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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

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

OMB No 1545-0047 2009 Open to Public Inspection

Department of the Treasury

benefit trust or private foundation)

2009, and ending A For the 2009 calendar year, or tax year beginning D Employer identification number C Name of organization NAT'L TRAINING AND INFORMATION CENTER B Check if applicable Please Address change 36-2755109 Doing Business As lahel or Number and street (or P O box if mail is not delivered to street address) E Telephone number Room/suite orint or Name change type 810 NORTH MILWAUKEE AVENUE (312) 243-3035 Instial return Specific City or town, state or country, and ZIP + 4 Terminated Instruc-Amended return CHICAGO, IL 60642-4103 2,908,517. G Gross receipts \$ H(a) Is this a group return for Application pending F Name and address of principal officer GEORGE GOEHL, EXEC. DIRECTOR Yes X No H(b) Are all affiliates included? X 501(c) (3) ◀ (insert no) 4947(a)(1) or If "No." attach a list (see instructions) Website: ► HTTP://WWW.NTIC-US.ORG/ H(c) Group exemption number Form of organization X Corporation Trust L Year of formation 1972 M State of legal domicile Association Other > Summary Part I Briefly describe the organization's mission or most significant activities NATIONAL TRAINING AND INFORMATION CENTER IS A NATIONAL ORGANIZING, POLICY, RESEARCH, AND TRAINING CENTER FOR GRASSROOTS ORGANIZATIONS. Activities & Governance Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 21 Total number of employees (Part V, line 2a) 12 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1,245,370 2,808,731. Contributions and grants (Part VIII, line 1h) 60,003 85,022. Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 35,475. 14,164. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 26,800 600. 1,367,648. 2,908,517. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 240,000 343,000. Օրգրկ**չ բորի-**similar amounts paid (Part IX, column (A), lines 1-3) Benefits part to or for members (Part IX, column (A), line 4) n 1,095,579. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 949,392. UGa Proles light fundaising fees (Part IX, column (A), line 11e) b Total fundraising expenses, Part IX, column (D), line 25) ▶ _____173,840. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 976,676. 877,536. Foto expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,166,068 $2,\overline{316,115}$ -798,420. 592,402. Revenue less expenses Subtract line 18 from line 12 Assets or Balances End of Year Beginning of Year 1,536,301. 1,452,631 20 Total assets (Part X, line 16) 589,448 80,717. 1,455,584. 863,183. 22 Net assets or fund balances Subtract line 21 from line 20. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 🗪 Sign Signature of officer Here LECUTIVE DIREITOR SE Type or print name and title Check if Preparer's identifying number Preparer's (see instructions) P00022148 Paid signature employed \triangleright **Z**Preparer's 34-1853929 Firm's name (or yours CBIZ MHM, EIN if self-employed), address, and ZIP + 4 ONE SOUTH WACFER DRIVE, SUITE 1800 CHICAGO, IL 60606 312-602-6800 Phone no May the IRS discuss this return with the prepare shown above? (see instructions) Yes Form 990 (2009)

For Privacy Act and Paperwork Reduction Act lotice, see the separate instructions.*

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ATTACHMENT 3

1,946,659.

24,000) (Revenue \$

Form 990 (2009)

(Expenses \$

371, 319 including grants of \$

4d Other program services (Describe in Schedule O)

4e Total program service expenses ▶

107.888.

Part IV Checklist of Required Schedules

	•	_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4	х	
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	<u> </u>		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	x	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	24		,
	Schedule D, Part VI	1.7	,	
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more		13,77	`,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	3 2	-	
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	1 A H	l	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		ŀ	
•	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 IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			İ
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	State .	-	
	complete Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year?	3,75	, 1	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		15	- (*
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		i	-
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Χ
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	18		Χ
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	19		Χ
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Form 9	990 (2009) 36-2755109			Page 4
Pari	'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	Х	
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
		23		Х
04-	employees? If "Yes," complete Schedule J	23		-
24 a	- · · · · · · · · · · · · · · · · · · ·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	24-		х
	24b through 24d and complete Schedule K If "No," go to question 25	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			X
-	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		 ^-
b	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			Х
	990-EZ? If "Yes," complete Schedule L, Part I	25b		_^
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			Х
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		_^
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			v
	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)			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			v
	Schedule L, Part IV	28b		X
С	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,			v
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			Х
	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	, ,		Х
	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		Х
	Schedule N, Part II	32		
33		33		Х
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		
34	Ill, IV, and V, line 1	34		Х
2.5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34		
35		2.		Х
2.0	Schedule R, Part V, line 2	35		
36		36		х
2=	organization? If "Yes," complete Schedule R, Part V, line 2	36	-	<u> </u>
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	9.		Х
20	Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20	Х	
	19? Note. All Form 990 filers are required to complete Schedule O		990	(2008)

Par	Statements Regarding Other IRS Filings and Tax Compilance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	US Information Returns Enter -0- if not applicable	,		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	· ·		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c		
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 . 21	'		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	73,		
_	instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			X
	this return?	3a		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4-	ł	Х
	account)?	4a		
IJ	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5 2	Most the appropriate a party to a prohibited tay shelter transaction at any time divine the tay and	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
Ī	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	i	
7		Ç ' - :		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7 a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		1	
	required to file Form 8282?	7 c		X
ď	If "Yes," indicate the number of Forms 8282 filed during the year	,		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	· 		
	benefit contract?	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		
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	76	ł	
8	required?	7h		
0	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		- 1	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter	,		
	Initiation fees and capital contributions included on Part VIII, line 12	\$,	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		۱ .	
11	Section 501(c)(12) organizations. Enter	15 Km	',' \	, 🐫
а	Gross income from members or shareholders	4	,	,
b	Gross income from other sources (Do not net amounts due or paid to other sources against	30 m	ł	
	amounts due or received from them)	.,		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

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.

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Χ
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		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	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		Х
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ū	the year by the following			
•	The governing body?	8a	Х	
a	Each committee with authority to act on behalf of the governing body?	8b	Х	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		Х
Soct	ion B. Policies (This Section B requests information about policies not required by the Internal	Ja		
	enue Code)			
rove	side Code /		Yes	No
40-	Done the experience have level charters branches as offlicted?	10a	X	
	Does the organization have local chapters, branches, or affiliates?	IVa		
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b	Х	
4.4	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	Х	
444	form?			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a		X
12a		128		
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	406		
	rise to conflicts?	12b		
С		4.0		
	describe in Schedule O how this is done	12c		Х
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v	
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)			
16a				v
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
<u>Sect</u>	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)		
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter	est		
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization MARINA SELIKOVA 810 N. MILWAUKEE CHICAGO, IL 60622	e		
	organization ► MARINA SELIKOVA 810 N. MILWAUKEE CHICAGO, IL 60622	. 		
	312-676-2812			

