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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

Open to Public Inspending

Department of the Treasury Internal Revenue Service

		nue Service		The organization	may have to us	e a co	py of this return to s	satisfy state repo	orting require	ements.	Oler	30 (O 15/4)	વૃદ્ધિ પ્રસંગ	cim;
	For the	e 2009 calend	dar year,	or tax year begin	ning		, 20	009, and end	ing			,		
		applicable:		С						D Empl	loyer Iden	tification N	ımber	
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	\vdash	ial return	See specific	NASHVILLE,	TN 3720	19				61	5-350	0008-0		
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<u> </u>		exempt statu			(insert no.)		4947(a)(1) or	r527	4			_		
<u>J</u>				OYD.COM	r-	-		1		p exemption				
K		of organization	X Corpor	ation Trust	Association	Ott	er >	L Year of Form	nation 19	99 N	State of	legal domic	ile TN	
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Activities & Governance				if the organization				disposed of n	nore than	25% of it		S.		_
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<u>~</u> §				nt voting member		erning	pody (Part VI,	line (b)			5	 		$\frac{4}{14}$
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	8	Contributions	and gran	nts (Part VIII, line	16)				-	FIIOI IE	at	Cu	Helit Tea	<u></u>
II B	I		-	iue (Part VIII, line	•				-			 		
∠ §		-		art VIII, column (and	 .7d)		-	209	,376.	 	145,0	198
≨ ≗			-	III, column (A), lu	•					5,478		5	, 565, 9	
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	ł.			nsation, employe				ines 5-10)	-	1,668	.230	1	,499,1	113
99	i .			ng fees (Part IX,						1,000	, 230.	 	<u>, 155, 1</u>	
Expenses				•			•		2376	7.4.2				
ង្គ	b b	Total fundrais	HIIGEEXPO	nses (Part IX, co	lumn (D), lin	e 25)	-			32, 32,00				
	17	Other expens	es (Pari	E.C.E.IVAE	nes 11a-11d	, 11f-	24f)			1,414	·		.,278,9	
	18	Total expens	est Add T	nes 13-17 (must	equal Part I)	X, col	umn (A), line 2	5)		3,676	•		3,500,3	
	19	Revenue less		Subtract line 1	8 from line	12				2,011	<u>,368.</u>	2	,210,6	<u>547.</u>
8	1		6	EP 1 9 2010	18				Beg	jinning o	f Year	Er	nd of Year	r
e de la	20	Total assets	(2) H-X,-I	ne_16)						L6,995	,385.	19	0,097,0	051.
Net Assets or Fund Belances	21	Total liabilitie			T					259	,738.		106,0	009.
25		-		ances Subtract I	ine 21 from I	line 2	0			16,735	.647.	18	3,991,0	042.
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		Under penaltie	s of periury.	I declare that I have e	xamined this retu	Jrn. ind	luding accompanying	schedules and s	statements, a	nd to the be	st of my k	nowledge a	nd belief, it is	s
		true, correct, a	ind churplete	I declare that I have e Declaration of prepar	er (other than of	ficer) is	s based on all inform	ation of which pro	eparer has a	ny knowledg	ė			
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He	re	Signature	of officer	1			· · · · · · · · · · · · · · · · · · ·			Date /				
		► DR. 3	r.B. B	OYD III					PRE	SIDENT	1			
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RA	A For	Privacy Act	and Pape	rwork Reduction	Act Notice,	see t	ne separate ins	structions.	((L TEEA01	113L 12/2	29/09 F	orm 990	(2009)
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Forn	1 990 (2009)	THE R.	H. BOYD COM	MPANY				62-17	8424	4	F	age 2
1201	Sta	atement o	f Program Ser	ice Accompli	shments							
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2			dertake any signif	icant program se	rvices during the y	ear which we	re not listed on t	the prio				
		r 990-EZ? .		•			•			Yes	X	No
	•		new services on S									
3	-		ase conducting, oi	-	t changes in how	it conducts, ar	ny program serve	ces?		Yes	X	No
			changes on Schee									
4	and 501(c)(4) organizat	urpose achievemei tions and section 4 , if any, for each p	1947(a)(1) trusts	are required to rea	ree largest pr port the amou	ogram services nt of grants and	by expe allocati	nses. S ons to	Section	n 501 (, the t	c)(3) otal
	a (Code:) (E)	xpenses \$ 2	402 747 11	ncluding grants of	\$) (Rev		<u> </u>	5 10	19 7	78)
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4	<u>e Total prog</u> i	ram service	expenses >	2,402,	147.						_	

Form **990** (2009) THE R. H. BOYD COMPANY 62-1784244 Page 3 Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х 1 2 X Is the organization required to complete Schedule B, Schedule of Contributors? ... 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III 5 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to 6 Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х 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 X 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V 10 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or Х X as applicable...... 11 • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI . . • Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part 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 the organization's liability for uncertain tax positions under FIN 48? If Yes, 'complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12AWas the organization included in consolidated, independent audited financial statement for the tax No Yes year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional. 12 A 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 **b** 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* X 14b 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 Х 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 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 X

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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 .

