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SORWED JUN 15 2011

Form 990

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

20**09**

Open to Public Inspection

AF	or the	e 2009	calen	dar	<u>year, or</u>	tax ye	ar begin	nıng		0	7/01	, 2009, a	and (ending			0 (6/30,	20 10	
Ва	eck if app	olicable	Please	ÇN	ame of org	anization	ALBUC	UERO	UE AC	ADEMY	' FOI	R BOYS	TR	UST #1	1	D Employe	r identil	fication r	number	
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	Initial	return	See	_			LYNCH D			LOOR				<u> </u>		(609)	2/4-	8602		
	Terms	nated	Specific Instruc-		•		country, ar		ļ											
	Ameno		tions	PΕ	NNING'	ron,	NJ 08	534								G Gross red	eipts \$	2	2,540	,927.
	Applica	ation					rincipal off									H(a) is this e g		urn for	Yes	X No
L	_ pendm	'°	BANK	OF	AMERIC	A/THO	MAS MOC	RE 130	O MER	RILL L	YNCH	DRIVE,	3RD	FLOOR,		affiliates? H(b) Are all at			Yes	\vdash
_	T				TON, NJ				1,0,7,							, ,		_		
		empt sta		X	501(c) (3) ◀	(insert r	10)	4947(8	a)(1) or		527				II NO B	uach a is	st (see ins	vucuons)	
1	Websit	te 🕨	N/A					,					-,-			H(c) Group ex	emption r	number	<u> </u>	
K	Form o	f organia	zation		Corporation	on X	Trust	Associa	ation	Other	•		L	Year of for	rmatic	n 1959	M Stat	e of legal	domicile	MM
Pa	rt I	Sun	nmary								-									
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Activities & Governance	2	Check	this bo	x Þ	r if f	the orga	inization d	iscontini	ued its c	peration	s or di	sposed of	more	than 259	% of ı	its net asset	s			
<u>ن</u> مع	3	Numbe	r of vot	ting r	nembers	of the g	overning	body (Pa	art VI, lır	ne 1a)							3	1		2
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	7 a	Total g	ross ur	relat	ed busin	ess reve	enue from	Part VII	l, colum	n (C), lin	e 12						7a			0.
	b	Net un	related	busi	ness taxa	ible inco	ome from	Form 99	0-T, line	34 .							. 7b	1		0.
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	8	Contrib	utions	and	orants (P	art VIII	line 1h)							Ì			0.	 		0.
Revenue					_				• • •		• • •		• •	• • • • }			0.	 		0.
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Ř														2,695,		ļ	908,9			
	11	Other r	evenue	(Pa	rt VIII, co	lumn (A), lines 5	6d, 8c, 9	9c, 1 0e,	and Ale	IC.	- 1V E	سيليلا				0.	<u> </u>		0.
	12	Total re	evenue	- ad	d lines 8	through	11 (must	equal Pa	art Vأ∭,∢	column	A) In	F12)		181.		2,695,	450.		908	980.
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							rt IX, colu		1.2	16 16	YA	(B · 501	11 .	1891		·····	0.			<u> </u>
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×	b	Total fu	ındraısı	ıng e	xpenses,	Part IX	, column (D), line	25) ▶≬	<u> </u>										
ш	17	Other e	expense	es (P	art IX, co	lumn (A	(), lines 11	la-11d, 1	11f-24f) ^l	ستسسسا	-					48,	191.		21	,213.
	18	Total e	xpense	s A	dd lines 1	3-17 (m	ust equal	Part IX.	column	(A), line	25)		• •	[1,568,	040.	1	1.837	7,326.
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- 8		TOVEIN	10 1033	CAP	11303 00	ionact ii	116 10 1101	11 11116 12	• • • •			<u></u>		• • • • •				 		
Net Assets or Fund Balances																eginning of		 	nd of Y	
Sala	20		•		X line 16											28,030,		2	7,066	<u>,278.</u>
ξğ	21	Total li	abilities	(Pa	rt X, line :	26)											0.	<u></u>		0.
象군	22	Net as:	sets or	fund	balances	Subtra	act line 21	from line	e_20 .						2	28,030,	051.	2	7,066	,278.
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May	the IR	RS disci	ıss this	retu			rer shown											х	Yes	No
															•					

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions * JSA 9E1010 3 000

Form **990** (2009)

Forr	n 990 (2009)			85-6008015	Page 2
Pa	rt III State	ement of Program Service Ac	complishments		
1	SUPPORT (501 (C) (3	OF THE ALBUQUERQUE A	SHALL OPERATE EXCLUSIVE ACADEMY, AN EDUCATIONAL	ELY FOR EDUCATIONAL PURPO L ORGANIZATION DESCRIBED UCTED WITHIN THE EXEMPTION	IN SECTION
3	the prior Form If "Yes," desc Did the orga services? If "Yes," desc Describe the Section 501(mization undertake any signim 990 or 990-EZ? cribe these new services on Signization cease conducting, of the conducting of these changes on Schede exempt purpose achievement c)(3) and 501(c)(4) organization.	chedule O or make significant changes in hor ulle O ots for each of the organization's the ons and section 4947(a)(1) trusts	w it conducts, any program	
	allocations to	o others, the total expenses, a	and revenue, if any, for each progra	am service reported	
4a	TO SUPPOR ACADEMIC, STUDENTS. A POSITIVE	RT THE ALBUQUERQUE AND CREATIVE, MORAL AND THE ALBUQUERQUE AND FOR THE ALBUQUERQUE AND THE SET OF VALUES, A	49,166 Including grants of \$ CADEMY'S PURPOSE OF THE D PHYSICAL DEVELOPMENT CADEMY INSTILLS IN EVER MORAL, INTELLECTUAL, AN ,000 STUDENTS ENROLLED	OF Y STUDENT	
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	
4c	(Code) (Expenses\$	including grants of \$) (Revenue \$)
	0				

(Expenses \$

including grants of \$

1,649,166.

