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# RNF 10/15/2010 9 54 AM Form

Department of the Treasury Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2009 Open to Public

Form 990 (2009)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection 06/30/10 07/01/09 For the 2009 calendar year, or tax year beginning and ending Please Check if applicable C Name of organization Employer identification number use IRS RELIGION NEWSWRITERS FOUNDATION Address change label or 31-1650883 Doing Business As Name change print or type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 614-891-9001 P.O. BOX 2037 Specific Termination City or town, state or country, and ZIP + 4 506,648 G Gross receipts \$ Instruc-WESTERVILLE 43086 Amended return OH tions. F Name and address of principal officer H(a) Is this a group return for Application nending affiliates? Are all affiliates included? If "No." attach a fist (see instructions) **X** 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or Tax-exempt status WWW.RELIGIONWRITERS.COM H(c) Group exemption number ▶ 1999 Type of organization X Corporation Trust Association M State of legal domicile Year of formation Part I Summary 1 Bnefly describe the organization's mission or most significant activities TO ADVANCE PUBLIC UNDERSTANDING OF RELIGION IN THE MEDIA Governance 2 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) Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (ORIDE (2) 7a b Net unrelated business taxable income from Form 990-T, liner<del>S</del> 7b Prior Year **Current Year** OSC 035 NOV 0 1 2010 700 499,732 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 240 5,557 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c 700,275 505,289 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 183,051 170,468 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 5,514 b Total fundraising expenses (Part IX, column (D), line 25) ▶ **473,543** 341,646 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 656,594 512,114 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -6,825 43,681 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 870,666 446,045 20 Total assets (Part X, line 16) 98,235 516,593 21 Total liabilities (Part X, line 26) 354,073 347,810 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, ç and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer Type or print name and title Preparer's identifying number Check if Preparer's Paid signature 10/15/10 P00062806 employed > Preparer's **CPAs** Cotterman-Wilson EIN Firm's name (or yours **Use Only** 951 High Street if self-employed), address, and ZIP + 4 **▶** 614-781-6174 Worthington, OH 43085 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

			vice Accomplish	nents				
	Briefly describe the organization		CMANDING OF	DEL TOTON	- T.1 MITE	. MED TA		
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2	Did the organization undertake		t program services dunn	g the year which v	vere not listed	on		
	the prior Form 990 or 990-EZ?	•		•••		•••		Yes X No
3	If "Yes," describe these new so Did the organization cease coil			how it conducts	any nmoram			
•	services?	iddoding, or ma	ke sigillioziti Granges ii	riiow it conducts,	any program			Yes X No
	If "Yes," describe these chang	es on Schedule			••			
4	Describe the exempt purpose			-				
	Section 501(c)(3) and 501(c)(4					amount of grants	and	
	allocations to others, the total	expenses, and	revenue, it any, for eacr	program service	геропеа.			
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- '0 Form 990 (2009) RELIGION NEWSWRITERS FOUNDATION 31-1650883 Page 3 Part IV **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 Schedule A X 2 X Is the organization required to complete Schedule B, Schedule of Contributors? 2 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 X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete X Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," X complete Schedule D. Part I. 6 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III 8 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," 9 X 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or X quasi-endowments? If "Yes," complete Schedule D, Part V 10 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, 11 X VII, VIII, IX, or 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 related 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 statements for the tax year? If "Yes," complete X Schedule D, Parts XI, XII, and XIII. 12 12A Was the organization included in consolidated, independent audited financial statements for the tax year? No X If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 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, X business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 14b 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 X 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services X on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Form 990 (2009)

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

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

If "Yes," complete Schedule G, Part III

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

- 'O Form 990 (2009) RELIGION NEWSWRITERS FOUNDATION 31-1650883 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 X 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X employees? If "Yes," complete Schedule J 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines X 24b through 24d and complete Schedule K. If "No," go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to 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 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 990-EZ? If "Yes," complete Schedule L, Part I 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X 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? If "Yes," complete Schedule L, Part III 27 X Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X Schedule L, Part IV 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, X Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N. Part II

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I

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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