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18

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Form 990 (2009) THE R. H. BOYD COMPANY

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 organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	Х	
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
ì	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	d 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 with a disqualified person during the year? If 'Yes,' complete Schedule L, Part 1	25a		<u>X</u>
1	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 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
i	a 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? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b	Х	<u> </u>
	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	-	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38	X	

BAA

Form 990 (2009)

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable.... O 1 b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.... c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c X (gambling) winnings to prize winners?. 2 a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X 26 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X 3 a this return? b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)?. 4a **b** If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Х 5 a 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 c 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 6h deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a Х provided to the payor? . 7b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?. . . d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е X 7 f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? **7** q 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a b Did the organization make any distribution to a donor, donor advisor, or related person? 91 10 Section 501(c)(7) organizations. Enter 10 a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 b

BAA Form 990 (2009)

12b

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

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

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Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing i	sody and Ma	nagement							
_							1 - 1	-l		Yes	No
		number of votir	-	-	-	•••	. 1a	4			
		e number of votir	•	•			. 1b				
2	Did any officer, d	officer, director, lirector, trustee c	trustee, or key e r key employee	mployee have a	family relati	onship or a busines	s relationship w	ith any other	2		X
3	Did the o	organization dele rs, directors or tr	gate control ove ustees, or key e	r management omployees to a n	duties custon nanagement	narıly performed by company or other p	or under the direrson?	ect supervision	3		X
4		organization mak		•	_				4	_	<u>X</u>
		prior Form 990				rsion of the organiz	ation's assats?	• • • • •	5	İ	Х
6		organization bect organization ha							6		X
7a	Does the	e organization ha g body? .	ve members, st	ockholders, or o	ther persons	who may elect one	or more member	ers of the	7a		х_
b	Are any	decisions of the	governing body	subject to appro	oval by memb	ers, stockholders, o	or other persons	۶	7b		X
8	Did the o		emporaneously	document the n	neetings held	or written actions t	ındertaken durii	ng the year by		i	
а	The gove	erning body?							8a	X	
b	Each co	mmittee with aut	hority to act on	behalf of the go	verning body	?			8b		X
9	Is there	any officer, direction's mailing ad	tor or trustee, o	r key employee provide the nan	listed in Part	VII, Section A, who	o cannot be rea	ched at the	9		Х
Sec						about policies n		y the Internal			
Reve	enue Code	e.)			(22)						
										Yes	No
10 a	Does the	e organization ha	ve local-chapte	s, branches, or	affiliates?	•	•		10a		X
t	If 'Yes,' and brar	does the organizations to ensure the documents to ensure the second seco	ation have writt heir operations	en policies and are consistent v	procedures g	overning the activiti	es of such char	iters, affiliates,	10b		
		•				s of its governing be	-		11	Х	
11 4	Describe	ın Schedule O t	he process, if a	ny, used by the	organızatıon	to review this Form	990. SEE S	CHEDULE O	<u> </u>	: :	
		e organization ha				•		•	12a	Х	
t	Are office to confli	ers, directors or cts?	trustees, and k	ey employees re	quired to disc	close annually intere	ests that could (give rise	12b	Х	
C	Does the Schedul	e organization re e O how this is o	gularly and consione SEE	sistently monitor SCHEDULE (and enforce	compliance with th	e policy? If 'Yes	s,' describe in	12c	-	
13	Does the	e organization ha	ve a written wh	istleblower polic	y?			•	13	Х	
14	Does the	e organization ha	ive a written do	cument retention	and destruc	tion policy?			14	Χ	(جيسانسن
15	Did the persons	process for deter , comparability d	mining compen ata, and conten	sation of the foll poraneous subs	owing persor stantiation of	ns include a review the deliberation and	and approval by d decision?	/ independent			
	_				-	ial SEE SCHED	ULE O		15 a	Х	
t	Other of	ficers of key emp	oloyees of the o	rganızatıon					15b		X
	If 'Yes' t	o line 15a or 15t	o, describe the p	rocess in Sched	dule O (See	instructions)				5 · 索	
16 a	Did the entity du	organization inve uring the year?	st in, contribute	assets to, or pa	articipate in a	joint venture or sir	nılar arrangeme	nt with a taxable	16a		X
ŀ	in joint v	has the organiza venture arrangen vith respect to su	nents under app	licable federal ta	procedure re ax law, and to	equiring the organiz aken steps to safeg	ation to evaluat uard the organi	e its participation zation's exempt	16b		
Sec	tion C.										
17	List the	states with which	a copy of this	Form 990 is req	uired to be fi	ed NONE					
18	Section inspection	6104 requires ar	organization to you make these	make its Forms available Che	s 1023 (or 10 ck all that ap	24 if applicable), 99 ply	90, and 990-T (5	01(c)(3)s only) a	vaılab	le for	public
		n website	Another's			request					
19	Describe stateme	e in Schedule O nts available to t	whether (and if he public S	so, how) the ord EE SCHEDUI	janization ma E O	ikes its governing d	ocuments, conf	lict of interest po	licy, a	nd fina	ancial
20	State th	e name, physica	l address, and t	elephone numbe	er of the pers	on who possesses	the books and r	ecords of the org			

BAA

Form 990 (2009)

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.											
(A)	(B)			(6				(D)	(E)	(F)	
Name and Title	Average hours		_		_	hat appl		Reportable compensation from	Reportable compensation from	Estimated amount of other compensation from the	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	compensation from the	
		ual tr	tiona		nploy	t con	"			organization and related organizations	
		ustee	trust		ee	npens					
		"	ee			ated					
DR. A. CHARLES BOWIE											
DIRECTOR	0	X						3,000.	0.	0.	
DR. NEHEMIAH DAVIS											
DIRECTOR	0	Х	<u> </u>		ļ		_	3,000.	0.	0.	
DR. B.W. NOBLE	,	,,				l		2 000	0.	0	
DIRECTOR DR. G. THOMAS TURNER	0	X			 			3,000.	· · · · · · · · · · · · · · · · · · ·	0.	
DIRECTOR	0	х						3,500.	0.	0.	
DR. T.B. BOYD III	· · · ·	 "		┢		 		37300.	<u> </u>		
PRESIDENT	20	Х		X				0.	547,000.	0.	
			\vdash		<u> </u>		├				
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TEEA0107L 11/10/09