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

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

- 1a Complete this table for all persons required to be listed 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	(C) Position (check all that apply)					olv)	(D) Reportable	(E) Reportable	(F) Estimated
Name and The	hours per week	Individual trustee or director		Officer		Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARILYN EVANS										
TREASURER	1.00	Х			<u></u>			0.		
JOE FAGAN		1								
DIRECTOR	1.00	Х						0.		
CALVIN BRADFORD								_		
DIRECTOR	1.00	Х						0.		
TRACY VAN SLYKE								_		
DIRECTOR	1.00	Х						0.		
REVEREND DR. EUGENE BARNES			ļ				ļ	_		
PRESIDENT	1.00	Х						0.	···-	
BRUCE GOTTSCHALL										
DIRECTOR	1.00	Х			L.			0.		
BRENDA LABLANC									ì	
DIRECTOR	1.00	Х						0.		
JOHN MCKNIGHT										
DIRECTOR	1.00	X					ļ	0.		
EMIRA PALACIOS										
VICE PRESIDENT	1.00	Х						0.		
SHEL TRAPP										
DIRECTOR	1.00	Х			<u>.</u>			0.		
GEORGE GOEHL										
EXECUTIVE DIRECTOR	45.00			Х	_			92,386.		
		<u> </u>			<u> </u>		<u> </u>			
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Part VII Section A. Officers, Directors, Tru	istees, Ke	y Em	plo	ye	es,	and H	ligl	hest Compensat	ed Employ	ees (d	ontinue	d)	
、 (A) Name and title	(B) (C) Average Position (check all that appl							(D) Reportable	(E) Reportable		ı	(F) imated	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compens from rel organiza (W-2/1099	ated lions	comp fro orga and	ount of ther ensation m the nization related	on n
						·							
	· _ · · · · · · · · · · · · · · · · · · 												
										•		-	
													<u></u>
	_							-1					
1b Total						<u></u>	▶	92,386			<u> </u>		
2 Total number of individuals (including but not reportable compensation from the organization	limited to t n ►	hose (liste)	d al	bov	e) wh	o re	eceived more than	\$100,000 ı	n			
	-											Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schede	ule J for su	ch ına	ivid	ual							3	-	X
4 For any individual listed on line 1a, is the the organization and related organizations individual	greater th	nan \$	150	00,0	02	If "Y	'es, '	' complete Sched	ule J for	such	4		X
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	e or accr	ue c	omp	ens	satio	on fro	om	any unrelated of	rganization	for	5	*	
Section B. Independent Contractors	<u></u>												
Complete this table for your five highest compensation from the organization	compensa	ted ir	dep	end	dent	con	trac	tors that receive	d more th	an \$10	00,000	of	
(A) Name and business add	ress							(B) Description of se	rvices	((C) Compens	ation	
							+						
							+						 -
							T						
2 Total number of independent contractors (in more than \$100,000 in compensation from the				nite	d to	thos	se I	isted above) who	received	*	**************************************	, 5	

Part	VIII	Statement of Revenue		36-2755109		
	•	•	· (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 51
and other similar amounts	1a	Federated campaigns 1a Membership dues		· · · · · · · · · · · · · · · · · · ·	, k2	
2 5	b					
2 E	С	t and anomy ordinal to the total to the				
vië	d	The state of garman and the state of the sta	671		•	
5 5	e	Covernment grants (contributions):	071			
he	f	, , , , , , , , , , , , , , , , , , , ,	000			
0		and similar amounts not included above . 1f 2,605,			1	
3 8	9	Noncash contributions included in lines 1a-1f \$			The State of the S	*
- 1	<u>h</u>	Total. Add lines 1a-1f			The second secon	
Program Service Revenue		Business	code			
Š	2 a	CONSULTING FEES	14,253	14,253	<u> </u>	ļ
ه س	b	TRAINING SESSIONS	16,000	16,000		
	c	PUBLICATIONS	15,035	15,035		
Ser	d	CONFERENCE REGISTRATIONS	12,826	12,826		
Ē	e	AFFILIATE DUES	26,900	26,900		
g	f	All other program service revenue	8	8		
윤	g	Total. Add lines 2a-2f	85,022	······································		
	3					
	3	Investment income (including dividends, interest, and other similar amounts)	14,164			14,164
ł			• • • • • • • • • • • • • • • • • • • •			14,104
1	4	Income from investment of tax-exempt bond proceeds .	· · ′			-
	5	Royalties · · · · · · · · · · · · · · · · · · ·	nal v			
		(I) Real (II) Felso	niai		,	
	6 a	Gross Rents			, & / , , , , , , , , , , , , , , , , , , ,	
	b	Less rental expenses		•		
	С	Rental income or (loss)			3000	
	d	Net rental income or (loss)	▶ 0			
1	7.0	Gross amount from sales of (i) Securities (ii) Other	er		1 , 4	
l	/ a	assets other than inventory				
-	b	Less cost or other basis				
	-	and sales expenses			ı	1
	_	Gain or (loss)				}
	c d	Net gain or (loss)	•			
		.	• • •		a a t	
Other Revenue	8 a	Gross income from fundraising		,		,
ē		events (not including \$		a.		,
é		of contributions reported on line 1c)		5	一种	[
ובי		See Part IV, line 18 a				
ا <u>ب</u> و		Less direct expenses b			1 100	
ŏ∣	С	Net income or (loss) from fundraising events	▶ 0			
ŀ	9 a	Gross income from gaming activities See Part IV, line 19 a) 	•
	b	Less direct expenses b				
	C	Net income or (loss) from gaming activities	▶ 0			
1	0a				ngin tak ey	
	L					
		Less cost of goods sold b Net income or (loss) from sales of inventory	- 0			-
\vdash	Ü	Miscellaneous Revenue Business			,	
-				-	·	
1	11a	OTHER INCOME	600	600		
	b					
	С					ļ <u> </u>
	d	All other revenue				
	е	Total. Add lines 11a-11d	▶ 600			ļ
۱.	2	Total Revenue. See instructions	2,908,517	85,622		14,164

Part IX Statement of Functional Expenses

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

	All other organizations must complete not include amounts reported on lines 6b,	(A)	(B)	(C)	na (D). (D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1		2.2.2.2			
	organizations in the U.S. See Part IV, line 21	343,000.	343,000.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			\bar{q}	
	U.S. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	245,481.	185,032.	60,449.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	648,713.	539,981.	13,089.	95,643
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	35,439.	28,659.	2,948.	3,832
9	Other employee benefits	97,309.	79,079.	7,065.	11,165
10	Payroll taxes	68,637.	55,463.	5,857.	7,317
11	Fees for services (non-employees)				
	Management	0.			
	Legal	37,979.		37,979.	
	Accounting	0.			
	Lobbying	0.			
	Professional fundraising services See Part IV, line 17	0.			
	Investment management fees	0.			
		0.1	·	-	
	Other	36,539.	35,682.	378.	479
12	Advertising and promotion	26,231.	23,503.	871.	1,857
13	Office expenses	0.	23,303.	0,1.	1,031
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	266,698.	258,796.	4,523.	3,379
17	Travel	200,090.	230,790.	4,323.	3,319
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.	40 024	728.	F 202
19	Conferences, conventions, and meetings	47,034.	40,924.	728.	5,382
20	Interest	0.			
21	Payments to affiliates	0.		16 020	
22	Depreciation, depletion, and amortization	16,839.		16,839.	
23	Insurance	0.			
24	Other expenses Itemize expenses not			,	
	covered above (Expenses grouped together			1.	
	and labeled miscellaneous may not exceed		į		
	5% of total expenses shown on line 25 below)			- 4	
_	STAFF DEVELOPMENT	11,611.	7,191.	3,940.	480
_	DONATION EXPENSE	570.	270.		300
•	PROFESSIONAL SERVICES	304,416.	241,663.	30,366.	32,387
	PRINTING & REPRODUCTION	5,951.	5,951.		
е	SUBSCRIPTIONS & MEMBERSHIPS	9,803.	8,427.	1,245.	131
f	All other expenses	113,865.	93,038.	9,339.	11,488
	Total functional expenses. Add lines 1 through 24f	2,316,115.	1,946,659.	195,616.	173,840
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				
JSA 52 1					Form 990 (200