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<u>Pa</u>	art V 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		1				İ
	U.S. Information Returns Enter -0- if not applicable	1a	<u></u>	<del></del> -	-		ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	L		-	:	ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able					
2-	gaming (gambling) winnings to prize winners?	1 1	ı	• •	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax						ĺ
ь	Statements, filed for the calendar year ending with or within the year covered by this return  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2a	L		2b		İ
Ü	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			••	20		<b>-</b>
	instructions)						ĺ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	У					ĺ
	this return?				3a		$\mathbf{x}_{-}$
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	опtу					
	over, a financial account in a foreign country (such as a bank account, secunties account, or other financial	iai					
	account)?				4a		X
b	If "Yes," enter the name of the foreign country:						İ
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	ık					
	and Financial Accounts.						•
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			•	5a		X
b C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding		•	•	5b		
·	Prohibited Tax Shelter Transaction?	iig			5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			••	- 50		
	organization solicit any contributions that were not tax deductible?				6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or	•	• •			
	gifts were not tax deductible?				6b		L
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ds					ĺ
	and services provided to the payor?				7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				_		
_	required to file Form 8282?	ا . ـ ا	ſ		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year.  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal forms.	7d	ļ		-		ĺ
е	benefit contract?	Jilai			7e		İ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	)			7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	;					
	required?			•	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						ĺ
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						İ
	organization, have excess business holdings at any time during the year?				8		
9	Sponsoring organizations maintaining donor advised funds.						ĺ
a	Did the organization make any taxable distributions under section 4966?				9a		<del>                                     </del>
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a	1				į
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a					ĺ
11	Section 501(c)(12) organizations. Enter:		I.		1		ĺ
·· a	Gross income from members or shareholders	11a					ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources against				1		
	amounts due or received from them )	11b					ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	41?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		_			

-· '() Form 990 (2009) RELIGION NEWSWRITERS FOUNDATION

31-1650883

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

<u> </u>	BIOTI A. Governing Body and Management			
1a	Enter the number of voting members of the governing body	ſ	Yes	No
b	Enter the number of voting members that are independent  1b	$\dashv$		
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?			X
3		2		
3	Did the organization delegate control over management duties customanly performed by or under the direct			x
4	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		$\frac{\mathbf{x}}{\mathbf{x}}$
5	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
6	Did the organization become aware during the year of a material diversion of the organization's assets?  Does the organization have members or stockholders?	5		X
о 7а	$\cdot$	6		
/a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X	
<b>L</b>		7a	Λ	x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:			
а	The governing body?	8a	X	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
_	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
	etion B. Policies (This Section B requests information about policies not required by the Internal			
<u>Ke</u>	renue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	1		
	form?	11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	122		
	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		
Sec	tion C. Disclosure	1.05		
17	List the states with which a copy of this Form 990 is required to be filed  OH			
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    Own website    Another's website    Upon request			
10				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
20	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			
7.7	organization. ► DEBRA MASON P.O. BOX 2037 ESTERVILLE OH 43086-2037	51 A OO	1 ^	001
W	ESTERVILLE OH 43086-2037 (	\	. – 4	

# 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

Check this box if the organization	n did not compen	sate	any (	curre	nt of	fficer	, dire	ector, or trustee		·	
(A) Name and Title	(B) Average	B) (C) age Position (check all that apply						(D) Reportable			
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	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	
KEVIN ECKSTROM TRUSTEE		x						0	0	C	
CATHY LYNN GROSSI TRUSTEE	MAN	x						0	0	C	
STEVE BUTTRY TRUSTEE		x						0	0		
ANSLEY ROAN TRUSTEE		X						0	0		
DEBRA L MASON EXEC DIR		-		x				37,201	7,250	3,552	
STEVE MAYNARD PRESIDENT				x				0	0	(	
ROBERT MONG SECOND VP				x				0	0	(	
JEFF SHELER TREASURER				x				0	0	(	
ANN RODGERS SECOND VP		1		x				0	0		
ABE LEVY SECRETARY				x				0	0	(	
				-			-		<u> </u>		

<u>Pa</u>			tees	, Ke			yees	, and	d Highest Compensated E				
	(A) Name and Title	(B) Average	Pos	ition (		C) kallt	hat ap	ppły)	(D) Reportable	(E) Reportable		(F) imate	d
•		hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	am comp fro orga and	ount on other pensation the inization related	of Bon Bon On ed
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	•		_				_						
	·												
1b 2	Total Total number of individuals (inc	luding but not lim		to th	000	lictor		<u> </u>	37,201	7,250			3,552
	reportable compensation from t	_			036	13150	auc	(VC)	who received more dian \$10				
3	Did the organization list any for	mar officer direc	ntor c	e te i	ctoo	kov		lovo	o as highest companyated	-		Y	es No
4	employee on line 1a? If "Yes," of For any individual listed on line	complete Schedu	ıle Ji	for s	uch i	ndıvı	dual		•	_	3		X
•	the organization and related organization										4		x
5	Did any person listed on line 1a services rendered to the organi										5		x
	Consists the table for series									2400 000 6			
1 —	Complete this table for your five compensation from the organization	ation		ea inc	epe	naer	t cor	ırac					<u></u>
	Name and	(A) business address							Descript	(B) uon of services		Comp	C) ensation
									<del></del>				
		· · · · · · · · · · · · · · · · · · ·											
							,						
2	Total number of independent comore than \$100,000 in compen	="	-				to th	ose	listed above) who received			0	
													100 (200)