Form 990 (2009) THE R. H. BOYD COMPANY									62-17842	
Part VII Section A. Officers, Directors, Trust		(ey	Em			es,	and			
(A) Name and Title	(B) Average	Posit	uon (e	() check	•	hat ac	(vlac	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week		_	Officer			Former	compensation from the organization (W-2/1099-MISC)	compensation from related organization: (W-2/1099-MISC)	amount of other
					_					
								-		
						:				
1 b Total	<u>'</u>			·			>	12,500.	547,000	0.
2 Total number of individuals (including but not limite from the organization ► 0	ed to the	se li	stec	l ab	ove)) wh	o re	ceived more than	\$100,000 in repo	ortable compensation Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such i	r or trus	tee,	key	em	ploy	ee,	or h	ighest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater trindividual	eportable than \$15	e co 50,00	mpe 00?	nsa If '}	tion 'es'	and com	l oth <i>plet</i>	er compensation le Schedule J for	from such	4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc	compens	satio	n fr	om .	any erso	unre	elate	ed organization fo	r services	5 X
Section B. Independent Contractors								·	· · · · · · · · · · · · · · · · · · ·	
Complete this table for your five highest compensa compensation from the organization	ted inde	pen	deni	coı	ntra	ctors	s tha	it received more t	han \$100,000 of	
(A) Name and business addres	ss							(B Description	of Services	(C) Compensation
O Table and the second				1						
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		ıımı	ted	to t	nose	e IISt	eo a	above) wno receiv	rea more than	

1961	Statement of Revenue		-			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
8	1a Federated campaigns 1a			10001100		0.12, 0.10, 0.1011
ANT	b Membership dues 1b				:	· · · · · · · · · · · · · · · · · · ·
S S	c Fundraising events 1c				!	
RA'S	d Related organizations 1d					
ਭੂ≨	e Government grants (contributions) 1e					
SIS	· · · · · · · · · · · · · · · · · · ·					
	f All other contributions, gifts, grants, and similar amounts not included above					
E 0	g Noncash contribus included in lns 1a-1f: \$					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	h Total. Add lines 1a-1f					
핗		Business Code				
PROGRAM SERVICE REVENUE	2a					_
#	b	L				
ᅙ	c					
<u> </u>	d					
RAM	e					
õ	f All other program service revenue	L				
-	g Total. Add lines 2a-2f					
	3 Investment income (including dividend other similar amounts)	ls, interest and	145,098.			145,098.
	4 Income from investment of tax-exemp	t bond proceeds. ►	143,030.			110,030.
	5 Royalties	► bona proceeds				
	(i) Real	(ii) Personal				
	6a Gross Rents . 374,006					
	b Less: rental expenses 7,852					33.48
	c Rental income or (loss) 366, 154					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	d Net rental income or (loss)		366,154.		,	366,154.
	7a Gross amount from sales of (i) Securities	(ii) Other				A Committee of the comm
	assets other than inventory					
	b Less: cost or other basis					
	and sales expenses					
	c Gain or (loss). d Net gain or (loss)			and the second		
						The second second
핅	8a Gross income from fundraising events (not including \$					
OTHER REVENU	of contributions reported on line 1c).	•				
2	See Part IV, line 18	a				
풀	b Less: direct expenses	b				
°۱	c Net income or (loss) from fundraising	events <u></u>				
	9a Gross income from gaming activities. See Part IV, line 19		La de la companya della companya della companya de la companya della companya del			
		a				
	b Less: direct expenses .	bl	A Carlo Carlo Carlo Carlo			a feel to be stated
ľ	c Net income or (loss) from gaming act	vities				
	10a Gross sales of inventory, less returns and allowances	a 8,731,572.				1. 计多数系统
	b Less cost of goods sold	b 3,531,794.				
	c Net income or (loss) from sales of inv		5,199,778.	5,199,778.		
	Miscellaneous Revenue	Business Code				THE PRINCIPAL OF THE PR
	11a					
	b					ļ
ļ	c				-	1
	d All other revenue		<u></u>			
	e Total. Add lines 11a-11d	•		F 100 770		F11 050
	12 Total revenue. See instructions	▶	T 5,/11,030.	5,199,778.	0.	511,252.