1	(B)
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation. 10b 548,931. 11 Investments - publicly traded securities 11 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 19 Carnts payable 18	End of year
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 548,931. 148,775. 10c 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable 18	898,408.
4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 548,931. 148,775.10c 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18	62,177.
4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 548,931. 148,775.10c 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18	377,643.
Faceivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	29,517.
Schedule L	
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 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 589, 448. 17	
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 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 589, 448. 17	
Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation. 10b 548,931. 148,775.10c 11 Investments - publicly traded securities. 11 Investments - other securities See Part IV, line 11. 12 Investments - program-related See Part IV, line 11. 13 Intangible assets. 14 Intangible assets. 15 Other assets See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable. 18 Grants payable.	
7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 12,028. 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10b 548,931. 148,775. 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,452,631. 16 17 Accounts payable 18 Grants payable 18 18 18 18 18 18 18 1	
7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 12,028. 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10b 548,931. 148,775. 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,452,631. 16 17 Accounts payable 18 Grants payable 18 18 18 18 18 18 18 1	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation. 10b 548,931. 148,775.10c 11 Investments - publicly traded securities. 12 Investments - other securities See Part IV, line 11. 13 Investments - program-related See Part IV, line 11. 14 Intangible assets. 15 Other assets See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses. 18 Grants payable.	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation. 10b 548,931. 148,775. 10c 11 Investments - publicly traded securities. 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,452,631. 16 17 Accounts payable 18	•
10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation. 10b 548,931. 148,775.10c 11 Investments - publicly traded securities. 11 12 Investments - other securities See Part IV, line 11. 12 13 Investments - program-related See Part IV, line 11. 13 14 Intangible assets. 14 15 Other assets See Part IV, line 11. 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1, 452, 631. 16 17 Accounts payable and accrued expenses 589, 448. 17 18 Grants payable 18	28,775.
b Less accumulated depreciation 10b 548,931 148,775 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets Add lines 1 through 15 (must equal line 34) 1,452,631 17 Accounts payable and accrued expenses 589,448 17 18 Grants payable 18	
11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1, 452, 631 - 16 17 Accounts payable and accrued expenses 589, 448 - 17 18 Grants payable 18	
11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1, 452, 631 - 16 17 Accounts payable and accrued expenses 589, 448 - 17 18 Grants payable 18	139,781.
13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1, 452, 631 · 16 17 Accounts payable and accrued expenses 589, 448 · 17 18 Grants payable 18	
14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,452,631 16 17 Accounts payable and accrued expenses 589,448 17 18 Grants payable 18	
14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,452,631 16 17 Accounts payable and accrued expenses 589,448 17 18 Grants payable 18	
16 Total assets. Add lines 1 through 15 (must equal line 34) 1,452,631.16 17 Accounts payable and accrued expenses 589,448.17 18 Grants payable 18	
17 Accounts payable and accrued expenses 589,448. 17 18 Grants payable 18	
17 Accounts payable and accrued expenses 589,448. 17 18 Grants payable 18	1,536,301.
	80,717.
19 Defended revenue	
20 Tax-exempt bond liabilities	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	
employees, highest compensated employees, and disqualified	
persons Complete Part II of Schedule L	
23 Secured mortgages and notes payable to unrelated third parties	=
24 Unsecured notes and loans payable to unrelated third parties	·
25 Other liabilities Complete Part X of Schedule D	
26 Total liabilities. Add lines 17 through 25 589, 448. 26	80,717.
Organizations that follow SFAS 117, check here ▶ X and	
E 27 Unrestricted net assets	1,155,584.
28 Temporarily restricted net assets	300,000.
Permanently restricted net assets	
complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets	
30 Capital stock or trust principal, or current funds	
30 Capital stock or trust principal, or current funds	
X 32 Retained earnings, endowment, accumulated income, or other funds 32	
33 Total net assets or fund balances	1,455,584.
34 Total liabilities and net assets/fund balances 1, 452, 631. 34	1,536,301.

Form **990** (2009)

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2009)

SCHEDULE A (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 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

lame of t	he organizatio	on					·	Employe	er identifica	tion numbe	r
NAT'L	TRAINING	AND INFORM	MATION CENTER						36-27	55109	
Part I	Reason fo	or Public Chari	ity Status (All organ	ızations m	rust comp	lete this	part) Se	e instruc	ctions.		
The <u>org</u> a			dation because it is (F		_		•	-			
1	A church, co	onvention of chu	rches, or association (of churches	s described	ın sectio	n 170(b)(1)(A)(i).			
2	A school de	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sched	lule E)						
3	A hospital o	r a cooperative	hospital service organ	ızatıon des	cribed in se	ction 170	(b)(1)(A)	(iii).			
4			zation operated in co	njunction	with a hos	pital des	cribed in	section	170(b)(1)	(A)(iii). E	nter the
_		ame, city, and sta									
5			or the benefit of a col	lege or un	iversity ow	ned or o	perated t	by a gove	ernmental	unit desc	ribed in
		(b)(1)(A)(iv). (C									
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 X			Ily receives a substan		its suppor	t from a q	governme	ental unit	or from t	he genera	il public
			(1)(A)(vi). (Complete F								
8		-	d in section 170(b)(1)(-	
9	_		lly receives (1) more								-
			ted to its exempt fun		•						
		-	ment income and un						511 tax)	from bus	sinesses
•	-	•	n after June 30, 1975					-			
	-	_	and operated exclusive	-	•	•				to corne	out the
' [and operated exclusional ublicly supported organical controls.	-						-	
	•	•	at describes the type of					•	•		Section
	a Typ				e III - Func		•			pe III - Oth	ner
e			ertify that the organiz			•	-		· · · · · · · · · · · · · · · · · · ·		
•			ion managers and oth								
		section 509(a)(-			, ,					
f	If the organ	nization received	I a written determina	tion from t	the IRS tha	at it is a	Type I, T	ype II, o	r Type III	supportin	g
	organization	n, check this box									\Box
g	Since Augus	st 17, 2006, has	the organization acce	pted any g	ift or contri	bution fro	m any of	the			
	following pe	rsons?									
	(i) A pers	on who directly	or indirectly controls	, either al	one or tog	ether wit	h person	s describ	ped in (ii)	\	res No
	and (III)	below, the gove	erning body of the supp	ported orga	anization?					11g(ı)	
		-	erson described in (i) a							11g(II)	
		-	of a person described		•					11g(ui)	
h		,	ation about the suppo					···			
(i) Name	of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1-9						s the	(vii) Amo suppe	
0.90			above or IRC section		document?	col (i)	of your	(i) organı	zed in the	ОСРР	
			(see instructions))	Yes	No	Yes	No No	Yes	S? No		
				162	-	163	NO	162	140		
								:			
				_		 			 		
		-									
						 					