Income from investment of tax-exempt bond proceeds	Pa	rt V	III Stater	nent of Reve	nue					
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of fax-exempt bond proceeds 5 Royaltes  (i) Real (ii) Personal 6a Gross Rents b Less rental exps c Rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets other than investor) 800 b Less cator other base & sales exps 1, 359 c Gain or (loss) 7 Less of other base & sales exps 1, 359 d Net gain or (loss) 5 Royaltus  1, 359 c Gain or (loss) 7 Less of other base & sales exps 1, 359 d Net gain or (loss) 7 Less of other base & sales exps 1, 359 c Royaltus 7 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 5 Less direct expenses 6 Less cost of goods sold 7 Less direct expenses 7 Less direct expenses 7 Less direct expenses 8 Less direct expenses 9 Less direct expenses 9 Less direct expenses 10 Less cost of goods sold 11 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 11 Less direct expenses 12 Less direct expenses 13 Less direct expenses 14 Less direct expenses 15 Less direct expenses 16 Less direct expenses 17 Less direct expenses 18 Less direct expenses 19 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 10 Less direct expenses 11 Less direct expenses 12 Less direct expenses 13 Less direct expenses 14 Less direct expenses 15 Less direct expenses 16 Less direct expenses 17 Less dire	4	.,						exempt function	Unrelated business	excluded from tax under sections
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other similar amounts)  4 Income from investment of tax-exempt bond proceeds  Royalbes  (i) Real (ii) Personal  6a Gross Rents  b Less rental esps  c Rental inc or (loss)  d Net rental income or (loss)  b Less cost or other  base a sale exps  c Gain or (loss)  7 Gross amount from  sales of assets  (ii) Securities  (iii) Other  sales of assets  (iv) Cherry  800  b Less cost or other  base a sale exps  1,359  c Gain or (loss)  7 Sep and (loss)  6 of contributions reported on line 1c)  See Part IV, line 18  a b Less direct expenses  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less  returns and allowances  b Less cost of goods sold  b Less cost of goods sold  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busin Code  11a  b C C d All other revenue  a Total. Add lines 11a-11d	<u>~</u>	g	Total. Add line	es 2a-2f		<u> </u>				
Income from investment of tax-exempt bond proceeds		3	Investment inc	come (including o	ividend	ls, interest, and				
Second   Company   Compa			other similar a	mounts)		•	6,116			6,116
(i) Real   (ii) Personal		4	Income from in	nvestment of tax-	-exemp	t bond proceeds			·	
Ga Gross Rents   D   Less rental exps   C   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   D   Rental in core (loss)   Rental in core (loss		5	Royalties							
D   Less rental exps   C   Rental inc or (loss)   D				(ı) Real		(II) Personal				
C   Rental in cor (loss)		6a	Gross Rents						_	
d Net rental income or (loss)  7a Gross amount from sales of assets other than mentary b Less cost or other bass & sales exps c Gain or (loss)  7a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busin Code  11a b . c d All other revenue e Total. Add lines 11a-11d		b	Less rental exps	<u> </u>						
The composition of the composi		С	Rental inc or (loss)				_			
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b Less cost or other bass & sales exps c Gain or (loss) d Net gain or (loss)  3a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less, cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busin Code  11a b c d All other revenue e Total. Add lines 11a–11d		' a		(ı) Secuntie	s	——···				
bass & sales exps			other than inventory			800	<u> </u>		:	
c Gain or (loss)		b	Less cost or other							
d Net gan or (loss)			•						:	
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11a b c d All other revenue e Total. Add lines 11a–11d		С				-55				
(not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d				-	٠.	<u> </u>	-559	-559		
Contributions reported on line 1c)   See Part IV, line 18   a   b   Less direct expenses   b   c   Net income or (loss) from fundraising events   b   Less direct expenses   b   c   Net income or (loss) from gaming activities   b   Less cost of goods sold   b   c   Net income or (loss) from sales of inventory   b   Miscellaneous Revenue   Busin Code   11a   b   c   d   d   d   loss   d   d   d   loss   d   d   d   d   d   d   d   d   d	9	8a		-	nts					
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d	eni		-	• •						
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d	Rev									
c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d	10.				1		$\dashv$			
9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d	ott						-			
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b Less direct expenses b  c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d		9a			l l					,
c Net income or (loss) from gaming activities  10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d		<b>h</b>			ſ					
10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d					- (	utros				
returns and allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a b c d All other revenue e Total. Add lines 11a–11d					ing acu	vides .				
b Less. cost of goods sold b  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a  b  c  d All other revenue  e Total. Add lines 11a–11d		IVa		-	ا					
C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code  11a  b  C  d All other revenue  e Total. Add lines 11a–11d		h			1					
Miscellaneous Revenue         Busn Code           11a            b            c            d All other revenue            e Total. Add lines 11a−11d         ▶					. ~ .	enton.	┥			
11a b c d All other revenue e Total. Add lines 11a–11d										
b c d All other revenue e Total. Add lines 11a–11d		112	IVIISC		-	24311 000	7			:
c d All other revenue e Total. Add lines 11a–11d		_	•	•			-			
d All other revenue e Total. Add lines 11a–11d			• •						-	
e Total. Add lines 11a–11d		_	All other reven				<del></del>			
		-		•			1			
		12			ns.		505,289	-559	0	6,116