Statement of Functional Expenses

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

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

	All other organizations must comp				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.	682,757.	682,757.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	39,533.	39,533.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members .			·	
5	Compensation of current officers, directors, trustees, and key employees	12,500.	11,436.	1,064.	0.
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.	0.	0.	0.
7	Other salaries and wages	1,245,766.	846,130.	399,636.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	136,919.	92,996.	43,923.	
10	Payroll taxes .	103,928.	70,588.	33,340.	
11	Fees for services (non-employees)				
á	n Management				
t	Legal L	44,776.		44,776.	
(Accounting	70,787.		70,787.	
•	Lobbying			and the second of the second o	
6	Prof fundraising svcs. See Part IV, In 17				
f	Investment management fees				
ġ	g Other . L				
12	Advertising and promotion	40,142.	6,798.	33,344.	
13	Office expenses .	90,456.	19,986.	70,470.	
14	Information technology				
15	Royalties	18,265.		18,265.	
16	Occupancy	61,803.	61,803.		
17	Travel .	132,847.	67,714.	65,133.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,502.	13,502.		
20	Interest	12,448.		12,448.	
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	132,484.	126,570.	5,914.	
23	1	31,583.		31,583.	
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
;	a PROFESSIONAL SERVICES	211,598.	41,937.	169,661.	
1	MISCELLANEOUS	167,931.	107,231.	60,700.	
	MANUSCRIPT COST	166,208.	166,208.		
	d COLLECTION EXPENSE	47,558.	47,558.		
(EQUIPMENT RENTAL & MAINTENANCE All other expenses	36,592.		36,592.	
	Total functional expenses. Add lines 1 through 24f	3,500,383.	2,402,747.	1,097,636.	0.
26		3,300,303.	2,302,131.	1,051,030.	0.
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2009)

্রির্বি 🂢 💮 Balance Sheet (A) Beginning of year (B) End of year 20,235 13,847. 1 5,327,320 2 6,072,307. Savings and temporary cash investments 3 3 Pledges and grants receivable, net 1,036,997. 4 Accounts receivable, net . . . 1,069,826 Receivables from current and former officers, directors, trustees, key employees, 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L Notes and loans receivable, net . 7 8 Inventories for sale or use . 9 Prepaid expenses and deferred charges. 3,925,421. 10a Land, buildings, and equipment: cost or other basis 10a Complete Part VI of Schedule D 3,337,746. 3,407,323. **b** Less: accumulated depreciation. . 10b 587,675. 10 c 11 11 Investments - publicly-traded securities 12 12 Investments - other securities See Part IV, line 11. 13 13 Investments - program-related. See Part IV, line 11 495,310. 566,068 14 14 Intangible assets 6,604,613 15 8,140,844. Other assets. See Part IV, line 11 15 19,097,051. 16,995,385 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 26,952 17 15,539. Accounts payable and accrued expenses . . . 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 22 90,470. 232,786 23 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.. 25 259,738 26 106,009. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34. 18,991,042. 16,735,647. 27 27 Unrestricted net assets. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets. Q R Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, and equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 16,735,647. 33 18,991,042. 33 Total net assets or fund balances 19,097,051. 16,995,385 34 Total liabilities and net assets/fund balances . Form 990 (2009) BAA

Pan X Financial Statements and Reporting Yes No X Accrual Other 1 Accounting method used to prepare the Form 990. Cash If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2b b Were the organization's financial statements audited by an independent accountant? c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, 2 c review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Both consolidated and separate basis Separate basis Consolidated basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Х За **b** If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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Form 990 (2009)

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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.

OMB No 1545-0047

2009

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Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

THE R. H. BOYD COMPANY 62-1784244 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after X 9 June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II С Type III — Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?. 11 g (i) a family member of a person described in (i) above? 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations h (v) Did you notify (i) Name of Supported Organization (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the (vi) Is the (vii) Amount of Support rganization in col (i) listed in your governing document? e organization col (i) of your support? anization in col (i) organized in the Yes No Yes No Yes No

BAA 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

13.0	(Complete only if you checke	•	5. 7. or 8 of Par	t I.)	-X.X.X.X		·				
Sec	ion A. Public Support			· · · · · · · · · · · · · · · · · · ·							
begir	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total			
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')										
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					·					
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge										
4	Total. Add lines 1-through 3										
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)										
6	Public support. Subtract line 5 from line 4			3							
Sec	tion B. Total Support										
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total			
7	Amounts from line 4										
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources										
9	Net income from unrelated business activities, whether or not the business is regularly carried on .										
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)										
11	Total support. Add lines 7 through 10										
12	Gross receipts from related activ	vities, etc. (see in	structions)			L	12				
	First five years. If the Form 990 organization, check this box and	l stop here		ond, third, fourth,	or fifth tax year a	is a section 5	01(c)(3)	▶ 🗍			
	tion C. Computation of Pu					т					
	Public support percentage for 20	· · · · · · · · · · · · · · · · · · ·				-	14	<u>%</u>			
	Public support percentage from					٠ ـ ـ					
16 a	33-1/3 support test — 2009. If the and stop here. The organization	e organization did qualifies as a pu	d not check the biblicly supported	ox on line 13, an organization.	id the line 14 is 33	3-1/3 % or mo	re, ched	k this box			
t	33-1/3 support test — 2008. If the and stop here. The organization				a, and line 15 is 3	33-1/3% or m	ore, che	ck this box			
17 a	17a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.										
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- id-circumstances'	and-circumstanc test The organ	es' test, check this nization qualifies a	s box and stop he as a publicly supp	e re. Explain in orted organiza	i Part IV ation	how the			
	Private foundation. If the organ	ization did not ch	eck a box on line	e, 13, 16a, 16b, 17				or 990-EZ) 2009			
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Schedule A (Form 990 or 990-EZ) 2009 THE R. H. BOYD COMPANY Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only	, if you checked	the box on line	e 9 of Part I.)
----------------	------------------	-----------------	-----------------