4d Other program services (Describe in Schedule O)

4e Total program service expenses ▶

) (Revenue \$

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	_		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D. Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	i	х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	-		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	-		Λ.
10	quasi-endowments? If" Yes, "complete Schedule D, Part V	40	x	
14	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	10		
11				v
_	VII, VIII, IX, or X as applicable	11_		Х
•	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		: : "Est	3.
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	1		.)
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	*	٠,	
•	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	-25		`
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ે હૈ	. ~	
	the organization's liability for uncertain tax positions under FIN 487 If "Yes," complete Schedule D, Part X		,	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"		*	-
	complete Schedule D, Parts XI, XII, and XIII	12		Х
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes, "complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

Form 9	990 (2009) 85-6008015			Page 4
Par	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 19 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	l	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		1	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No." go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
-	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		İ
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		 	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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			<u> </u>
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	120		<u> </u>
	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		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			<u> </u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			l
а	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	20a		$\vdash $
	Schedule L, Part IV	28b		x
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	200		
ŭ	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	_		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		<u> </u>
30	conservation contributions? If "Yes," complete Schedule M	20		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
٥,	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
J Z	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	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,	33		$\overline{}$
5 4	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	34	-	
55	Schedule R, Part V, line 2	25		·
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related	35		X
30	organization? If "Yes," complete Schedule R, Part V, line 2	26		v
37		36		<u>X</u>
31	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,			
				v
38	Part VI	37		Х
30	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20	,,	
	19? Note. All Form 990 filers are required to complete Schedule O		X .	(2000)
		rorm	990	(2009)

Par	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	, !		
	U.S. Information Returns Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		├
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0	'		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4-		
	account)?	4a		X
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			- ,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5 0		
6.	Prohibited Tax Shelter Transaction?	5c		
оa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		×
h	organization solicit any contributions that were not tax deductible?	Va		<u> </u>
D	- · · · · · · · · · · · · · · · · · · ·	6b		
7	gifts were not tax deductible?	- OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		x
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			-
	required to file Form 8282?	7c		x
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			
	benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		L
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	N.		
	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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	- 1		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from 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)			1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u></u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

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

Section A. Governing Body and Management

Seci	TOT A. Governing Body and Management			
		_	Yes	No
1a	Enter the number of voting members of the governing body 1a 2			
b	Enter the number of voting members that are independent 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
, a	of the governing body?	7a		х
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
b				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following	8a		x
a	The governing body?			X
b	Each committee with authority to act on behalf of the governing body?	8b		<u> </u>
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	0-		x
<u> </u>		9a		
	ion B. Policies (This Section B requests information about policies not required by the Internal			
Nevi	snue code j		Yes	No
40-		10a		X
	Does the organization have local chapters, branches, or affiliates?	iva		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	40h		
	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		v	
	form?	11	X	
11 A				<u> </u>
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
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	<u> </u>
13	Does the organization have a written whistleblower policy?	13	Х	
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	<u> </u>
	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		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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 X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization BANK OF AMERICA/THOMAS MOORE 1300 MERRILL LYNCH DR, 3RD FLOOR PENNINGTON	4, N	J 08	534
	(609) 274-8602		==	

JSA 9E1042 5 00

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 did not compensate any current officer, director, or trustee												
(A) Name and Title	(B) Average	Posit	ion (e		C) call t	hat app	 .lv)	(D) Reportable	(E) Reportable	(F) Estimated		
	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		
CARL M. ALONGI												
CO-TRUSTEE	15.00	X	l					0.	0.	0		
BANK OF AMERICA												
TRUSTEE	40.00		Х		_			110,410.	0	0		
									-			
							<u></u>					

Form **990** (2009)