					1			1			
					1						
otal									1		

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

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) Part II

Sec	tion A. Public Support						
Cale	ndar 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")	1,935,888	1,292,193	1,526,543	1,245,370	2,808,731	8,808,725
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,935,888	1,292,193	1,526,543	1,245,370	2,808,731	8,808,725
5	The portion of total contributions by each person (other than a governmental unit or		.∓ ∰e- /g_	i.			
	publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	. 4	er og å å å å norallen La of og å		-details		2,330,592
	Public support. Subtract line 5 from line 4				· with	の場合は	6,478,133
	tion B. Total Support		,			,	
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,935,888	1,292,193	1,526,543	1,245,370	2,808,731	8,808,725
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	24,222	54,255	59,436	35,908	14,164	187,985
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	16,306	17,100	8,361	26,800	600	69,167
11	Total support. Add lines 7 through 10				,,,	A STATE OF THE STA	9,065,877
12	Gross receipts from related activities, etc. (s	see instructions).				12	249,329
13 ——	First five years. If the Form 990 is forganization, check this box and stop here	<u></u>					
Sec	tion C. Computation of Public Sup						71 46
14	Public support percentage for 2009 (li	•				14	71.46%
15	Public support percentage from 2008					15	50.74%
16a	331/3% support test - 2009. If the o						
	this box and stop here. The organization	on qualifies as a	publicly suppor	rted organizatio	n		▶ 🛆
b	331/3% support test - 2008. If the c	organization did	I not check a b	ox on line 13 o	or 16a, and line	e 15 is 331/3% (or more,
	check this box and stop here. The orga	anızatıon qualıfı	es as a publicly	supported orga	nization		▶ 🖎
17a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me Part IV how the organization meets t						
	organization						▶ 📖
b	10%-facts-and-circumstances test - 2	2008. If the or	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,	and line
	15 is 10% or more, and if the orga						
	Explain in Part IV how the organization supported organization						
18	Private foundation. If the organization	on did not ched	k a box on line	e 13, 16a, 16b	, 17a, or 17b,	check this box	and see
	instructions	<u> </u>	• • • • • • • • •				
					8	Schedule A (Form 99	u or 990-EZ) 2009

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)

Sec	tion A. Public Support						
	alendar 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						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513			ļ			
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						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
þ	Amounts included on lines 2 and 3 received from other than disqualified						
	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	ļ					
	line 6)						
	tion B. Total Support					1 777	
C	alendar year (or fiscal year beginning in) 🕨 🏻	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
_	Unrelated business taxable income (less						
Ь	,						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975		-			 	
	Add lines 10a and 10b			-			
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,		-				
. •	and 12)						
14	First five years. If the Form 990 is for	the organization	n's first, second	third, fourth or	fifth tax vear a	s a section 501	(c)(3)
• •	organization, check this box and stop here.						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8,			mn (f))		15	%
16	Public support percentage from 2008 Sche	dule A, Part III, lir	ne 15	<u></u> <u></u>	<u> </u>	16	%
Sec	tion D. Computation of Investmen	it Income Per	centage				
17	Investment income percentage for 2009 (lin	ne 10c, column (f) divided by line	13, column (f))		17	%
18	Investment income percentage from 2008 S						%
19a	33 1/3% support tests - 2009. If the or	ganization did n	not check the bo	x on line 14, an	d line 15 is mor	e than 331/3%,	and line
	17 is not more than 33 1/3%, check th	ns box and sto	p here The org	janization qualifie	s as a publicly	supported organ	ization 🕨 🔛
b	33 1/3% support tests - 2008. If the orga	anization did not	check a box on	line 14 or line 19	9a, and line 16 is	s more than 331/	3 %, and
	line 18 is not more than 331/3 %, check	this box and s	top here The or	ganızatıon qualıfı	es as a publicly	supported organ	ization 🕨 📗
20	Private foundation. If the organization of	did not check	a box on line	14, 19a, or 19b			
JSA					5	ichedule A (Form !	990 or 990-EZ\ 2009

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12 Provide any other additional information. See instructions

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

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

OMB No 1545-0047 spection

Department of the Treasury

Internal Revenue Service		inspect
If the organization answere	ed "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activ	/ities), then
 Section 501(c)(3) organ 	nizations Complete Parts I-A and B Do not complete Part I-C	
 Section 501(c) (other till 	han section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B	
 Section 527 organization 	ons Complete Part I-A only	
If the organization answere	ed "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), the	'n
 Section 501(c)(3) organ 	nizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not con	mplete Part II-B
 Section 501(c)(3) organ 	nizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do n	ot complete Part II-A
If the organization answere	ed "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then	

 Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization Employer identification number NAT'L TRAINING AND INFORMATION CENTER 36-2755109 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Volunteer hours Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ Enter the amount of any excise tax incurred by organization managers under section 4955 . . . > \$ If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Yes No Was a correction made? If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. JSA 9E1264 2 000

Schedule C (Form 990 or 990-EZ) 2009

section 4911 tax for this year?

Yes X No

		
art II-A	Complete if the organization is exc	empt under section 501(c)(3) and filed Form 5768 (election
	under section 501/h)\	

A B		belongs to an affiliated group checked box A and "limited control" provisi	ions apply	
<u> </u>	Limits on Lob	pying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	2,087.	
b		a legislative body (direct lobbying)	3,763.	
С		a and 1b)		
d				
е		d lines 1c and 1d)	2,316,115.	
f	Lobbying nontaxable amount Enter the columns		265,806.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	66,452.	
h				·
i	Subtract line 1f from line 1c If zero or le			
į	If these is an amount other than zero or	either line 1h or line 1i, did the organization file	Form 4720 reporting	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expe	enditures During 4-Y	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount			258,303.	265,806.	524,109
b Lobbying ceiling amount (150% of line 2a, column (e))					786,164.
c Total lobbying expenditures	_		30,436.	5,850.	36,286.
d Grassroots nontaxable amount			64,576.	66,452.	131,028.
e Grassroots ceiling amount (150% of line 2d, column (e))					196,542.
f Grassroots lobbying expenditures			20,291.	2,087.	22,378.

	(election under section 501(h)).	(a)		(b)		
		Yes	No		Amou	nt	_
1 [During the year, did the filing organization attempt to influence foreign, national, state	or local		-			_
	legislation, including any attempt to influence public opinion on a legislative ma						
	referendum, through the use of						
a \	Volunteers?						
b F	Paid staff or management (include compensation in expenses reported on lines 1c thro	ugh 1ı)?					
c l	Media advertisements?						
d l	Media advertisements? Mailings to members, legislators, or the public?						
e f	Publications, or published or broadcast statements?			_			_
	Crane to other organizations for lobbying purposes.	I					_
g L	Direct contact with legislators, their staffs, government officials, or a legislative body?						_
h f	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar mean	§ ⁷ · · · ·					_
i (Other activities? If "Yes," describe in Part IV						_
j] 2 a [Total Add lines 1c through 1i						_
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)						
b l	If "Yes," enter the amount of any tax incurred under section 4912		ŀ				_
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ŀ				_
	t III-A Complete if the organization is exempt under section 501(c)(4), sec		07.0	ootior			_
· art	501(c)(6).		, or s	ection			
···-					١	Yes	
1 V	Were substantially all (90% or more) dues received nondeductible by members?				1		
2 [Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3 [Did the organization agree to carryover lobbying and political expenditures from the pri	or year?			3		
1 0	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if I "Yes." Dues, assessments and similar amounts from members			1			_
	Section 162(e) nondeductible lobbying and political expenditures (do not include amo			- +			
	expenses for which the section 527(f) tax was paid).	Table of police					
	Current year			2a			
ь	Carryover from last year		!	2b			
	Total			2 c			
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 1	62(e) dues		3			
3 A	If notices were sent and the amount on line 2c exceeds the amount on line 3, who	at portion of th	ie				
3 A							
3 A 4 II	excess does the organization agree to carryover to the reasonable estimate of nonder	ductible lobbyir	ng				
3 A 4 II e a	and political expenditure next year?		l	4			
3 A 4 II e a	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		l	4 5			_
3 A 4 II e a 5 T	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		l				_
3 A 4 If e a 5 T Part	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			5	I-B, line	 e 1ı	_

Schedule C (Fe	orm 990 or 990-EZ) 2009	36-2755109	Page 4
	Supplemental Information (continued)		
			•
		· 	·
		· · · · · · · · · · · · · · · · · · ·	· -
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			·
		·	
		· 	