Sec	tion A. Public Support						
	idar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').	(a) 2003	(b) 2000	(6) 2007	(u) 2000	(6) 2003	0.
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	1,737,984.	1,690,162.	1,827,398.	8,308,240.	8,731,572.	22,295,356.
3	Gross receipts from activities that are not an unrelated trade or business under section 513				•		0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5. Amounts included on lines 1, 2, 3 received from disqualified			1,827,398.	8,308,240.		
b	persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	8,358.	9,440.	3,777.	66,461.	0. 56,215.	
c	: Add lines 7a and 7b	8,358.	9,440.	3,777.	66,461.	56,215.	144,251.
8	Public support (Subtract line				1. 1. 1. 1. 1. 1.		
	7c from line 6.)			15			22,151,105.
Sec	tion B. Total Support		<u> </u>	<u> </u>	·		
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6	1,737,984.	1,690,162.		8,308,240.		
	or Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	597,514.	537,094.	555,777.			
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
	Add lines 10a and 10b	597,514.	537,094.	555,777.	652,217.	519,104.	2,861,706.
11	Net income from unrelated business activities not included inline 10b,						-/
	whether or not the business is regularly carried on .						0.
	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
13 14	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiz I stop here		nd, third, fourth,	or fifth tax year a		0. 0. 25,157,062.
13 14	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990	is for the organiz I stop here		nd, third, fourth,	or fifth tax year a		0. 0. 25,157,062. (3) ►
13 14 Sec	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organiz I stop here blic Support F	'ercentage				0. 0. 25,157,062.
13 14 Sec 15	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	is for the organized stop here blic Support F 009 (line 8, column	Percentage n (f) divided by li			s a section 501(c	0. 0. 25,157,062. (3) ►
13 14 Sec 15 16	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	is for the organized stop here blic Support F 009 (line 8, column 2008 Schedule A,	Percentage n (f) divided by li Part III, line 15	ne 13, column (f)		s a section 501(c	0. 0. 25,157,062. (3) 88.1%
13 14 Sec 15 16	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupulic support percentage for 20 Public support percentage from	is for the organized stop here blic Support F 009 (line 8, column 2008 Schedule A, vestment Incor	Percentage n (f) divided by li Part III, line 15 ne Percentag	ne 13, column (f)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	s a section 501(c	0. 0. 25,157,062. (3) ► □
13 14 Sec 15 16 Sec	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupulic support percentage for 20 Public support percentage from tion D. Computation of Investment income percentage	blic Support F 2008 Schedule A, vestment Incolor for 2009 (line 10c,	Percentage n (f) divided by li Part III, line 15 ne Percentag column (f) divide	ne 13, column (f); e ed by line 13, colu	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	15 16	0. 0. 25,157,062. (3) ► □ 88.1 % 83.7 %
13 14 Sec 15 16 Sec 17 18	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage for 20 Public support percentage from tion D. Computation of Inv	blic Support F 009 (line 8, column 2008 Schedule A, vestment Incol for 2009 (line 10c, from 2008 Schedule organization did not	Percentage n (f) divided by III Part III, line 15 ne Percentag column (f) divide ile A, Part III, line check the box on	ne 13, column (f); e ed by line 13, column 17 line 14, and line 15	ımn (f)) ıs more than 33-1/	15 16 17 18 3%, and line 17 is n	0. 0. 25,157,062. (3) ► □ 88.1 % 83.7 % 11.4 % 15.8 %
13 14 Sec 15 16 Sec 17 18 19 a	whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pupulic support percentage from the Explain of Investment income percentage investment income percentage a 33-1/3 support tests — 2009. If the	blic Support F 009 (line 8, column 2008 Schedule A, vestment Incom for 2009 (line 10c, from 2008 Schedule organization did not boox and stop here the organization de k this box and sto	Percentage n (f) divided by ling Part III, line 15 me Percentage column (f) divided le A, Part III, line check the box on and the organization of the check a bop here. The organization column (f) divided not check a bop here.	eed by line 13, column (f); e17 line 14, and line 15 n qualifies as a p x on line 14 or 19 nization qualifies a	umn (f)) Is more than 33-1/2 ublicly supported Ia, and line 16 is as a publicly supp	s a section 501(c 15 16 17 18 3%, and line 17 is norganization more than 33-1/3 orted organizatio	0. 25,157,062. 03) 88.1% 83.7% 11.4% 15.8% oot X %, and line 18

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part III, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.	Schedule A	(Form 990 o	r 990-EZ	2009	THE R	. н.	BOYD	COMP	ANY				62-178	34244		Page 4
	1 3 E a	Suppleme	ental Int	formati	i on. Con	plete	this p	part to	provide	the e	explanatio	ns requ	ired by	Part II,	line 10);
	·	Part II, lin	e 17a c	or 17b;	and Par	t III, I	ine 12	. Prov	ide any	other	additiona	il inforn	nation.	see ins	truction	<u> </u>
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SCHEDULE D (Form 990)