- 1

#### Part IX 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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		expenses	Acticial exhelipes	evherizes
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				<del>                                      </del>
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				H <del>111111111111111111111111111111111111</del>
•	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	37,201	27,028	6,757	3,416
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	102,069	81,145	20,924	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	12,656	9,872	2,531	253
9	Other employee benefits	8,165	6,369	1,633	163
10	Payroll taxes	10,377	8,093	2,076	208
11	Fees for services (non-employees):				
а	Management				
b	Legal	549		549	
С	Accounting	9,450		9,450	
đ	Lobbying .				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				·· · · · · · · · · · · · · · · · · · ·
15	Royalties	6 000	4 600	1 200	120
16	Occupancy	6,000 66,523	4,680	1,200	120 162
17	Travel	00,323	66,361		162
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	5,000	5,000		
19	Conferences, conventions, and meetings	3,000	3,000		
20 21	Interest				
21	· -	3,191	2,489	638	64
23	Depreciation, depletion, and amortization Insurance	3,191	2,405	030	
23	ilisurance				······
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
а	Education Stipends	71,383	71,383		
b	Correspondents	60,302	60,302		·-
С	Website Development	22,309	22,309		
d	Printing & Publications -	17,732	17,732		
е	Promotion/Advertising	15,461	15,461		
f	All other expenses	63,746	44,863	17,755	1,128
<u>25</u>	Total functional expenses. Add lines 1 through 24f	512,114	443,087	63,513	5,514
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				
)AA	fundraising solicitation				Form <b>990</b> (2009

Pa		(2009) RELIGION NEWSWRITERS FOUNDA	TION	31-1650883		Page <b>11</b>				
<u> </u>		Dalatice Officet		(A) Beginning of year		(B) End of year				
	1	Cash—non-interest bearing		152,843						
	2	Savings and temporary cash investments		698,230	2	365,812				
	3	Pledges and grants receivable, net			3					
	4	Accounts receivable, net		8,465	4	58,906				
	5	Receivables from current and former officers, directors, trustees, ke	y							
		employees, and highest compensated employees. Complete Part II	of							
		Schedule L			5					
	6	Receivables from other disqualified persons (as defined under section	on		f					
- 1		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	ete							
<u>"</u>		Part II of Schedule L			6					
#	7	Notes and loans receivable, net			7					
Assets	8	Inventones for sale or use			8					
4	9	Prepaid expenses and deferred charges		4,607	9	14,674				
•	10a	Land, buildings, and equipment: cost or			}					
ı		other basis. Complete Part VI of Schedule D 10a		769						
	b	Less accumulated depreciation 10b	71,	116 6,521	10c	6,653				
1.	11	Investments—publicly traded securities	•		11					
'	12	Investments—other securities. See Part IV, line 11	, , ,							
	13	Investments—program-related. See Part IV, line 11			13					
	14	Intangible assets .	•		14					
	15	Other assets See Part IV, line 11	•		15					
<u> </u>	16	Total assets. Add lines 1 through 15 (must equal line 34)		870,666		446,045				
	17	Accounts payable and accrued expenses		4,158	17	28,338				
·	18	Grants payable			18					
	19	Deferred revenue		504,757	19	69,800				
	20	Tax-exempt bond liabilities		20						
	21	Escrow or custodial account liability Complete Part IV of Schedule	D	21						
<u>≅</u>  2	22	Payables to current and former officers, directors, trustees, key								
<u>a</u>		employees, highest compensated employees, and disqualified								
<u> </u>		persons. Complete Part II of Schedule L			22					
2	23	Secured mortgages and notes payable to unrelated third parties			23					
2	24	Unsecured notes and loans payable to unrelated third parties			24					
	25	Other liabilities. Complete Part X of Schedule D		7,678		97				
	26	Total liabilities. Add lines 17 through 25	•	516,593	26	98,235				
es		Organizations that follow SFAS 117, check here ▶ X and								
일		complete lines 27 through 29, and lines 33 and 34.		054 050		0.45				
를   î	27	Unrestricted net assets		354,073	27	347,810				
<u>m</u>   3	28	Temporarily restricted net assets		**	28					
Ē  2	29	Permanently restricted net assets			29					
교		Organizations that do not follow SFAS 117, check here ▶								
5		and complete lines 30 through 34.								
: ا تک	30	Capital stock or trust principal, or current funds	•		30					
SS :	31	Paid-in or capital surplus, or land, building, or equipment fund			31					
¥  ∶	32	Retained earnings, endowment, accumulated income, or other fund	s	A	32	0.45				
<u>~</u> ।	33	Total net assets or fund balances		354,073		347,810				
<u> </u>	34	Total liabilities and net assets/fund balances		870,666	34	446,045				