9E1041 3 000

Part VII Section A. Officers, Directors, Tru	istees, Ke	y En	nple	oye	es,	and	Hig	ghest Compensa	ted Employee	s(continu	ed)	
(A)	(B)	_		•	C)			(D)	(E)		(F)	
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee		a Key employee	a Highest compensated a employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	com	Estimated amount of other compensation from the organization	
		stee	ustee			pensated	:	(**-271033-141100)		an	d relate anizatio	ed
				<u> </u>								
1b Total								110,410.		0.		0
2 Total number of individuals (including but not lim reportable compensation from the organization	ited to thos	e liste)		bov	e) w	ho re	ceiv	ved more than \$100	,000 in			
Toportable compensation were the organization			,						·		Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes, "complete Schedu	er, directo	or or	tru	ste	e, 1	кеу б	emp	oloyee, or highest	compensated	3	-	x
4 For any individual listed on line 1a, is the	sum of	report	lable	e c	omp	ensa	tion	and other comp	pensation from			
the organization and related organizations individual												х
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	or accru	ue co	omp	ens	atıo	n fro	om	any unrelated o	rganization for	. [х
Section B. Independent Contractors												
Complete this table for your five highest compensation from the organization	compensate	ed in	dep	end	lent	conf	trac	tors that received	I more than S	100,000	of 	
(A) Name and business addr	ess							(B) Description of sen	vices	(C Compen	•	
NONE		_					+					
							+			-	•	
2 Total number of independent contractors (in	cluding bi	ıt not	lim	nter	i to	thos	ie i	isted above) who	received			
more than \$100,000 in compensation from the	_					0	1				. 990	

Page 9

Pa	rt VIII	Statement of Revenue		85-6008015		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d	Federated campaigns				, , ,
Contribut and other	g	All other contributions, gifts, grants and similar amounts not included above . Noncash contributions included in lines 1a-11 \$ 0		-		
	h	Total Add lines 1a-1f	0.		,	<u>,</u>
eun	_					
Program Service Revenue	2a b c					
ᇤ	е					
Progra	f g	All other program service revenue	ŋ			
	3	Investment income (including dividends, interest, and other similar amounts)	762,345 0.		0.	762,345.
	5	Royalties · · · · · · · · · · · · · · · · · · ·	0			
	6a b	Gross Rents			· · · · ·	·
	d	Net rental income or (loss)	0			
	7a	Gross amount from sales of assets other than inventory Less cost or other basis (i) Securities (ii) Other 21,779,582.	•	,		
	c	and sales expenses	146,635.			146,635.
evenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)				
Other Reve	b c	See Part IV, line 18	. 0			
		Gross income from gaming activities See Part IV, line 19			Ł	
	b c	Less direct expenses	0.			
	10a	Gross sales of inventory, less returns and allowances				
		Less cost of goods sold	0.			
	1	· · · · · · · · · · · · · · · · · · ·			•	
	11a					
	b c					
	۵	All other revenue				
	e	Total Add lines 11a-11d	0			
	12	Total Revenue See instructions ▶	908,980		0.	908,980.

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	·····		0.50000	general expenses	
•	organizations in the U.S. See Part IV. line 21	1,649,166.	1,649,166.		
2	Grants and other assistance to individuals in		· · · · · · · · · · · · · · · · · · ·		
_	the U.S. See Part IV. line 22	0.			
3	Grants and other assistance to governments,		·		
	organizations, and individuals outside the				
	US See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	166,947.		166,947.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	0.			
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)	0.			
9	Other employee benefits	0.			
10	Payroll taxes	0.			- .
11	Fees for services (non-employees)				
	Management	0.		į	
b		0.			
	Accounting	4,680.		4,680.	
	Lobbying	0.		·	
	Professional fundraising services See Part IV line 17	0.			
	Investment management fees	0.			
g		0.			
12	Advertising and promotion	0.			
13	Office expenses	0.			
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	0.			
17	Travel	0.			
18	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials	0.		}	
19	Conferences, conventions, and meetings	0.			
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance	0.			
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	OTHER INVESTMENT EXPENSES	16,533.		16,533.	
b					
c					
d					
е					
f	All other expenses				
	Total functional expenses Add lines 1 through 24f	1,837,326.	1,649,166.	188,160.	
	Joint Costs. Check here If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	15,297,922.	1	1,002,184.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
]	employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section	•		
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
155	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or 10a			
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation		10c	
	11	Investments - publicly traded securities	12,732,129.	11	26,064,094.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	28,030,051.	16	27,066,278.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	•
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
abi		employees, highest compensated employees, and disqualified			
=		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties [23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
es		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
Ž	27	Unrestricted net assets	18,475,501.	27	17,511,728.
Sala	28	Temporarily restricted net assets		28	
8	29	Permanently restricted net assets	9,554,550.	29	9,554,550.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. ■ □			
S	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne t	33	Total net assets or fund balances	28,030,051.	33	27,066,278.
	34	Total liabilities and net assets/fund balances	28,030,051.	34	27,066,278.
			<u> </u>	1	

Form **990** (2009)

Page 12

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1	
	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		Х
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		
	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	1		
	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				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