SCHEDULE D (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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number NAT'L TRAINING AND INFORMATION CENTER 36-2755109 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) 4 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? 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 2 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 Year 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 2 d d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 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 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 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 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items 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 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

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

Schedule D (Form 990) 2009

Par	t III Organizations Maintaini	ng Collectio	ns of Art, His	torical	Treasure	s, or (Other Similar A	Assets (continued	<u>1) </u>
_								_		
3	Using the organization's acquisition		ind other recor	ds, che	ck any of the	he folk	owing that are a	significar	nt use of its	6
	collection items (check all that app	ly)	,							
а	Public exhibition		ď			chang	ge programs			
b	Scholarly research		e		Other					
С	Preservation for future ge									
4	Provide a description of the organi	zation's collect	ions and expla	iin how t	hey further	r the o	rganization's exe	empt pur	pose in	
	Part XIV									
5	During the year, did the organization	on solicit or red	ceive donations	s of art,	historical t	reasu	res, or other simil	ar		
	assets to be sold to raise funds rat	her than to be	maintained as	part of	the organiz	zation's	s collection?	[Yes	No
Par	t IV Escrow and Custodial A	rrangements	. Complete i	f the or	ganization	ansv	wered "Yes" to	Form 99	0. Part	
	IV, line 9, or reported ar									
1a	Is the organization an agent, truste	e. custodian o	r other interme	diary fo	r contributi	ions oi	r other assets no	t		
	included on Form 990, Part X?			-				_	Yes	No
h	If "Yes," explain the arrangement in									
-	Too, explain the arrangement in	ri ditrit did	complete the .	00	,		Δ	mount	-	
С	Beginning balance					10		mount		
d	Additions during the year									
	Distributions during the year									
e	<u> </u>					-		<u> </u>		
f n-	Ending balance								- V	
2 a	5		990, Part X, III	ne 217		• • • •	• • • • • • • •	L	Yes	∐ No
_	If "Yes," explain the arrangement in						00 D () ()	40		
Par	t V Endowment Funds. Con									
		(a) Current Yea	ar (b) Prior	r year	(c) Two ye	ears bac	k (d) Three yea	ars back	(e) Four ye	ears back
1a	Beginning of year balance									
b	Contributions	<u>-</u>								
С	Net investment earnings, gains,									
	and losses									
d	Grants or scholarships									
е	Other expenditures for facilities .						ŀ	•		
	and programs									
f	Administrative expenses									
g	End of year balance	·								
2	Provide the estimated percentage	of the year end	balance held	as			•			
а	Board designated or quasi-endown	nent 🕨	%							
b	Permanent endowment ▶	%								
С	Term endowment ▶	%								
	Are there endowment funds not in	the possessio	n of the organ	ization t	hat are hel	d and	administered for	the		
	organization by	•	0						Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(n), are the related org								3b	+
4	Describe in Part XIV the intended u	•	•						<u> </u>	
Par						rt X I	ine 10			
r a						Ť				
	Description of investment	(a)	Cost or other basis (investment)) Cost or othe basis (other)	r	(c) Accumulated depreciation	(0	d) Book value	•
	Lond				65,0	00			65	
1a	Land				60,0		60 000		65	000.
b	Buildings						60,000		1.0	022
C	Leasehold improvements				332,8		316,061	·		822.
d	Equipment				161,4		118,825	· 		2,594.
е	Other				69,4		54,045			, 365.
Tota	I. Add lines 1a through 1e (Column	(d) must equa	al Form 990, Pa	art X, col	umn (B), Iır	ne 10(d	<i>5)).</i> ▶		139	781.