Form **990** (2009)

Form	990 (2009) RELIGION NEWSWRITERS FOUNDATION 31-1650883		Pa	ge <b>12</b>
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		•	
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in		[	
	Schedule O.			
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		F	
	Separate basis Consolidated basis Both consolidated and separate 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 Audit Act and OMB Circular A-133?	3a		X
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	3ь		

Form **990** (2009)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization RELIGION NEWSWRITERS FOUNDATION

Employer identification number 31–1650883

P	rt I	Reas	on for Public Ch	narity	Status (All org	ganizatior	ns must co	omplete	this p	art.) S	ee ins	struction	ns.		
he (	orgar	nization is not	a private foundation b	ecause	ıt is: (For lines 1 t	through 11, c	heck only or	ne box.)							
1		A church, cor	nvention of churches,	or asso	ciation of churche	s described	ın section 1	70(b)(1)( <i>i</i>	A)(i).						
2	$\Box$	A school des	cribed in section 170	(b)(1)(A	)(ii). (Attach Sche	edule E.)									
3	$\sqcap$		a cooperative hospita				ction 170(b)	(1)(A)(iii)							
4	П	A medical res	search organization of	perated	in conjunction with	h a hospital	described in	section 1	I70(b)(1)	(A)(iii).	Enter th	ne hospita	al's name.		
		city, and state			•	•						•			
5		An organizati	on operated for the b	enefit of	a college or unive	ersity owned	or operated	by a gove	emmenta	al unit de	escribed	lin	•		
	_	_	b)(1)(A)(iv). (Comple		•			.,							
6	$\Box$		te, or local governme			escribed in s	ection 170(	b)(1)(A)(v	·).						
7	Ħ	•	on that normally rece	•			•	<i>,</i> , ,, ,,	•	n the ae	neral pu	ublic			
		-	section 170(b)(1)(A)		•		<b></b>			50					
8			trust described in se			omplete Par	t II.)								
9	П	-	on that normally rece			•	•	ntribution	s. memb	ership f	ees, and	d aross			
-		_	activities related to it			•	•			•		•			
			gross investment inc	•	•		•	٠,							
			ne organization after				•								
10	$\Box$		on organized and ope			, ,, ,		•	a)(4).						
11	X	_	on organized and ope		•	-	•	•	• • •	carry ou	it the				
	_	-	one or more publicly s		•		•			•		tion			
			eck the box that desc												
		a X Type		oe II		e III–Functio			d l		e III–Ot	her			
е	X		his box, I certify that t						or more						
			r than foundation mar	_								ction			
			section 509(a)(2).			•		•							
f		If the organiza	ation received a writte	en deterr	nination from the	IRS that it is	a Type I, Ty	pell, or T	ype III s	upportin	g				
			check this box								•				
g		Since August	17, 2006, has the or	ganızatıc	n accepted any g	gift or contrib	ution from a	ny of the					•		
•		following per		_				-							
			who directly or indire	ectly con	trols, either alone	or together	with persons	s describe	d in (II)					Yes	No
			pelow, the governing	•		_	•		• • •				11g(i)		X
		, ,	member of a person	-						•	•	•	11g(ii)	<u> </u>	X
			ontrolled entity of a po		• • •	i) above?				•	•	••	11g(iii		Х
h			ollowing information a		• • • •	•						•			
(1)	Name	e of supported	(iı) EIN		(iii) Type of o		(IV) Is the	organization	(v) Did y	ou notify	(vi)	Is the	(vii) Am	ount of	
		anızatıon			(described or		1 ''	sted in your		nization in		tion in col	supp		
					above or IR		governing	document?		of your oort?		ized in the			
					(See made	ictions))	Yes	No	Yes	No	Yes	No			
RE	LI	GION NE	WSWRITERS	ASS	CIATION	501	(c) (6)								
			54-148692	27	7		X		x		X		4	43,	087
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ota	1_											1	4	43,	087

Schedule A (Form 990 or 990-EZ) 2009 RELIGION NEWSWRITERS FOUNDATION 31-1650883 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (c) 2007 (a) 2005 (b) 2006 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar Net income from unrelated business activities, whether or not the business is regularly carned on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 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

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

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

Schedule A (Form 990 or 990-EZ) 2009

18

Part III Support Schedule for Organizations Described in Section 509(a)(2)