2009

OMB No. 1545-0047

Organical distribution

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions

THE R. H. BOYD COMPANY

Employer Identification number

			62-1784244
19819	Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other Similar Fur to Form 990, Part IV, line 6.	nds or Accounts Complete if
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate contributions to (during year)		
	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do	nor advisors in writing that the assets held in d	lonor advised Yes No
	funds are the organization's property, subject		
	used only for charitable purposes and not for purpose conferring impermissible private ben		r any otherYes No
Pen	Conservation Easements Compl	ete if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held b	y 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 certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizat last day of the tax year	ion held a qualified conservation contribution in	n the form of a conservation easement on the
			Held at the End of the Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation ease	ements	. 2b
C	Number of conservation easements on a cert	ified historic structure included in (a) .	2c
	Number of conservation easements included		2d
3	Number of conservation easements modified,	transferred, released, extinguished, or termina	ated by the organization during the tax
	year ►		
4	Number of states where property subject to c	onservation easement is located >	
5	and enforcement of the conservation easeme		YesNo
6	Staff and volunteer hours devoted to monitor during the year ▶	ing, inspecting, and enforcing conservation eas	sements
7	Amount of expenses incurred in monitoring, during the year ▶	inspecting, and enforcing conservation easeme	ents \$
8	Does each conservation easement reported of $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	on line 2(d) above satisfy the requirements of s	ection Yes No
9	In Part XIV, describe how the organization repor include, if applicable, the text of the footnote conservation easements	ts conservation easements in its revenue and expe to the organization's financial statements that	ense statement, and balance sheet, and describes the organization's accounting for
Par	Organizations Maintaining Collection Complete if the organization and	ections of Art, Historical Treasures, o swered 'Yes' to Form 990, Part IV, line	or Other Similar Assets e 8.
1 a	If the organization elected, as permitted unde treasures, or other similar assets held for put the text of the footnote to its financial statem	blic exhibition, education, or research in further	ment and balance sheet works of art, historical rance of public service, provide, in Part XIV,
t	If the organization elected, as permitted under treasures, or other similar assets held for pul amounts relating to these items	er SFAS 116, to report in its revenue statemen blic exhibition, education, or research in further	t and balance sheet works of art, historical rance of public service, provide the following
	(i) Revenues included in Form 990, Part VII	I, line 1	- \$
	(ii) Assets included in Form 990, Part X		* \$
2	If the organization received or held works of amounts required to be reported under SFAS	art, historical treasures, or other similar assets 3 116 relating to these items:	for financial gain, provide the following
a	Revenues included in Form 990, Part VIII, lin	ne 1	- \$
Ł	Assets included in Form 990, Part X		•\$ •\$

Part Will Investments—Land, Buildings, and Equipment. See Form 990, Part X c Leasehold improvements 28,273 1,185. 29,458 d Equipment 20,581 20,581 0. e Other 3,337,746. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

BAA

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 THE R. H. BOYD COMPANY	62-178	4244	Page 4
ිලා	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)	[
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments	. 1		
5	Donated services and use of facilities	·		
6	Investment expenses	Ì		
7	Prior period adjustments	Ì		
,	Other (Describe in Part XIV)	Ì		
٩	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
	Reconciliation of Revenue per Audited Financial Statements With Revenue per		N/A	
1	Total revenue, gains, and other support per audited financial statements	. 1	217 21	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	1 1			
	<u> </u>	<u> </u>		
	Recoveries of prior year grants			
	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investments expenses not included on Form 990, Part VIII, line 7b . 4a	:		
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	. 5		
Peli	Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Retu	irn N/A	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
t	Prior year adjustments			
C	Other losses			
C	Other (Describe in Part XIV).			
E	Add lines 2a through 2d	2 e		
3	Subtract line 2e from line 1.	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	8.38		
ā	Investments expenses not included on Form 990, Part VIII, line 7b			
t	Other (Describe in Part XIV)			
	: Add lines 4a and 4b	. 4c		
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5_		
Pa	Supplemental Information			
Com line infor	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this mation	t IV, lines s part to p	1b and 2b; F provide any a	'art V, dditional
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Schedule D (Form 990) 2009

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scheanie D	(Form 990) 2009 THE R. H. BOYD COMPANY	62-1/84244	Page 5
Dara XIV	Supplemental Information (continued)		
	Supplemental mornation (continued)		
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Pariting General Information on Grants and Assistance

H. BOYD COMPANY

THE R.

Name of the organization

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

2009

OMB No. 1545-0047

क्षेत्रकात १८ १९५ विभित्र विवाहन्त्रकारिकास

Employer identification number

62-1784244

Schedule 1 (Form 990) 2009 **≗** □ (h) Purpose of grant or assistance **A** SUNDAY SCHOOL CONVENTION Rand Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form COMMITTEE MEETINGS XYes 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 (g) Description of non-cash assistance : 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? : (f) Method of valuation (book, FMV, appraisal, other) SEE PART IV TEEA3901L 02/10/10 ö d (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. : (d) Amount of cash grant 9,000 592,553 BAA 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 (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations 13-5562417 501 (C) (3) 58-1413015|501 (C) (3) (P) EIN Enter total number of other organizations NATIONAL BAPTIST SUNDAY CHURCH S 6717 CENTENNIAL BLVD 475 RIVERSIDE DR STE 800 COMMITTEE ON THE UNIFORM SERIES. 1 (a) Name and address of organization or government 1111 1111 l NASHVILLE, TN 37209 1 ١ NEW YORK, NY 10115 1 1 ١ 1 ١ 1 ١ ١ 1 1 1 1 1 1 ~

Schedule I (Form 990) 2009 THE R. H. BOYD COMPANY

Chedule I (Form 990) 2009 THE R. H. BOYD COMPANY

Chedule I (Form 990) In additional space is needed.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed. BOYD COMPANY

(f) Description of non-cash assistance Randing Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) __THE_R.H. BOYD COMPANY GRANTS FUNDS FOR SPECIFIC PROGRAMS OF THE RECIPIENT (d) Amount of non-cash assistance PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED. 39,533. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance ORGANIZATIONS. SCHOLARSHIPS

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Schedule 1 (Form 990) 2009

SCHEDULE J (Form 990)

Compensation Information

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

OMB No 1545-0047

Employer identification number 62-1784244

office in Figure ne region

Department of the Treasury Internal Revenue Service Name of the organization

THE R. H. BOYD COMPANY

section 53.4958-6(c)?