$\overline{}$	_			715 TRUST #1		 				85-60	08012
Par	t I	Reason f	or Public Char	ity Status (All organ	izations m	ust compl	lete this j	part.) Se	e instruc	tions	
The	orga			ation because it is (For		-		-			
1	Ш	A church, co	onvention of chur	ches, or association of	churches d	lescnbed in	sectio	n 170(b)(1)(A)(i).		
2	Щ	A school de	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sched	ule E)					
3	Ш	A hospital o	r a cooperative h	ospital service organiza	ation descri	bed in se	ction 170	(b)(1)(A)	(iri).		
4	\square	A medical	research organiz	zation operated in co	njunction	with a hos	pital des	cnbed in	section	170(b)(1)(A)(iii). Enter the
		hospital's na	ame, city, and sta	ate							
5		An organiza	ation operated fo	or the benefit of a co	llege or un	iversity ow	ned or o	perated	by a gove	ernmental	unit described in
		section 170	(b)(1)(A)(iv). (C	omplete Part II)							
6		A federal, st	ate, or local gove	ernment or government	al unit desc	nbed in	section 1	70(b)(1)(<i>A</i>	A)(v).		
7				lly receives a substan						or from t	he general public
				1)(A)(vi). (Complete F		. ,		•			•
8				in section 170(b)(1)(mplete Par	t #)				
9			•	ly receives (1) more		•	•	m contrib	outions in	nembershi	p fees and gross
- '				ted to its exempt fun							•
				ment income and un							
				after June 30, 1975						· · · · · · · · · · · · · · · · · · ·	1
10			-	nd operated exclusively					,		
11	Х			and operated exclus			-			ns of or	to carry out the
•••	لنثنا			ublicly supported orga			-				•
				at describes the type of					•	•	
		a Typ				e III - Func					pe III - Other
أم	\overline{x}		L-	rtify that the organiz			•	•			•
• (on managers and oth							
			section 509(a)(=	er man on	e or more	publicly :	supportet	olyaniza	allons de:	schoed in Section
f			. , ,	•	han from	the IDC the		Tunn I T	T., 11 _	- T	
'				a written determinat							supporting
_		Super Avenue	i, check this box								
g				he organization accept	ed any giπ	or contribut	ion from a	any or the	!		
		following pe									V I N-
				or indirectly controls			ether wit	h persor	is describ	ed in (ii)	Yes No
				rning body of the sup		anization?					11g(i) X
			•	rson described in (i) at							11g(ii) X
_				of a person described in		•					11g(ni) X
<u>h</u>		Provide the	following informa	tion about the supporte	ed organiza	tion(s)					
(i) N		of supported nization	(ii) EIN	(III) Type of organization (described on lines 1-9		rganization sted in your		ou notify		s the	(VII) Amount of
	O. gu	I II Z L (IOI)		above or IRC section		document?	the organ	of your		on in col	support
				(see instructions))		,	+	port?		S?	
					Yes	No	Yes	No	Yes	No	
		ERQUE	85-0129165	02	×		×		х		1,649,166
ACA	ADEM	· I									
							<u></u>			<u> </u>	
						İ		1	1		
											1,649,166
Total	I				1	I	i	l	1	ı I	1,049,100

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

Sac	(Complete only if you chection A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale	endar year (or liscal year beginning in)	- (4, 2000	(5) 2000	(0, 200)	(4) 2000	(0, 2000	(1) 10121
1	Gifts, grants, contributions, and		1				
	membership fees received (Do not						1
	include any "unusual grants ")				 		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
_					-		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each					,	
Ū	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					1	
Sec	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents royalties and income from 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 activities etc (s	ee instructions)				12	
13	First five years If the Form 990 is forganization, check this box and stop here	or the organiza	tion's first, seco	nd, third, fourth	, or fifth tax y	ear as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup	port Percent	age				
14	Public support percentage for 2009 (line	e 6, column (f) c	livided by line 11	I, column (f))		14	%
15	Public support percentage from 2008 S	chedule A, Part	II, line 14			15	%
16a	33 1/3 % support test - 2009. If the c	organization did	I not check the	box on line 13	, and line 14 i	s 33 1/3 % or moi	re, check
	this box and stop here. The organization						
b	33 1/3 % support test - 2008. If the						
	check this box and stop here. The org	anization qualif	ies as a publicly	supported orga	anization		▶ 🗀
17a	10%-facts-and-circumstances test - 2	009. If the orga	anization did no	t check a box o	n line 13, 16a d	or 16b, and line 1	4 is 10%
	or more, and if the organization me						
	Part IV how the organization meets					· · · · · · · · · · · · · · · · · · ·	•
	organization		<i></i>				▶□
b	10%-facts-and-circumstances test -						
	15 is 10% or more, and if the orga	anization meet	s the "facts-and	d-circumstances	" test, check	this box and st	op here.
	Explain in Part IV how the organization						=
	supported organization				•	•	· /
18	Private foundation. If the organization						
	instructions	<u></u>					▶ □
						Schedule A (Form 99	