<u> </u>	(Complete only if you che	ecked the box of	on line 9 of Pa	rt I.)			
	ction A. Public Support	1.1.0005	4 ) 0000	1 1 200=	1 4 11 5555	1 1 2 2 2 2 2	
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</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						<u> </u>
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			ļ			
7a	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 persons that						
	exceed the greater of \$5,000 or 1% of the		Ì				
	amount on line 13 for the year			ļ			
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support	<del>,</del>					
Ca	llendar 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 sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly 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, check this box and stop here	•	second, third, fourt	th, or fifth tax year a	as a section 501(c)	(3)	▶ [
Sec	tion C. Computation of Public Su	ipport Percent	age				
15	Public support percentage for 2009 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2008 Sche	dule A, Part III, line	15		<u> </u>	16	%
Sec	ction D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2009 (lir			column (f))		17	%
18	Investment income percentage from 2008 \$	Schedule A, Part III	, line 17	•		18	%
19a	33 1/3 % support tests—2009. If the organ			14, and line 15 is m	ore than 33 1/3 %,	and line	
	17 is not more than 33 1/3 %, check this bo	ox and <b>stop here.</b> T	The organization qu	alifies as a publicly	supported organiz	ation	▶ [
þ	33 1/3 % support tests—2008. If the organ						. —
	line 18 is not more than 33 1/3 %, check thi						• -
20	Private foundation. If the organization did	not check a box on	n line 14, 19a, or 19	b, check this box a	and see instructions	3	<u> </u>

Schedule A (Form 990 or 990-EZ) 2009 RELIGION NEWSWRITERS FOUNDATION Page 4 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **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
2009
Open to Public

Inspection

Schedule D (Form 990) 2009

Name of the organization Employer identification number RELIGION NEWSWRITERS FOUNDATION 31-1650883 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. 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 certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

1	Are there endowment funds not in the possession of the organization that are held and administered for the		
	organization by		Ye
	(i) unrelated organizations	3a(i)	
	(ii) related organizations	3a(ii)	
)	If "Yes" to 3a(II), are the related organizations listed as required on Schedule R?	3b	

Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other (c) Accumulated (d) Book value (investment) basis (other) depreciation 1a Land **b** Buildings c Leasehold improvements 77,769 71,116 6,653 **d** Equipment Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 6,653

Schedule D (Form 990) 2009

Part VII Investments—Other Securities. See Form 990,  (a) Description of security or category  (including name of security)  Financial derivatives	Part X, line 12. (b) Book value	(c) Method of value	Page 3
(including name of security)	(b) Book value	(c) Method of value	
Financial derivatives		Cost or end-of-year ma	
Financial derivatives		Cost or end-or-year ma	
· · · · · · · · · · · · · · · · · · ·			
Closely-held equity interests			
Other ~			
	-		
		,	
	-		
		····	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII Investments—Program Related. See Form 990,	Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valu	ation
		Cost or end-of-year ma	rket value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			***************************************
Part IX Other Assets. See Form 990, Part X, line 15.	-		*****
(a) Description			(b) Book value
			· · · · · · · · · · · · · · · · · · ·
<del></del>			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		•	
Part X Other Liabilities. See Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Amount		
Federal income taxes	(D) / tillouit		
Schiska Flexible Benefits	127		
MISCELLANEOUS	121		
Anthem Dependent W/H			
Advance From Related Party			
Mason Flexible Benefits	-30		
MOSON ETENTALE DENETICS			
	<del></del>		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	97	L.,	

organization's liability for uncertain tax positions under FIN 48.

<u>Sche</u>	dule D (Form 990) 2009 RELIGION NEWSWRITERS FOUNDATION 31-165	0883	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financial St	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	505,289
ż	Total expenses (Form 990, Part IX, column (A), line 25)	2	512,114
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-6,825
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Pnor period adjustments	7	
8	Other (Describe in Part XIV.)	8	560
9	Total adjustments (net). Add lines 4 through 8	9	560
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-6,265
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	
1	Total revenue, gains, and other support per audited financial statements	1	505,847
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
С	Recovenes of pnor year grants 2c		
d		558	
е	Add lines 2a through 2d	2e	558
3	Subtract line 2e from line 1	3	505,289
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		
b	Other (Describe in Part XIV )		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	505,289
Pa	irt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	512,112
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		•
а	Donated services and use of facilities 2a		
b	Pnor year adjustments 2b		
c	Other losses 2c		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	512,112
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV )	2	
	Add lines 4a and 4b	4c	2
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	512,114
	art XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b		
	2b, 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. Also complete		
	part to provide any additional information		
	art XI, Line 8 - Reconcilation of Changes - Other		
_B	OOK/TAX DIFFERENCE_LOSS ON_DISPOSAL	_ <u>\$</u>	<u> 558</u>
R	OUNDING	Ś	2
	<u> </u>	<u> </u>	<del>-</del>
P	art XII, Line 2d - Revenue Amounts Included in Financials	s - Other	
_B	<u> OOK/TAX DIFFERENCE_LOSS ON_DISPOSAL</u>	_ \$	_ <u>558</u>

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### SCHEDULE O (Form 990)

Department of the Treasury

### **Supplemental Information to Form 990**

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

Attach to Form 990.