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Patt Questions Regarding Compensation Yes No 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII. Section A. line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain . 1 b 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: X 4 = a Receive a severance payment or change-of-control payment? 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 40 c Participate in, or receive payment from, an equity-based compensation arrangement? If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. 5a a The organization? 5t **b** Any related organization? If 'Yes' to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6 a a The organization? 61 b Any related organization? If 'Yes' to line 6a or 6b, describe in Part III For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III. 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If 'Yes,' describe in Part III 8 Х If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

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

Schedule J (Form 990) 2009

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Schedule J (Form 990) 2009 THE R. H. BOYD COMPANY

[Data of Figure 1] Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

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

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

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	Denemts	(D)-(D)	Form 990 or Form 990-EZ
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ВАА			TEEA4102L 02/	02/02/10		Scher	Schedule J (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 2009

Name of the organization

or 990-EZ.

Department of the Treasury Internal Revenue Service

্ৰাভানা জন্মনাত প্ৰস্ৰাহ্মনাত Employer identification number

Schedule L (Form 990 or 990-EZ) 2009

THE R. H. BOYD COMPANY						62	2-178	3424	4			
Excess Benefit Transaction Complete if the organization answ	ons (sect wered 'Yes'	on 501	l (c)(3) an n 990, Part I	d section V, line 25a	501(c)(4 or 25b, or 1	4) organıza Form 990-EZ,	ations Part V	only , line	/). 40b.			
1 (a) Name of disqualified person	1				(b) Descriptio	n of transaction					(c) Cor	rected?
				· ,· · · · · · · · · · · · · · · ·							Yes	No
			<u></u>									
2 Enter the amount of tax imposed on the	e organizat	tion mar	nagers or dis	squalified p	ersons du	ring the year	under					
section 4958 3 Enter the amount of tax, if any, on line	 2. above.	reimburs	sed by the o	roanization	1		•	► \$ ► \$				
Loans to and/or From Inte Complete if the organization answ	rested P	ersons	5.				ine 38a					
(a) Name of interested person and purpose	(b) Loan the orga	to or from inization?	(c) Or principal	iginal amount	(d) B	alance due	(e) in d	lefault?	by bo	proved ard or oittee?	(g) W agree	/ritten ment?
	То	From					Yes	No	Yes	No	Yes	No
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Grants or Assistance Ben Complete if the organization	efitting l	nteres	ted Perso	► \$ ns. m 990 F	Part IV I	ine 27	W. V	\$12 G				
(a) Name of interested person			ship between in the organiza	terested persor			:) Amoun	t and ty	pe of as	sistano	e	

	1	-										
	_		-									
Business Transactions In Complete if the organization	volving I on answe	nteres ered'Ye	ted Perso	ns. n 990. P	art IV. III	l ne 28a. 28	b. or	28c.				
(a) Name of interested person	(b) Re	elationship sted persor organizati	between and the	(c) Amoi transact	unt of		cription		action		organi	aring of zation's nues?
TENDET IN DOVE WELL											Yes	No
JERRILYN BOYD-HADLEY	SISTE	K OF PI	RESIDEN		46,080.	THERAPY S'	VCS F	OR EM	IPLYE	ES		X
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

©DOT IN FREE INSTRUCTION

Employer identification number

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

► Attach to Form 990.

THE R. H. BOYD COMPANY [62-1784]	4244
FORM_990, PART III, LINE 1 - ORGANIZATION MISSION	
THE R.H. BOYD COMPANY ("COMPANY") WAS FORMED IN 1999 AND BEGAN OPERAT	<u> </u>
AND IS EXEMPT FROM TAXATION UNDER SECTION 501(C)(3) OF THE CODE. THE	COMPANY IS
AFFILIATED_WITH_TWO_OTHER_501(C)(3)_ENTITIES: THE NATIONAL BAPTIST_PU	BLISHING BOARD,
WHICH WAS FOUNDED IN 1986, AND THE NATIONAL BAPTIST SUNDAY SCHOOL TRA	INING_UNION_AND
CONGRESS, WHICH WAS FOUNDED IN 1906. THE COMPANY PUBLISHES LITERATURE	E_RELEVANT_TO
BAPTISTS AND OTHER CHRISTIANS OF ALL DENOMINATIONS. THE CHRISTIAN LI	TERATURE
CREATED_IS_WRITTEN, DEVELOPED, AND INTERPRETED BY AFRICAN-AMERICANS TO	O_REFLECT_THEIR
OWN EXPERIENCES AND EXPERIENCES OF THEIR PEOPLE. THE COMPANY'S MISSIC	ON_IS_TO
PROVIDE BIBLICALLY SOUND LITERATURE THAT IS RELEVANT TO THE AFRICAN-AI	MERICAN
COMMUNITYIN_ADDITION_TO_PRINTING_AND_PUBLISHING, THE COMPANY_ALSO_C	OFFERS_A
COMPLETE RANGE OF PRODUCTS FROM SUNDAY CHURCH SCHOOL LITERATURE AND VI	ACATION BIBLE
SCHOOL_PROGRAMS_TO_LEADERSHIP_DEVELOPMENT_AND_SMALL_GROUP_MINISTRY_AID	DS, WORKSHOPS
AND_HYMNALS.	
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS AND THE DIRECTOR OF FI	NANCE FOR THEIR
REVIEW. THE COMPANY ALSO PROVIDES THE 990 TO OUTSIDE COUNSEL FOR REVI	<u>EW.</u>
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C	CONFLICTS
BOARD MEMBERS HAVE AN OBLIGATION TO VOLUNTARY DISCLOSE A CONFLICT OF	INTEREST TO THE
BOARD. THE BOARD HAS AN OBLIGATION TO INVESTIGATE ANY CONFLICT OF INT	EREST_THAT
COMES TO ITS ATTENTION.	
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CE	O, EXEC. DIR., OR TOP MO
AN INDEPENDENT CONSULTANT IS ENGAGED TO CONDUCT AN ANALYSIS OF THE APP	PROPRIATE
COMPENSATION FOR THE PRESIDENT/CEO. THIS REPORT IS REVIEWED WITH THE	VOTING
MEMBERS.	