	lule A (Form 990 or 990-EZ) 2009	izations De-	aribad in Cart		5-6008015		<u> </u>	Page
Par	Support Schedule for Organ (Complete only if you checked							
<u> </u>		THE DOX OH	illie 9 Ol Falt I	,				·· -
	tion A. Public Support	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	2009	(f) Total
1	alendar year (or fiscal year beginning in)	(a) 2003	(5) 2000	(0) 2007	(u) 2000	(6) 2	.003	(1) 10(a)
•	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				1			
	unrelated trade or business under section 513							
4	Tax revenues levied for the organization's				1			
•	benefit and either paid to or expended on							
	its behalf							
5	The value of services or facilities		· ·				- 1	
•	furnished by a governmental unit to the						1	
	organization without charge		Ì				1	
6	Total. Add lines 1 through 5		†		<u> </u>			
	Amounts included on lines 1, 2, and 3				<u> </u>		- 1	
, -	received from disqualified persons					1		
ь	Amounts included on lines 2 and 3			T				
	received from other than disqualified persons that exceed the greater of							
	\$5,000 or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b							
	Public support (Subtract line 7c from							
	line 6)							
Sec	tion B. Total Support	•	<u> </u>					
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	2009	(f) Total
9	Amounts from line 6							
10 a	Gross income from interest, dividends							
	payments received on securities loans, rents, royalties and income from similar		1					
	sources,							
b	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975							
С	Add lines 10a and 10b					<u> </u>		
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly carried on					ļ		
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)			<u></u>				
14	First five years If the Form 990 is for	the organization	n's first, second.	third, fourth, o	r fifth tax year a	as a sec	tion 501(c	:)(3)
	organization, check this box and stop here.	· · · · · · · · · · · · · · · · · · ·						▶
Sec	tion C. Computation of Public Sup	port Percen	tage					
15	Public support percentage for 2009 (line 8, co	• •	•			15		%
16	Public support percentage from 2008 Schedu	ile A, Part III, line	15			16	<u>-</u>	%
Sec	tion D. Computation of Investment	t Income Per	centage					
17	Investment income percentage for 2009 (lin					17		%
18	Investment income percentage from 2008 5					18		%
19 a	33 1/3 % support tests - 2009. If the or	ganization did	not check the bo	ox on line 14, ar	nd line 15 is moi	re than 3	33 1/3 %, a	nd line

b 33 1/3 % support tests - 2008 If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and

line 18 is not more than 33.1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization.

20 JSA 9E1221 1 000 Private foundation If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Page 4

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

ALE	UQUERQUE ACADEMY FOR BOYS TRUST #1		85-6008015
Pai			r AccountsComplete if
	the organization answered "Yes" to For	· · · · · · · · · · · · · · · · · · ·	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (dunng year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor adv	-	, , , , , , , , , , , , , , , , , , , ,
•	funds are the organization's property, subject to the	. 3	Yes No
6	Did the organization inform all grantees, donors, and used only for chantable purposes and not for the bei		
	purpose conferring impermissible private benefit?		
Par		the organization arrawered "Ves" to Fo	
1	Purpose(s) of conservation easements held by the c		in 350, raitiv, ine r
•	Preservation of land for public use (e.g., recrea		f an historically important land area
	Protection of natural habitat	•	f a certified historic structure
	Preservation of open space	Preservation of	a certified filstoffe structure
2	Complete lines 2a through 2d if the organization held	d a qualified conservation contribution in the	form of a conservation
_	easement on the last day of the tax year	a quamou conscivation continuation in the	Torm or a conservation
	•		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified his		2c
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminated	by the organization during
	the tax year		
4	Number of states where property subject to conserve		
5	Does the organization have a written policy regarding	· · · · · · · · · · · · · · · · · · ·	~ — —
_	violations, and enforcement of the conservation ease		
6	Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing conservation easeme	nts during the year
_	A		to a see the second
7	Amount of expenses incurred in monitoring, inspecti \$\Box\$	ng, and enforcing conservation easements d	during the year
8	Does each conservation easement reported on line	2/d) above estimate the requirements of easting	
0	170(h)(4)(B)(ι) and 170(h)(4)(B)(ι)?	• •	
9	In Part XIV, describe how the organization reports of		
•	balance sheet, and include, if applicable, the text of		•
	the organization's accounting for conservation easer	•	
Par			er Similar Assets.
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under S	SFAS 116, not to report in its revenue st	atement and balance sheet works of
	If the organization elected, as permitted under Sart, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its fi	ld for public exhibition, education, or rese	earch in furtherance of public service,
b	If the organization elected, as permitted under S		
-	historical treasures, or other similar assets held		
	provide the following amounts relating to these ite		
	(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 a		assets for financial gain, provide the
	following amounts required to be reported under S	-	
a	Revenues included in Form 990, Part VIII, line 1 .		
b	Assets included in Form 990, Part X		> \$

