, Line 1, Description of Organization Mission:

practical and theoretical applications. The Foundation pursues the

following specific projects in the futherance of its mission: serves as

the source of best practices and innovation in homeland defense by

providing education, training and research; developing a blueprint and

implementation plan for a response system between government and

communities and as a source of information for offices of emergency

management and other State Homeland Security Advisors. The Foundation

conducts an annual symposium to facilitate their outreach in education,

training and plan development.

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

etions on Open t

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization National Homeland Defense Foundation	Employer identification number 20-0778121
Grants to not-for-profit organizations	
Expenses: \$20,000	
Library	
Expenses: \$2,720	
Expenses \$ 22720. including grants of \$ 0. Revenue \$	0.
Form 990, Part VI, Section A, line 8b: The Organization d	ocuments all the
meetings held or written actions taken by the governing b	ody. There is no
committee with authority to act on behalf of the governing	g body.
Form 990, Part VI, Section B, line 11: A copy of Form 990	reviewed by the
Executive Director and then is presented to the Board of	Directors for
their review before it is filed.	
Form 990, Part VI, Section B, Line 12c: Annual review and	signing by the
Board of Directors of the conflicts of interest policy.	
Form 990, Part VI, Section B, Line 15a: Executive Directo	
determined and approved by the Board of Directors.	
Form 990, Part VI, Section C, Line 19: These documents ar	e available at
the Organization's office upon request.	
Form 990, Part XI, Line 2c	
And the Common table Days	

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

44 is 45

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization **Employer identification number** National Homeland Defense Foundation 20-0778121 The Organization did not change the oversight process of the audited financial statements from the previous year.

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

. 14	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X
_	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the	•
Do n	not complete Part II unless you have already been granted an automatic 3-month extension on a previously	filed Form 8868.
Pa	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A co	prporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and co	mplete
Part	l only	· ▶ □
All of	ther corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a	an extension of time
	e income tax returns.	
note (not a you r	etronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensed below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or community the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic for the support of the file for Charities & Nonprofits.	nically if (1) you want the additional onsolidated Form 990-T. Instead,
Туре		Employer identification number
print		
	National Homeland Defense Foundation	20-0778121
File by due da	y the late for Number, street, and room or suite no. If a P.O. box, see instructions.	
filing y return		
	ctions City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Colorado Springs, CO 80906	
Che	ck type of return to be filed (file a separate application for each return):	
] Farm 2000	1700
H	Form 990	
<u> </u>	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust)	0227
1 7	I Form 000 E7 I I Form 000 T (truct other than above) I Form 6	enen
X	Form 990-EZ Form 990-T (trust other than above) Form 6	
	Form 990-EZ Form 990-T (trust other than above) Form 6	
To if		ve, No. 250 -
• Tr	The Organization - 1259 Lake Plaza Drive the books are in the care of ► Colorado Springs, CO 80906 felephone No. ► (719) 577-7417 FAX No. ► father organization does not have an office or place of business in the United States, check this box father is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the organization of the content	No. 250 – No. 250 – In is is for the whole group, check this il members the extension will cover.
• Ti Te • If • lf box	The Organization - 1259 Lake Plaza Driving books are in the care of ► Colorado Springs, CO 80906 The organization - 1259 Lake Plaza Driving Colorado Springs, CO 80906 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If the states of the group, check this box ► and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unaugust 15, 2010, to file the exempt organization return for the organization named is for the organization's return for: X calendar year 2009 or	No. 250 – In is is for the whole group, check this il members the extension will cover. Intil above. The extension
To if box	The Organization - 1259 Lake Plaza Driving books are in the care of ► Colorado Springs, CO 80906 The organization - 1259 Lake Plaza Driving Colorado Springs, CO 80906 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If the states is for part of the group, check this box ► and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time units for the organization's return for: ■ X calendar year 2009 or, and ending, and ending, and ending	No. 250 – No. 250 – In is is for the whole group, check this il members the extension will cover.
To if hobox	The Organization - 1259 Lake Plaza Drivene books are in the care of ► Colorado Springs, CO 80906 elephone No. ► (719) 577-7417 fithe organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box ► and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unexpected to the organization's return for: X Calendar year 2009 Calendar	No. 250 – In is is for the whole group, check this is members the extension will cover. In it is above. The extension Change in accounting period
• The state of the	The Organization - 1259 Lake Plaza Drivine books are in the care of ▶ Colorado Springs, CO 80906 The books are in the care of ▶ Colorado Springs, CO 80906 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the organization of the group, check this box ▶ and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time units for the organization's return for: ■ X calendar year 2009 or ▶ 1 tax year beginning , and ending . Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	No. 250 – No. 250 – In is is for the whole group, check this il members the extension will cover. Intil above. The extension Change in accounting period
• The state of the	The Organization - 1259 Lake Plaza Drivine books are in the care of ▶ Colorado Springs, CO 80906 The books are in the care of ▶ Colorado Springs, CO 80906 The elephone No. ▶ (719) 577-7417 The organization does not have an office or place of business in the United States, check this box of this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the properties of the group, check this box ▶ and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time units for the organization's return for: August 15, 2010 In the exempt organization return for the organization named is for the organization's return for: X calendar year 2009 or In tax year beginning In this tax year is for less than 12 months, check reason: In Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	No. 250 – In is is for the whole group, check this il members the extension will cover. Intil above. The extension Change in accounting period 3a \$
• The state of the	The Organization - 1259 Lake Plaza Drivenes below the care of ► Colorado Springs, CO 80906 selephone No. ► (719) 577-7417 FAX No. ► state organization does not have an office or place of business in the United States, check this box states for a Group Return, enter the organization's four digit Group Exemption Number (GEN) states for a Group Return, enter the organization's four digit Group Exemption Number (GEN) states for a Group Return, enter the organization's four digit Group Exemption Number (GEN) states and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unaugust 15, 2010 states, the organization return for the organization named is for the organization's return for: ► X calendar year 2009 or Tax year beginning states, and ending states and ending states are defined by the states of the organization is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit.	No. 250 – In is is for the whole group, check this il members the extension will cover. Intil above. The extension Change in accounting period 3a \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)