Part VII	Investments - Other Securities. See	Form 990, Part X, II	ne 12
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial d	erivatives		
Closely-hel	ld equity interests		
		•	
		-	
		-	
		-	
	~~~~~~	- <del> </del>	
		<del></del>	· · · · · · · · · · · · · · · · · · ·
		-	
		<u> </u>	
Part VIII		Form 990, Part X, Ii	ne 13
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
			-
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 13)	<b>&gt;</b>	
Part IX	Other Assets. See Form 990, Part X,	line 15	
		a) Description	(b) Book value
		<u>,</u>	
	<del></del>	· · · · · · · · · · · · · · · · · · ·	
		<del></del>	
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 15)		
Part X	Other Liabilities. See Form 990, Part		· · · · · · · · · · · · · · · · · · ·
	(a) Description of liability	(b) Amount	
1.		(b) Amount	
Federal inc	ome taxes		
	·		
			L Company of the Comp
			· · · · · · · · · · · · · · · · · · ·
			The state of the s
	-		
Total (Column	n (b) must equal Form 990, Part X, col (B) line 25)		

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

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stater	nents		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,908,517
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		2,316,115
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		592,402
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net) Add lines 4 through 8	9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			592,402
Part				
1	Total revenue, gains, and other support per audited financial statements		1	2,908,517
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	Ì		
а	Net unrealized gains on investments			
b	Donated services and use of facilities		İ	
С	Recoveries of prior year grants		-	
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d	. 4	2 e	
3	Subtract line 2e from line 1		3	2,908,517
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV)			
С	Add lines 4a and 4b	. 🗠	4 c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	2,908,517.
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	eturr	1	
1	Total expenses and losses per audited financial statements	. L	1	2,316,115.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities			
b	Prior year adjustments 2b		ļ	
С	Other losses 2c	_		
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d	. 2	2e	
3	Subtract line 2e from line 1	• 崖	3	2,316,115.
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 4a		- 1	
b	Other (Describe in Part XIV)	_	_	
С	Add lines 4a and 4b	. —	\$c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	2,316,115.
Part	XIV Supplemental Information			1
and 2	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Al art to provide any additional information	so co	mple	ete
			. <b>_</b>	
		- <del></del> -		

Part XIV Supplemental Information (continued)

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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

▶ Attach to Form 990.

2009

:

OMB No 1545-0047

Open to Public Inspection

å (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use SEE ATTACHED X Yes Employer identification number Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 36-2755109 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV appraisal, other) (d) Amount of cash grant (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 343,000 For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance NAT'L TRAINING AND INFORMATION CENTER (p) EIN Enter total number of other organizations (a) Name and address of organization or government Name of the organization SEE ATTACHED Part II

Schedule I (Form 990) 2009

Schedule I (	Schedule I (Form 990) 2009			36-2755109			Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Co Use Part IV and Schedule I-1 (Form 990) if additional space is needed	idividuals in the 990) if addition	in the United States.	s. Complete if the	e organization answered	Complete if the organization answered "Yes" on Form 990, Part IV, line 22 ed	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
							<u> </u>
Part IV	Supplemental Information. Complete this pai	ete this part to	provide the info	ormation required	In Part I, line 2, and any	rt to provide the information required in Part I, line 2, and any other additional information	
H		           					! ! ! !
SCHEDULE	LE I, PART I, QUESTION 2						     
PROPOSALS	ARE SOI	- 1	SUB-GRANTEES. FC	FOR EACH GRANT,	NTIC		       
CREATES	S A SPECIFIC CRITERIA THAT DETERMIN	DETERMINES	REGRANTING.	NTIC EVALUATES	TES		 
PROPOSALS	SALS AGAINST THE SET CRITERIA	(THIS	INCLUDES TAX E	EXEMPT STATUS)	S).		] 
DECISIONS	ONS ARE MADE TO WHOM REGRANTS	TS_WILL_BE	MADE. AN	AWARD LETTER AND	ND		 
CONTRA	CONTRACT IS SENT TO SUBGRANTEES. SUBGRANT	SUBGRANTEES	SIGN AND	SUBMIT THE			]   
CONTRACT.	WHEN SIGNED CONTRACT	IS RECEIVED ALONG WITH	1	THE W-9 FORM	FORM, GRANT		
DOLLAR	DOLLARS ARE DISBURSED. REPORTS AR	ARE SUBMITTED FROM	- FROM SUBGE	SUBGRANTEES IN			
ACCORD	ACCORDANCE WITH STIPULATIONS IN THE	HE_SIGNED_CONTRACT	CONTRACT				
			1				
						Schedule I (Form 990) 2009	990) 2009

## SCHEDULE O (Form 990)

### Supplemental Information to Form 990

OMB No 1545-0047

2009
Open to Public Inspection

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.

Name of the organization
NAT'L TRAINING AND INFORMATION CENTER

Employer identification number

36-2755109

ATTACHMENT 1

1

PART VI - SECTION A - QUESTION #10

THE FORM 990 WAS PREPARED BY AN OUTSIDE ACCOUNTANT AND WAS REVIEWED BY
THE DIRECTOR AND FINANCIAL ADMINISTRATOR. THE FORM 990 WAS THEN PROVIDED
TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING.

2

PART VI - SECTION B - QUESTIONS #15 A & #15 B

THE EXECUTIVE DIRECTOR RECEIVES AN ANNUAL PERFORMANCE REVIEW LED BY THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS. THE PROCESS INCLUDES INTERVIEWS WITH MEMBERS OF THE BOARD OF DIRECTORS, MEMBERS OF THE STAFF TEAM, AND OTHER ALLIES AND PARTNERS OF THE ORGANIZATION. THE EXECUTIVE DIRECTOR ALSO ENGAGES IN A SELF-EVALUATION THAT COMPARES ACTUAL PERFORMANCE AGAINST THE JOB DESCRIPTION AND STRATEGIC PLAN OF THE ORGANIZATION. ALL OTHER EMPLOYEES UNDERGO AN ANNUAL EVALUATION THAT INCLUDES A SELF-ASSESSMENT AND A REVEIW LED BY THEIR DIRECT SUPERVISOR. EACH STAFF ALSO HAS A SIX MONTH EVALUATION CHECK-IN WITH THEIR DIRECT SUPERVISOR.

3

PART VI - SECTION C - QUESTION 19

FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

4

Name of the organization NAT'L TRAINING AND INFORMATION CENTER Employer identification number 36-2755109

ATTACHMENT 1 (CONT'D)

PART III, QUESTIONS 2 & 3

THE ORGANIZATION DID NOT UNDERTAKE ANY NEW SIGNIFICANT PROGRAM SERVICES DURING THE YEAR THAT WERE NOT LISTED ON THE PRIOR YEAR FORM 990. THE ORGANIZATION DID NOT CEASE CONDUCTING, OR MAKE ANY SIGNIFICANT CHANGES TO HOW IT CONDUCTS PROGRAMS. THE NAMES OF SOME OF THE PROGRAMS HAVE CHANGED FROM THE PRIOR YEAR, DUE TO THE ORGANIZATION CONSOLIDATING AND RENAMING SOME PROGRAM SERVICES.

ATTACHMENT 2

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

NATIONAL TRAINING AND INFORMATION CENTER (NTIC) IS A NATIONAL ORGANIZING, POLICY, RESEARCH, AND TRAINING CENTER FOR GRASSROOTS COMMUNITY ORGANIZATIONS DEDICATED TO BUILDING POWER TO RECLAIM OUR DEMOCRACY AND ADVANCE A FAR-REACHING RACIAL AND ECONOMIC JUSTICE AGENDA. IT'S CORE PURPOSE IS TO CREATE A SOCIETY IN WHICH RACIAL AND ECONOMIC JUSTICE ARE REALIZED IN ALL ASPECTS OF SOCIETY, RESULTING IN MORE EQUITY IN WORK, HOUSING, HEALTH, EDUCATION, FINANCE, AND OTHER SYSTEMS CENTRAL TO OUR WELL-BEING.

FORM 990, PART III, LINE 4D - OTHER F	PROGRAM SERVICES	ATTACH	MENT 3
DESCRIPTION	GRANTS	EXPENSES	REVENUE
COMMUNICATIONS		160,435.	
HOUSING JUSTICE		106,857.	58,888.
NEO	24,000.	88,379.	45,250.
DIRECT LOBBYING		3,763.	3,750.

Page 2

Name of the organization Employer identification number NAT'L TRAINING AND INFORMATION CENTER 36-2755109 ATTACHMENT 3 (CONT'D) FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION GRANTS EXPENSES REVENUE INDIRECT LOBBYING 2,087 IWJ 9,798 TOTALS 24,000 371,319 107,888 ATTACHMENT 4 FORM 990, PART VIII - INVESTMENT INCOME (A) (B) (C) (D) RELATED OR TOTAL UNRELATED EXCLUDED DESCRIPTION REVENUE EXEMPT REVENUE BUSINESS REV. REVENUE 14,164 INTEREST INCOME 14,164 TOTALS 14,164 14,164

### Form 45.62

Name(s) shown on return