Scried	Iule D (Form 990) 2009							300013			Page Z
Par	t III Organizations Maintaini	ng Colle	ections o	of Art, Histo	rical	Treasure	s, or	Other Sim	ilar Assets(continu	ed)
3	Using the organization's acquisition,	20005 5	on and a	thar racards	abaal	ony of the	follo	wana that are	a cianificant i	ico of ite	
3	collection items (check all that apply		ion, and o	mer records,	CHECK	carry or une	IOIIO	wing macare	a significant t	126 01 112	
а	Public exhibition	,		a [7	l oan or ev	hanc	ge programs			
b	Scholarly research			`	┥	Other	Ji lai iş	go programs			
C	Preservation for future ger	erations		ــــــ	J	Ou le:					
Α C	Provide a description of the organization		ollections	and evoluin b	ow th	ev further t	he or	ganization's	evemnt numo	ce in	
•	Part XIV	a	Oneonons	and explain	1044 (1	loy luitifici t	110 01	garrizations	exempt purpo	30 117	
5	During the year, did the organization	solici ti	or receive	donations of	art h	istorical tre	asure	s or other si	mılar		
J	assets to be sold to raise funds rath							•		Yes	☐ No
Par	t IV Escrow and Custodial A IV, line 9, or reported an						ans	wered "Yes	" to Form 99	0, Part	
								41 4			
та	is the organization an agent, trustee									—	□. .
	included on Form 990, Part X?									Yes	∐ No
D	If "Yes," explain the arrangement in	Part XI V	and com	piete the folio	wing	able .			A		
_	Danisana balanca						-		Amount		
	Beginning balance						-				
	Additions during the year						-			-	
e	Distributions during the year						-				
	Ending balance								-	Yes	No
	Did the organization include an amount "Yes," explain the arrangement in			rant A, IIII 2	217					res	□ мо
				tion once	od "\	/oo" to Fo	rm 0	00 Dort IV	line 10		
Par	t V Endowment Funds. Con									(a) Fare	r voore book
10	Paginging of year halance		ent Year	(b) Prior ye		(c) Two ye	ars ba	ck (a) in	ree years back	(e) Foul	r years back
1a	Beginning of year balance	9,5	554,550	9,554,	550					-	
D -	Contributions									 	
С	Net investment earnings, gains,										
	and losses									 	
	Grants or scholarships									 	
e	Other expenditures for facilities .		-								
	and programs	·····									
	Administrative expenses									 	
_	End of year balance		554,550	9,554,	550					<u> </u>	
2	Provide the estimated percentage o	-	ar end bala								
d	Board designated or quasi-endowm			%							
D	Permanent endowment ► 100.0										
		%			. 41.						
Ja	Are there endowment funds not in the	ie pos s	ession of	ine organizat	ion th	at are neid	and a	iaministerea	for the	Г	
	organization by									-	Yes No
	(i) unrelated organizations									3a(i)	X X
h	(ii) related organizations									3a(ii) 3b	X_
	If "Yes" to 3a(ii), are the related organization in Boat XIV the intended in									30	
4	Describe in Part XIV the intended us						4 🗸 -	10	 		
Fair	t VI Investments - Land, Bui	iumgs, a									·
	Description of investment			or other basis estment)) Cost or other basis (other)		(c) Accumulated depreciation		d) Book va	ilue —
1a	Land						\perp				
	Buildings										
_	Leasehold improvements						_				
d	Equipment			-							
e	Other		L								
Tota	I. Add lines 1a through 1e (Column	(d) must	equal For	m 990, Part)	(, colu	ımn (B), lını	3 10(€	c).)	. ▶		
									Schoo	iula D (Ear	m 990) 2009

Part VII Investments - Other Securities. See F	orm 990, Part X, lin	e 12	Page (
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuating Cost or end-of-year mark	
Financial derivatives			
Closely-held equity interests			
Other		 	

Total (Column (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>	
Part VIII Investments - Program Related. See			
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year mark	
		1,	
Total (Column (b) must equal Form 990 Part X col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, I			
(a) Description		(b) Book value
		-1	
	^ · · · · · · · · · · · · · · · · ·		
	(be - 05	<u></u>	
Part X Other Liabilities. See Form 990, Part X 1. (a) Description of liability			
Federal income taxes	(b) Amount	-	
1 ederal income taxes	 	1	
		-	
		_	
		_	
	ļ	4	
		_	
Total (Column (b) must equal Form 990, Part X, col. (B) line 25)	 		
FIN 48 Footnote In Part XIV, provide the text of the foo	imote to the organization	on's financial statements that reports the	е

JSA 9E1270 1 000

Schedule D (Form 990) 2009

organization's liability for uncertain tax positions under FIN 48

Schedule	D (Form 990) 2009 85-6008015		Page 4
Part)	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stateme	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	•
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
	Net unrealized gains (losses) on investments	4	
	Donated services and use of facilities	5	
		6	
	Investment expenses	7	
7	Prior penod adjustments		
	Other (Describe in Part XIV)	8	
	Total adjustments (net) Add lines 4 through 8	9	
		10	
Part)			
1	Total revenue, gains, and other support per audited financial statements	. 1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments , ,	_	
	Donated services and use of facilities		
С	Recoveries of prior year grants	_	
d	Other (Describe in Part XIV)	_	
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1		
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)		
	Add lines 4a and 4b	. 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
Part >	III Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	eturn	
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	•	
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1		
	Amounts included on Form 990, Part IX, line 25, but not on line 1	.	
		\dashv	
	Add lines do and db	40	
C E		. 4c	
Part >	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 1 3	1
	te this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV		
	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 of to provide any additional information.	comple	te
IIIIS pai	t to provide any additional illionnation		
CEE 1	PAGE 5		
3EE 1	AGE J		
		. – – – -	
			
		. _	

Part XIV Supplemental Information (continued)

SCHEDULE D: SUPPLEMENTAL INFORMATION

PART V, LINE 4: ENDOWMENT FUNDS

ALBUQUERQUE ACADEMY FOR BOYS TRUST #1 MAINTAINS AN ENDOWMENT FUND WHICH IS INVESTED FOR THE PURPOSE OF GENERATING INCOME USED TO SUPPORT THE ALBUQUERQUE ACADEMY. THE TRUSTEES WORK CLOSELY WITH OFFICERS AND TRUSTEES OF THE ACADEMY WITH RESPECT TO THE SCHOOL'S FINANCIAL OPERATIONS, INCLUDING BUT NOT LIMITED TO THEIR INVESTMENT POLICIES, AND DEVELOPING AND IMPLEMENTING THE INVESTMENT STRATEGY OF THE TRUST.