2009 Open to Public

OMB No 1545-0047

Internal Revenue Service
Name of the organization

Employer identification number

RELIGION NEWSWRITERS FOUNDATION 31-1650883

Form 990, Part VI, Line 7a - Election of Members and Their Rights
YES

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
DISCLOSURE FORM FILED ANNUALLY. ALSO REQUIRED TO DISCLOSE AS THEY ARISE AT
BOARD MEETINGS.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
Starting salary as established with a Board Source comparison of average
salary for association nonprofits with a budget size of \$500,000-\$1,000,000
as reported by BoardSource. Middle of the average range was selected. The
board approved all base salaries. The same process was used to determine
salary for key employees, based on their job title (bookkeeper, associate
director/marketing director). Raises have occurred irregularly, usually
based on when funds were available an the length of time between raises.
For example, 5% raises have been granted when no raise was given for more
than two years. All raises were given equally to all staff.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Starting salary as established with a Board Source comparison of average salary for association nonprofits with a budget size of \$500,000-\$1,000,000 as reported by BoardSource. Middle of the average range was selected. The

Name of the organization

RELIGION NEWSWRITERS FOUNDATION

Employer identification number 31–1650883

board approved all base salaries. The same process was used to determine salary for key employees, based on their job title (bookkeeper, associate director/marketing director). Raises have occurred irregularly, usually based on when funds were available an the length of time between raises. For example, 5% raises have been granted when no raise was given for more than two years. All raises were given equally to all staff.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ See separate instructions. ▶ Attach to Form 990.

2009: OMB No 1545-0047

Open to Public Inspection

**Employer Identification number** 31-1650883

Direct controlling entity (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) N/A (e)
Public charity status
(if section 501(c)(3)) (e) End-of-year assets 11a Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section (d) Total income ဖ ပ (c)
Legal domicile (state
or foreign country) (c) Legal domicile (state or foreign country) \$ (b) Primary activity (b) Primary activity EX IN REL RELIGION NEWSWRITERS FOUNDATION 54-1486927 (a) Name, address, and EIN of related organization (a)
Name, address, and EIN of disregarded entity 43086 RELIGION NEWSWRITERS ASSOCIATION HO P.O. BOX 2037 WESTERVILLE Part # Part

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

Schedule R (Form 990) 2009

Part III	Part III ldentification of Related Organizations Taxable as a Partnership (Complete if the organization answered because it had one or more related organizations treated as a partnership during the tax year.)	ns Foundaria	a Part	nership (Completes as a partnership	nplete if the orgain during the ta	janization answe	ered "Yes" to Form 990, Part IV, line	m 990, Pa	art IV, line 34	rage 2
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(9) Share of end-of-year assets	(h) Dispro- portonate alloc ?	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?
	:		<u> </u>					-		
Part IV	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ins Taxable as elated organiza	a Corp	oration or Treated as a co	rust (Complete	if the organizati	on answered "Ye vear.)	es" to Forr	n 990, Part IV,	1
-	(a) Name, address, and EIN of related organization	(b) Primary activity	fore	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(b) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(9) Share of end-of-year assets	(h) of Percentage assets ownership	ntage ship
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Schedule R (Form 990) 2009 RELIGION NEWSWRITERS FOUNDATION 31-1650883		Page
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34,	" 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 NC
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?	isted in Parts II–IV?	
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a X
<b>b</b> Gift, grant, or capital contribution to other organization(s)		1b X
c Gift, grant, or capital contribution from other organization(s)		1c   X
d Loans or loan guarantees to or for other organization(s)		1d X
e Loans or loan guarantees by other organization(s)		1e X
f Sale of assets to other organization(s)		# X
g Purchase of assets from other organization(s)	-	1g X
		1h X
i Lease of facilities, equipment, or other assets to other organization(s)		1 X
i loses of familities commonst or other assets from other assentiantes)		
		×
Deformance of seasons or membership or fundamenta colonistical by other		
m Sharing of facilities equipment mailing lists or other assets		×
		╀
ii Stiating of paid employees		<b>4</b>
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>		10
p Reimbursement paid by other organization for expenses		
<ul> <li>q Other transfer of cash or property to other organization(s)</li> </ul>	:	
LI		1r   X
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	ered relationships and transaction thresholds.	
(a) Name of other organization	(b) Transaction Amou	(c) Amount Involved
(1) RELIGION NEWSWRITERS ASSOCIATION	a	55,49
NOTHELOGRA SCHULCHSWEIN NOTELIAG	E	9
NELIGION NENSINALIENS	HT	20,0
(3)		
(4)		
(5)		
(9)		
	Schedule R	Schedule R (Form 990) 200