Department of the Treasury

Business or activity to which this form relates

**Depreciation and Amortization** 

(Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 67

36-2755109

NAT'L TRAINING AND INFORMATION CENTER

Identifying number

GENERAL DEPRECIATION **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I Maximum amount. See the instructions for a higher limit for certain businesses 1 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 if zero or less enter -0- if marned filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 . . . . . . . . Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 . . . . ▶ Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Other depreciation (including ACRS) 16,248 16 MACRS Depreciation (Do not include listed property ) (See instructions ) 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here, Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only - see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental ММ property 27 5 yrs S/L 39 yrs ММ S/L i Nonresidential real ММ S/L property Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/I 40 yrs ММ S/L Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 16,248. and on the appropriate lines of your return Partnerships and S corporations - see instructions . . 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

:	- !											36	i-275!	5109	
For	m 4562 (2009)									_					Page 2
Pa	property ι	roperty (Include used for entertain	nment, rec	reatio	n, or a	musen	nent.)			•				•	
	• Note: For 24b, colum	any vehicle for wi nns (a) through (c) (	hich you ai of Section A	re usır all of	ng the s Section	standai n B, and	rd milea d Sectioi	ge rate n Cıf a _l	e or dec oplicable	lucting	lease e	expense	, comp	lete <b>on</b> i	<b>ly</b> 24a,
	Section A - I	Depreciation and	Other Info	rmatio	n (Cau	tion: Se	ee the ir	structi	ons for I	ımıts fo	r passe	enger au	ıtomobi	les)	
248	Do you have evidence						Yes		24b If "\					Yes	No
	(a)	(b)	(c)			<u> </u>	(e)	T	(f)	T	9)	· · · · · ·	h)	1 7	(i)
	Type of property (list vehicles first)	Date placed in service	Business/ investment us percentage	se Cost	( <b>d</b> ) t or other t		asıs for depi usiness/inv use only	estment	Recovery period	1	hod/	Depre	ciation action	Elected	section cost
25	Special depreciation year and used more the									<u></u>	1.5		·		
26	Property used more to				iiisti ucti	0115)	• • • •	• • • •	• • • •	• • • •	. 25	L		<u> </u>	
	Troperty used more t	nan 50 % in a quaimet		% %						1		т .			
				<del>/</del> 9 %						<u> </u>		<del> </del>		-	
				% %								ļ		ļ	
	Decreed 500/ co			%					•	<u> </u>	<del></del> -	<u> </u>			
27	Property used 50% or	less in a qualified bu		•		<del></del>		т-	-	·					
				%						S/L -		ļ			
				%						S/L -		<u> </u>			
				%						S/L -			_	1	
28	Add amounts in colur	nn (h), lines 25 throi	ugh 27 Ente	er here a	and on Iir	ne 21, pa	age 1				. 28	<u> </u>			
29	Add amounts in colur	nn (i), line 26 Enter	here and on	line 7, p	page 1 .					<u> </u>			. 29		
Cor	nplete this section for ployees, first answer the	vehicles used by a	sole propriet	or, par	tner, or	other "r	on Use of the	n 5% ov	wner," or	related	person	If you p	rovided	vehicles	to your
		- questions in Section	TO to see if y	, ou me	et all exc	Т	.o comple	Ting un	S SECTION	101 111056	venicie	;S			
30	30 Total business/investment miles driven during the year (do not include commuting miles)  (a) (b) (c) (d) (e)  Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5							, ,	f) icle 6						
31		e driven during the	voor					<del>                                     </del>	<del>-</del>			· ·			
		sonal (noncommu	·					<del> </del>				-		1	<del></del>
32	•	•	١ .											ĺ	
	miles driven		ſ									<del> </del>	<del></del>	ļ	
33	Total miles driven											ļ			
	lines 30 through 32			V	l Na	V		V	T			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<del></del>	<u>,                                     </u>	
34	Was the vehicle use during off-duty how	•		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle	used primarily b	y a												
	more than 5% owi	•	r		ļ	ļ		ļ	ļ <u>.</u>						
36	Is another vehicle	available for pers	sonal		]							}			
	use?	· · · · · · · · · · · · · · ·			ļ <u>.</u>		<u> </u>					<u> </u>			
		Section C - Ques	stions for E	Employ	yers Wi	ho Pro	vide Vet	nicles fo	or Use b	y Their	Employ	ees/			
	swer these questions re than 5% owners o				eption	to con	npleting	Section	n B for	vehicle	s used	by em	ployees	who a	re not
37	Do you maintain a your employees?													Yes	No
38	Do you maintain a w	vritten policy statem	nent that pro	ohibits	persona	ıl use o	of vehicle	s, exce	pt comm	uting, b	y your	employe	es?		
	See the instructions for	or venicles used by co	orporate offic	ers, dire	ectors, o	r 1% or	more owi	ners							
39	Do you treat all use of	venicies by employee	es as persona	ai use?					· · · ·						
40	Do you provide m	ore than five ven	icies to yo	our en	nployees	, obtai	n inforn	nation	trom yo	ur emp	loyees	about	the		ı
	use of the vehicles, an														ļ
41	•									ons)					
	Note: If your answer to		1 is "Yes," do	not co	mplete S	section	B for the	covered	vehicles						
Pa	rt VI Amortizati	on			-			<del> 1</del>		······································		т		_	

Pa	art VI Amortization					
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42	Amortization of costs that begins	during your 2009 tax ye	ar (see instructions)	T	1	
				-		
43	Amortization of costs that began be	efore your 2009 tax year			43	591
44	Total. Add amounts in column (f)	See the instructions for whe	re to report	· · · · · · · · · · · ·	44	591
IC A						

Form 4562 (2009)

2009

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36-2755109

NAT'L TRAINING AND INFORMATION CENTER

Description of Property
GENERAL DEPRECIATION

DEPRECIATION												
Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Accumulated Me-	Conv	ACRS	MA Current-year CRS 179 class expense	Current-year depreciation
REFRIGERATOR	01/10/1997	949.	100 000			949	949	949 SL	5		_	
POSTAGE MACHINE	04/10/1997	6,475	100 000			6,475	6,475	6,475 SL	5 000	0		
DUPLICATOR	05/25/1999	5,976	100 000			5,976	5,976.	5,976 SL	5 000	0		
COMPUTER EQUIPMENT	11/05/1999	1,660	100 000			1,660	1,660	1,660 SL	5 000	0		
COMPUTER EQUIPMENT	07/31/2000	3,537	100 000			3,537	3,537	3,537. SL	2 000	0		
COMPUTER EQUIPMENT	02/01/2000	2,223	100 000			2,223	2,223	2,223. SL	5 000	0		
OUTDOOR FIXTURES	10/20/2000	2,164	100 000			2,164	1,932	1,932 SL	7 000	0		
COMPUTER EQUIPMENT	06/18/1998	2,222	100 000			2,222	2,222	2,222 SL	5 000	0		
COMPUTER EQUIPMENT	01/02/2001	2,248	100 000			2,248	2,248.	2,248 SL	5 000	0		
TOSHIBA SATELLITE	03/05/2001	2,326	100 000			2,326	2,326	2,326 SL	2 000	0		
AIR CONDITIONING	1002/12/10	10,840.	100 000			10,840	10,840	10,840 SL	7 000	0		
CISCO PIX 506 FIRE	03/06/2001	1,738	100 000			1,738.	1,738.	1,738 SL	3 000	0		
SOFTWARE	10/01/2001	1,182	100 000			1,182	1,182	1	3 000	0		
CABINETS	11/13/2002	1,355	100 000			1,355	1,195	١.	7 000	0		160
SOFTWARE	01/11/2002	991	100 000			766	511	511 SL	3 000	0		
COMPUTER EQUIPMENT	12/18/2002	1,626	100 000			1,626	1,626	1,626 SL	5 000	0		
SOFTWARE	02/28/2002	623	100 000			623	-623	-623 SL	3 000	0		
PRINTER RICOH SAV	07/18/2002	6,812	100 000			6,812	6,812	6,812 SL	5 000	0		
COMPUTER EQUIPMENT	02/28/2002	4,090	100 000			4,090	4,090	4,090 SL	5 000	0		
Less Retired Assets												
Subtotals						554,302	479,340.	495,588				16,248
Listed Property												
1												
Less Retired Assets												
Subtotals												
AMODITIZATION		554,302				554,302	479,340	495,588				16,248
NOU STINOWS	otec	,000										
Asset description	placed in service	or or basis					Accumulated amortization	Accumulated amortization Code	Life			Current-year amortization
LAND	01/01/1992	000'59						A	10 000			
LAND IMPROVEMENTS	06/01/1988	45,767					45,767	45,767 A	20.000			
1996 LAND IMPROV.	01/01/1996	23,643					7,686	Ą	40.000		•	591
									ľ			
											1	
TOTALS		134,410		ļ			53,453	54,044			,	591
*Assets Retired												
9X9024 1 000												

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1,700 431. 1,314 23 48. 70 53 53 224 302

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36-2755109

NAT'L TRAINING AND INFORMATION CENTER