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Affach to Form 990

Open to Public

Internal Revenue Service		Attacil to Form 390.				IIIspection
Name of the organization					Employer identification number	on number
ALBUQUERQUE ACADEMY FOR BOYS TRUST	tust #1				85-6008015	
Part I General Information on Grants and Assistance	and Assistance					
1 Does the organization maintain records to substantiate the	substantiate the amount of the	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	the grantees' eligibil	ity for the grants or as		
the selection criteria used to award the grants of assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	nts or assistance?edures for monitoring the use	of grant funds in the U	inted States	grant funds in the United States	· · · · · · · · · · · · · · · · · · ·	Yes No
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed.	Governments and Organization by recipient that received more that official space is needed	is and Organizations in the United States. Complete if the organization answered "Yes" to at received more than \$5,000 Check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box if no one recipient received more than \$5,000 check this box is not not not not not not not not not not	ited States. Comp	lete if the organizatione rece	tion answered "Ye	s" to .000 Use
1 (a) Name and address of organization or government	(b) EIN (c) IRC section if applicable	(d) Amount of cash grant (e) Amount of non-cash assistance	(e) Amount of non-cash assistance	(f) Method of valuation (book FMV appraisal	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALBUQUERQUE ACADEMY	85-0129165 501(C) (3)	1,649,166				STUDENT DEVELOPMENT
	s government organizations					
5 Enter total number of other organizations For Privacy Act and Paperwork Reduction Act Notice see the Instructions for Form 990	t Notice, see the Instructions	s for Form 990			School	Schedule I (Form 990) 2009

BE1288 2 000 NO 7099 1722 3/16/2011

Schedule I (Fc	Schedule I (Form 990) 2009			85-6008015			Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Co Use Part IV and Schedule I-1 (Form 990) if additional space is needed	dividuals in th 990) if additio	e United States		organization answered	Complete if the organization answered "Yes" on Form 990, Part IV, line 22 ed.	
	(a) Type of grant or assistance	(b) Number of reapients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal, other)	(f) Description of non-cash assistance	
		-,,-					
Part IV	Supplemental Information. Complete this		provide the infor	mation required i	n Part I, line 2, and any	part to provide the information required in Part I, line 2, and any other additional information	
SCHEDUL	SCHEDULE I: SUPPLEMENTAL INFORMATION	N(
PART I	PART I, LINE 2: PROCEDURES FOR MONITORING USE	TORING USE	OF GRANT FUNDS	SON			! ! !
THE TRU	THE TRUSTEES OF ALBUQUERQUE ACADEMY FOR	BOYS	TRUST #1 ARE	ACTIVELY			
INVOLVE	INVOLVED IN WORKING CLOSELY WITH OFFICERS AND TRUSTEES OF	FICERS AND	TRUSTEES OF	THE ALBUQUERQUE	QUE.		
ACADEMY	ACADEMY WITH RESPECT TO THE SCHOOL'S FINANCIAL OPERATIONS, INCLUDING BUT	S FINANCIA	L OPERATIONS	- INCEUDING	SUT.		
NOT	NOT LIMITED TO THEIR INVESTMENT POLICIES, AND DEVELOPING AND IMPLEMENTING	ICIES, AND	DEVELOPING	AND_IMPLEMENT			
THE INV	THE INVESTMENT STRATEGY OF THE TRUST	3T.					
						0	0000

SCHEDULE O (Form 990)

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.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ALBUQUERQUE ACADEMY FOR BOYS TRUST #1

Employer identification number

85-6008015

ATTACHMENT 1

GENERAL STATEMENT 1

PART VI, SECTION A, QUESTION 8

BANK OF AMERICA IS THE CORPORATE CO-TRUSTEE OF ALBUQUERQUE ACADEMY FOR
BOYS TRUST #1 ALONG WITH THE INDIVIDUAL CO-TRUSTEE CARL ALONGI. MR.
ALONGI ALSO SITS ON THE ALBUQUERQUE ACADEMY'S BOARD OF TRUSTEES AS
VICE-CHAIR. ALL BOARD MEETINGS OF THE TRUST ARE HELD IN CONJUNCTION WITH
MEMBERS OF THE ACADEMY'S BOARD OF TRUSTEES AND MINUTES ARE DOCUMENTED.

GENERAL STATEMENT 2

PART VI, SECTION B, QUESTION 11A

THE TRUST ENGAGES A PAID PREPARER EXPERIENCED IN THE PREPARATION OF FORM 990 TO PREPARE THE FORM UNDER THE DIRECT SUPERVISION OF THE CORPORATE TRUSTEE. A DRAFT FORM 990 IS PROVIDED TO AN OFFICER OF THE BANK FOR REVIEW. A FINAL FORM 990 IS PROVIDED TO THE INDIVIDUAL CO-TRUSTEE FOR REVIEW PRIOR TO FILING.

GENERAL STATEMENT 3

PART VI, SECTION B, QUESTIONS 12 THROUGH 14

BANK OF AMERICA, AS CORPORATE TRUSTEE FOR ALBUQUERQUE ACADEMY FOR BOYS

TRUST #1, HAS A WRITTEN CONFLICT OF INTEREST POLICY, WHISTLEBLOWER

POLICY, AND DOCUMENT RETENTION AND DESTRUCTION POLICY. ANNUAL STATEMENTS

OF COMPLIANCE TO THE POLICY BY ALL CORPORATE TRUST EMPLOYEES ARE SIGNED

AND DOCUMENTED.