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
THE R. H. BOYD COMPANY	62-1784244
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
UPON REQUEST	
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Schedule O (Form 990) 2009

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Name of the organization	Employer identification number
THE R. H. BOYD COMPANY	62-1784244
	-
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Schedule **O** (Form 990) 2009

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

 Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. P See separate instructions. Related Organizations and Unrelated Partnerships

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2009

OMB No. 1545-0047

Employer identification number 62-1784244

THE R. H. BOYD COMPANY				62-1784244	44
Dani Identification of Disregarded Entities (Complete if the	f the organization ansv	le organization answered 'Yes' to Form 990, Part IV, line 33.)	990, Part IV, line	33.)	
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Daries Identification of Related Tax-Exempt Organizations		(Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had the fax year.)	d 'Yes' to Form 990), Part IV, line 34 b	ecause it had
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
NATIONAL BAPTIST PUBLISHING BOARD 6717 CENTENNIAL BLVD					
	RELIGIOUS PUBLISHING	LIN	501 (C) (3)	6	N/A
NATIONAL BAPTIST SUNDAY CHURCH SCHOOL 6717 CENTENNIAL BLVD					
<u> ILLE, </u>	CHURCH TRAINING	IN	501 (C) (3)	6	N/A
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	structions for Form 990.	<u> </u>	TEEA5001L 02/05/10	Schedu	Schedule R (Form 990) (2009)

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Schedule R (Form 990) 2009 THE R. H. BOYD COMPANY

Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related organizations treated as a partnership during the tax year.)

(J) General or managing partner? ŝ Yes Code V.UBI
amount in box
20 of Schedule
(For (H)
Disproportionate
allocations? Yes No Share of total income Share of end-of-year assets (E)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (D) Direct controlling entity (C)
Legal
domicile
(state or
foreign (B) Primary Activity (A)
Name, address, and EIN of related organization I 1 1

Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answers) Inc. 34 because if had one or more related organizations treated as a corporation or trust during the tax year.)	axable as a Cord organizations	rporation or Tr	ust (Complete or torporation or torporation)	if the organiz	ation answered 'Yoe tax year.)	a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, ations treated as a corporation or trust during the tax year.)	ırt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(B) (C) (Direct Direct Country) (C) (Direct Country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(H) Percentage ownership
RH BOYD PUBLISHING CORPORATION 6717 CENTENNIAL BLVD							
NASHVILLE, IN 37209	RELIGIOUS	Z E	A/N	C CORP	2,480,883.	2,353,635.	100.00
/FFF0/T-70							

Schedule R (Form 990) (2009)

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Schedule R (Form 990) 2009 THE R. H. BOYD COMPANY | Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

		-	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	Š
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV:	:-	ŀ	
a Receipt of (I) interest (II) annuities (III) royalties (IV) rent from a controlled entity		1a X	
b Gift, grant, or capital contribution to other organization(s)		1 b X	
c Gift, grant, or capital contribution from other organization(s).		1c	×
d Loans or loan quarantees to or for other organization(s)		13	×
e Loans or loan quarantees by other organization(s)	•		: ×
			:
f Sale of assets to other organization(s)			×
			: >
	:	5 .	< ;
h Exchange of assets		<u>-</u>	×
i Lease of facilities, equipment, or other assets to other organization(s)		1 !	×
j Lease of facilities, equipment, or other assets from other organization(s)			×
k Performance of services or membership or fundraising solicitations for other organization(s)	•	1 ×	×
		-	×
m Sharing of facilities, equipment, mailing lists, or other assets		T X	
n Sharin of haid amiliana		5	×
is original or paid employees	:		4
o Reimbursement haid to other organization for exhenses	:	10	×
		L	>
p Keimbursement paid by other organization for expenses		d	۲
			>
q Other transfer of cash or property to other organization(s).			<u>د </u> :
r Other transfer of cash or property from other organization(s)		1.	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ps and transaction thre	sholds.	-
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved	75
	200		
(1) RH BOYD PUBLISHING CORPORATION	A	367, 695	95.
(2) RH ROYD PUBLISHING CORPORATION	m	2,221,434	34.
1			
(3)		}	
(4)			
(5) BAA TEEA5003L 02/05/10	Sched	Schedule R (Form 990) (2009)	60

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.

Name, address, and EIN of entity Primary activity (B) Primary activity (State or foreign 50(0)(3) country) (D) Are all parting section 50(0)(3) country) organization organization organization organization organization organization organization.	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	(G) Code V-UBI amount In box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	al or ging
			Yes No		Yes No	(200.)	Yes	ટ
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