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Part VI

31-1650883 Schedule R (Form 990) 2009 RELIGION NEWSWRITERS FOUNDATION Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Page 4

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 assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c)	(q)	(0)	(p)		€	L	(£)	
Name, address, and EIN of entity	Primary activity	Legal domicite	Are all partners	Share of	Disproportionate		Gener	alor
		(state or foreign country)	section 501(c)(3) organizations?		allocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ging er?
			Yes No	_	Yes No	т-	Yes	Š
							-	
	;							
						-,-,-		
·								
					_			
						Schedule R (Form 990) 2009	orm 990)	2009

F 1 4 7 Form **4562** 

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

### **Depreciation and Amortization**

(Including Information on Listed Property)

Identifying number

OMB No 1545-0172

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

	RELIGIO	N NEWSWRIT	TERS FOUNDATI	ON			31-	-165	0883
	ess or activity to which this form relates				-		•		-
	ndirect Depreciati								·
Pa		•	erty Under Section			ـ			
	-		ty, complete Part V	before you	com	plete Pa	rt I.	ī	050.000
1	Maximum amount. See the instruct							1	250,000
2	Total cost of section 179 property p	•	• • • • • • • • • • • • • • • • • • • •					2	000 000
3	Threshold cost of section 179 prope	•	•	ons)				3_	800,000
4	Reduction in limitation. Subtract line		•			_		4	
5	Dollar limitation for tax year Subtract line							5	
6	(a) Description	1 or property	(0) (0	st (business use	e only)	(C) (	Elected cos	1	
						<del></del> -			
_	Links discounts (Fatantha annual f				т_				
7	Listed property. Enter the amount fi				7	<u> </u>		T	
8 9	Total elected cost of section 179 pr							8	··.
9 10	Tentative deduction. Enter the sma		• ••			•		9	
10 11	Carryover of disallowed deduction f	•				A		10	
12	Business income limitation. Enter the				see ins	tructions)		11	
	Section 179 expense deduction Ad	•		ne 11 .	40	······		12	
13 Note	Carryover of disallowed deduction to Do not use Part II or Part III below to				13	L., .			
			nd Other Depreciat	ion (Do no	+ incl	udo liete	d prope	orty A	(See instr.)
14	Special depreciation allowance for					uue iiste	a prope		See msu.)
14	dunng the tax year (see instructions		iei tilali listeu property) pi	aced in Service	е				
15	Property subject to section 168(f)(1	•	•		•			14	
16	Other depreciation (including ACRS	•	•		• • •			15 16	2,857
			ide listed property.)	/See instr	ıction	nc )		1 16	2,637
	MACINO Depreciati	ion (Do not more	Section A	(See many	JULIOI	13.)			
17	MACRS deductions for assets place	ad in conjice in tay ve		ο				17	0
18	If you are electing to group any assets place	•		•	to .	baak basa <b>b</b>		! <i>'</i>	<u> </u>
10			rvice During 2009 Tax Y					stem	
		(b) Month and year	(c) Basis for depreciation		T	iai Bopio	Jidaion Oj	Stom	
	(a) Classification of property	placed in service	(business/investment use only-see instructions)	(d) Recovery period	(e) (	Convention	(f) Met	thod	(g) Depreciation deduction
19a	3-year property								
b	5-year property								
c	7-year property		4,66	4 7.0		HY	S	/L	333
d	10-year property								
е	15-year property	1							
f	20-year property				T				
g				25 yrs			S/L		
h	Residential rental			27 5 yrs		ММ	S/L		
	property			27 5 yrs	1	MM	S/L		
i	Nonresidential real			39 yrs	<u> </u>	MM	S/L		
	property					ММ	S/L		
	Section C—A	ssets Placed in Sen	vice During 2009 Tax Ye	ar Using the A	Alterna				
20a	Class life			T		•	S/L		
	12-year			12 yrs.	1		S/L		
	40-year			40 yrs	t	ММ	S/L		
	ert IV Summary (See ins	tructions.)	<u> </u>	1 40 910			. 5/1		<u> </u>
<del></del> 21	Listed property Enter amount from		<del></del>					21	
22	Total. Add amounts from line 12, lin	•	es 19 and 20 in column (	o), and line 21	. Enter	here		<u> </u>	
_	and on the appropriate lines of your		·					22	3,190
23	For assets shown above and place		•						
-	portion of the basis attributable to s		jean, order alo		23				
									<u> </u>