Schedule O (Form 990) 2009 Page 2

Name of the organization

Employer identification number ALBUQUERQUE ACADEMY FOR BOYS TRUST #1

85-6008015

ATTACHMENT 1 (CONT'D)

GENERAL STATEMENT 4

PART VI, SECTION B, QUESTION 15

BANK OF AMERICA IS THE ONLY PAID TRUSTEE AND IS PAID IN ACCORDANCE WITH A PUBLISHED FEE SCHEDULE.

GENERAL STATEMENT 5

PART VI, SECTION C, QUESTION 19

ALBUQUERQUE ACADEMY FOR BOYS TRUST #1, AND BANK OF AMERICA AS CORPORATE TRUSTEE, MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AS REQUIRED BY FEDERAL AND STATE LAW.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

ALBUQUERQUE ACADEMY FOR BOYS TRUST #1

► 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

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

Inspection

Employer identification number 85-6008015

Part I	Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33,	e organization	answered "Yes" or	Form 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
! ! ! !							
-							
Part II	Identification of Related Tax-Exempt Organizations (Complete if the had one or more related tax-exempt organizations during the tax year	Complete if the	izations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it ations during the tax year.)	wered "Yes" on F	-orm 990, Part I\	/, line 34 because	it (
	(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
ALBUQUE BOA MERRI	ALBUQUERQUE ACADEMY FOR BOYS TRUST #2 85-6 BOA MERRILL LYNCH 1300 MERRILL LYNCH DRIVE 3RD FLR PENNINGT	85-6014105 PENNINGTON, NJ 08534	INVESTMENT	ΣN	501 (C) (3)	PF	N/A
ALBUQUERQUE 76400 WYOMING	ACADEMY BLVD NE ALBUQUERQUE,	85-0129165 NM 87109	SCHOOL	NM	501 (C) (3)	02	N/A
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					

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

Schedule R (Form 990) 2009

Page 2

Schedule R (Form 990) 2009

Part III

Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) 85-6008015

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicite (state or foreign	(d) Direct controlling entity	Predominant income (related unrelated excluded from tax under	(f) Share of total income		(g) Share of end-of-year assets	(h) Deproportunes aftections?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?
		country)		512-514)				Yes No		Yes No
		l								
			:							
Identification of Related Organizations Taxable as a Corporation or Trust(Complete if the organization answer IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	lated Organization It had one or mor	ons Tax	able as a Corpoi d organizations to	e as a Corporation or Trust(Complete if the organization answered "Yes" on Form 990, Part ganizations treated as a corporation or trust during the tax year)	Complete if the oration or trust	organization during the ta	answered "Ye x year)	s" on Fo	rm 990, Part	
(a) Name address, and EIN of related organization	related organization		(b) Primary activity	(c) Legal domicrle (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp or frust)	(f) Share of total income	оте	(9) Share of end-of-year assets	(h) Percentage ownership

Schedule R (Form 990) 2009

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PAGE 27

Schedule R (Form 990) 2009

Transactions With Related Organizations (Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.) 85-6008015 Part V

Ž	Note . Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule			Yes	Š	
-						
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent				×	
م	Giff. grant, or capital contribution to other organization(s)		1b	×		
ပ	c Giff, grant, or capital contribution from other organization(s)	•	10	U	×	
70			- 14 - 14	70	×	
· ·				60	×	ı
•		•			>	1
-	f Sale of assets to other organization(s)	:	= 1	+	۱	
D	g Purchase of assets from other organization(s)	:	19	6	×	•
Æ	h Exchange of assets	•	<u>무</u>	ч	×	
	i Lease of facilities, equipment, or other assets to other organization(s)		11.	_	×	
					>	ľ
_	j Lease of facilities, equipment, or other assets from other organization(s)	:	=1		۲	
¥	k Performance of services or membership or fundraising solicitations for other organization(s)	:	,	¥	×	
-	Performance of services or membership or fundraisms solicitations by other organization(s)		=		×	
Ε			=	13	×	ì
•		•	-	1	×	
=		: : :	:			1
0	• Reimbursement paid to other organization for expenses	:	의 : :	•	×	•
Q.	p Reimbursement paid by other organization for expenses	:	<u> 위</u>	a	×	
. 0		:	19		×	
「니	J		11	_	×	
7		transactio	n thresholds			
	(a) (a) Transation Name of other organization type (a-r)	5.5	(c) Amount involved	olved		1
E	(1)					
(2)	8					
9						1
3 :						1
₹	⟨ ⟩					•
3	. (9					
9	(9)					
			Schedule R (Form 990) 2009	rm 990	2009	4

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85-6008015

Page 4

Schedule R (Form 990) 2009

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 37) Part VI

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) Name address and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Are all partners section 501(c)(3)	(e) Share of end-of-year	(f) Disproportionate allocations?	(g) Code V-UBI amount in box 20	(h) General or managing partner?
		(1)	Yes No		Yes No		Yes No
							-
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PAGE 29