**Description of Property** 

Current-year depreciation Current-year amortization Current-year 179 expense MA CRS class ACRS Life 5 000 3 000 20 000 20 000 20 000 20 000 5 000 5 000 7 000 20 000 5 000 5 000 5 000 5 000 20.000 20 000 20 000 20 000 20 000 Ę Conv Me Code SLA SL SL SL  $_{
m SI}$ SLSL ST SL  $_{
m SL}$ SL SLSLSL Beginning Ending
Accumulated Accumulated
depreciation depreciation Accumulated Accumulated amortization 4,599 290,861 2,765 4,075 1,509 000'09 370 888 3,189 2,013 2,826 2,939 8,500 772 1,126 897 3,248 2,294 10,796 2,826. 347 3,285 2,598 2,939 6,800 1,078 1,056 10,796 3,189 724 844 835 2,294 2,013 60,000 290,861 3,024 3,773 3,332. 1,050 2,826 2,939 8,500 2,157 9,200 60,000 450 1,400 depreciation 10,796. 2,013 950 1,050 4,480 6,035 2,294 3,021 290,861 Basis for Basis Reduction 179 exp reduction in basis 100 000 100.000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100.000 100 000 100 000 4,480. 100 000 100 000 Bus % Unadjusted Cost or basis 2,939 8,500 2,157 9,200 1,050. 2,013 3,332 450 950 1,400 3,021 2,826 1,050 10,796 60,000 6,035 290,861 2,294 Cost or basis 11/17/2003 08/27/2003 08/11/2005 11/20/2006 12/11/2006 06/01/1986 06/01/1988 12/01/1992 Date placed in service 03/19/2003 09/23/2003 10/10/2003 09/18/2003 07/01/1992 10/01/1992 11/01/1992 01/01/1993 3/01/1993 06/01/1995 06/01/1996 Date placed in service Subtotals . . . . . . . . . . . . . . . . Less Retired Assets . . . . Asset description Asset description GENERAL DEPRECIATION DESKTOP TAPE AUTOL COMPUTER EQUIPMENT COMPUTER EQUIPMENT COMPUTER EQUIPMENT **AMORTIZATION** DEPRECIATION Less Retired Assets TELEPHONE SYSTEM Listed Property BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV *Assets Retired JSA 9X9024 1 000 Subtotals. PROJECTOR BUILDING TOTALS. SOFTWARE TOTALS PRINTER LAPTOP

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1,045

1,363

11,391

1,271

Current-year depreciation

Current-year 179 exbense

ACRS CRS class class

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730

3,914 1,157

20 000 20 000 20 000

SL SL

SL SL  $_{
m SI}$ SLSLSLSL

1,365

1,838 1,346

Life

Me-thad Conv

545 418 373 465 607 341 382 300 331 395

4,142

Beginning Ending Accumulated depreciation depreciation 818. 670 3,588 1,220 1,613. 1,156 7,249 529 620 607 199 1,034 618 809 627 223 175 193 197 6,525 2,450 4,500 3,800 1,900 2,310 2,726 2,090 1,866 2,326 3,036. 1,703 1,910. 1,499. 1,657 depreciation 2,900 20,710 1,200 1,974 Basis for Basis Reduction 179 exp reduction in basis 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 100.000 100 000 100 000 100 000 100 000 100 000 100 000 100 000 8ns Unadjusted Cost or basis 2,310 2,726 2,090 2,900 4,500 3,800 1,900 1,866 2,326 3,036 1,703 1,910 1,499 2,450 20,710 1,657 6,525 1,974 1,200 Date placed in 101/1997 01/01/1998 08/02/2000 07/31/2000 11/13/2001 12/18/2002 07/16/2002 03/16/2007 04/10/2007 06/19/2007 07/09/2007 08/01/2007 06/10/2008 Subtotals 7002/11/60 12/31/2007 06/10/2008 06/10/2008 06/10/2008 07/01/2008 NAT'L TRAINING AND INFORMATION CENTER Less Retired Assets . . . . . . . . . . . . . . . . service Asset description Description of Property GENERAL DEPRECIATION TOTALS..... 4 Z LAPTOP-T2400 15 4N LAPTOP-U100 12 1WX TAPE BACKUP&SERVER LAPTOP-T2400 15 4N WIDE SCREEN LAPTOP **AMORTIZATION** DEPRECIATION Less Retired Assets PRINTER-IR10231F LAPTOP-T2400 15 Listed Property BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV BUILDING IMPROV DESKTOP TOWER DESKTOP TOWER COMPUTER Subtotals COPIER LAPTOP

10 36 14 AM 8/2/2010

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amortization Current-year

Life

Accumulated Accumulated amortization amortization code

Cost or basis

Date placed in service

Asset description

55556

*Assets Retired JSA 9X9024 1 000

TOTALS. .

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36-2755109

NAT'L TRAINING AND INFORMATION CENTER

Description of Property
GENERAL DEPRECIATION

DEPRECIATION													
Asset description	Date placed in service	Unadjusted Cost or basis	% sng	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me-	Life	ACRS C	MA Current-year CRS 179 class expense	Current-year depreciation
			100.000			2,939.	245	833		5 000		١	588
масвоок	12/02/2008	1,998	100 000			1,998	33	433 SL		5 000			400
CELL PHONES	11/23/2008	1,575	100 000			1,575	19	244 SL		000 4			225
MISC EQUIPMENT	12/31/2008	697	100 000			697	269	TS 269		5 000			
MACBOOK LAPTOP&APP	06/02/2009	1,766.	100 000			1,766		7S 90Z		000 \$			206.
IKEA - FURNITURE	01/31/2009	1,333	100 000			1,333		175 ST		000 6			175
2 MACBOOK LAPTOPS	09/14/2009	2,763	100 000			2,763		184 SL		2 000			184
MACBOOK LAPTOP	12/31/2009	1,983	100 000			1,983		18		2 000	-		
											+		
											-		
Less Retired Assets													
Subtotals		554,302											
Listed Property			-	!									
Less Retired Assets													
Subtotals													
AMORTIZATION													
	Date	Cost						Ending		-			
Asset description	placed in service	basis			,		Accumulated amortization	Accumulated amortization Co	Code	11	٠.	,	Current-year amortization
										Т		•	
									1	<del>-  </del>		1	
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TOTALS									_	7		1.	
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### Form **8868**

(Rev April 2009)*

## Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

Internal Revenue S	Service Prile a separate application for each return.	
<ul> <li>If you are f</li> </ul>	filing for an Automatic 3-Month Extension, complete only Part I and check this box	
<ul> <li>If you are f</li> <li>Do not comple</li> </ul>	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (or te Part II unless you have already been granted an automatic 3-month extension on a	n page 2 of this form). n previously filed Form 8868.
Part   Auto	matic 3-Month Extension of Time. Only submit original (no copies needed).	
	required to file Form 990-T and requesting an automatic 6-month extension - check	this box and complete
Part I only		
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use For ome tax returns.	m 7004 to request an extension of
one of the re electronically i returns, or a c	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month turns noted below (6 months for a corporation required to file Form 990-T). However, the substitution of the form 990-T. Instead, you must submit the fully completed the details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file.	owever, you cannot file Form 8868 orms 990-BL, 6069, or 8870, group d and signed page 2 (Part II) of Form
Type or	Name of Exempt Organization	Employer Identification number
print	NAT'L TRAINING AND INFORMATION CENTER	36-2755109
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.	
due date for	810 NORTH MILWAUKEE AVENUE	
filing your return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
instructions.	CHICAGO, IL 60642-4103	
Check type o	f return to be filed (file a separate application for each return):	
X Form 990		Form 4720
Form 990		Form 5227
Form 990		Form 6069
Form 990		Form 8870
	are in the care of ▶ MARINA SELIKOVA	
Telephone  If the organ  If this is for	No. ▶ 312 676-2812 FAX No. ▶  nization does not have an office or place of business in the United States, check this because a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box . ▶	ox
names and Ell	Ns of all members the extension will cover.	
until	st an automatic 3-month (6 months for a corporation required to file $08/15$ , $2010$ , to file the exempt organization return for the organization's return for:  calendar year $2009$ or tax year beginning, and ending, and ending	
	year is for less than 12 months, check reason: Initial return Final return	
nonrefun	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative dable credits. See instructions.	3a \$
b If this ap	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated	tax payments
	clude any prior year overpayment allowed as a credit.	3b \$ 0.
c Balance	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if requ	
	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	
instructio		3c \$
	are going to make an electronic fund withdrawal with this Form 8868, see Form 845	
for payment in		Far. 9969 (Eq., 4.000)
For Privacy A	ct and Paperwork Reduction Act Notice, see Instructions.	Form <b>8868</b> (Rev. 4-2009)