	qqn_T	Ex	empt Organization Busi	'n ├──°	OMB No. 1545-0687								
Form	330 I		(and proxy tax under	sec	tion 603	3(e))			20 08				
	tment of the Treasury		or calendar year 2008 or other tax year	begin	ning	,	2008, and	Ope	en to Public Insp	ection			
Interna	Al Revenue Service		ending , 20 .	See separate instructions. for 501(c)(3) Organization									
A 🗌	Check box if address changed		Name of organization (Check box if name	chang	ed and see inst	ructions.)			er identification r s' trust, see instructions				
B Exe	empt under section	Duint						on page 9.		101 210011 2			
	501()()	Print	Number, street, and room or suite no. If a P.C	nstruction	S.		1						
	408(e) 220(e) or								E Unrelated business activity codes (See instructions for Block E on page 9.)				
	408A									(ess mendenene isi zheni z en page e.)			
\perp	529(a)								i				
	ok value of all assets end of year	<u> </u>	oup exemption number (See instructi										
			eck organization type 🕨 🗌 501(c) o		ration	501(c) t	trust	401(a) tru	st Othe	er trust			
			n's primary unrelated business activit										
			corporation a subsidiary in an affiliated			ubsidiary	controlled of	group? .	► ☐ Yes	\square No			
	t "Yes," enter the n The books are in		d identifying number of the parent corpora	ation.		Telenh	one numbe	ar 🕨 (
Pa			de or Business Income		(A) Inco		enses	(C) Net	:) Net				
				Τ	(A) IIICO		(D) EXP	1303	(O) Net				
1a				4.									
b			c Balance ►	1c		-							
2	_	-	hedule A, line 7)	3									
3	•		ine 2 from line 1c	_									
4a	Capital gain net	incom	e (attach Schedule D)	4a									
b	Net gain (loss) (F	orm 47	97, Part II, line 17) (attach Form 4797)	4b						+			
С	Capital loss dec			4c									
5			hips and S corporations (attach statement)	5									
6	Rent income (So	chedule	; C)	6									
7	Unrelated debt-	finance	d income (Schedule E)	7									
8			yalties, and rents from controlled										
	organizations (S	chedul	e F)	8		-				+			
9			f a section 501(c)(7), (9), or (17)										
	organization (S			9									
10			ity income (Schedule I)	10						+			
11	Advertising inco	`	,	11									
12			11 of the instructions; attach schedule.)	12									
13			through 12	13		- C - 1							
Pa			ot Taken Elsewhere (See page 11										
	· · · · · · · · · · · · · · · · · · ·		tributions, deductions must be dire						s income.)				
14	Compensation of	of office	ers, directors, and trustees (Schedule	K)									
15	Salaries and wa	iges .						. 15					
16	Repairs and ma	intenan	ce										
17	Bad debts							. 17					
18	Interest (attach	schedu	le)					. 18					
19													
20	Charitable contr	ribution	s (See page 13 of the instructions for	r limita	ation rules.)			20					
21	Depreciation (at	tach Fo	orm 4562)		21								
22	Less depreciation	on clain	ned on Schedule A and elsewhere or	retur	n 22a			22b					
23	Depletion							23					
24			ed compensation plans										
25			rams										
26			es (Schedule I)										
27			ts (Schedule J)										
28			ch schedule)							1			
29			l lines 14 through 28							\top			
30			able income before net operating loss							_			
31			uction (limited to the amount on line							_			
			able income before specific deduction							+			
32			·							+-			
33 34			nerally \$1,000, but see line 33 instructions in the income. Subtract line 33 from							+			
34			zero or line 32										

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		- - · · ·									
Par	t III	Tax Computation									
35	Control	zations Taxable as Corpled group members (section our share of the \$50,000, \$	ons 1561 and 1563)	check her	e ▶ ☐ See	instructi	ions and:				
а	(1) \$										
b	(2) Add	rganization's share of: (1) A itional 3% tax (not more the	nan \$100,000)			\$		05-			
С		tax on the amount on line						35c			
36	the am	Taxable at Trust Rates. Sount on line 34 from:	ax rate schedule or	☐ Sche	dule D (Form	1041)	•	36			
37		tax. See page 16 of the ins						37			
38	Alterna	tive minimum tax						38			
39		Add lines 37 and 38 to line	35c or 36, whichever	er applies				39			
Par	t IV	Tax and Payments									
40a	Foreign	tax credit (corporations atta	ch Form 1118; trusts	attach Fo		40a		_			
b	Other of	redits (see page 17 of the	instructions)			40b		_			
С	General	business credit. Attach For	m 3800			40c					
d		for prior year minimum tax				40d					
е		redits. Add lines 40a thro						40e			
41								41			
42	Other tax	es. Check if from: Form 425									
43		ax. Add lines 41 and 42 .						43			
44a		nts: A 2007 overpayment				44a					
b	-	stimated tax payments .				44b					
c		posited with Form 8868 .				44c					
d		organizations: Tax paid or				44d					
u 0	_	withholding (see instruction	•			44e					
4			Form 2439								
f	☐ For	redits and payments: m 4136	Other		Total ►	44f		4.			
45	_	ayments. Add lines 44a th	_					45			
46		ed tax penalty (see page 4	,				ed . ▶ ∐	46			
47		e. If line 45 is less than the		,				47			
48		lyment. If line 45 is larger				ount ove	•	48			
49		amount of line 48 you want:				-4: (Refunded ►	49	40)		
Par	t V	Statements Regarding	Certain Activitie	s and O	ner intorma	ation (se	ee instruction	s on pa	ige 18)		
1	At any	time during the 2008	calendar year, did	the orga	ınization hav	e an in	iterest in or	a sigr	nature	Yes	No
		er authority over a fi		,	,	,					
		, the organization may									
	Financi	al Accounts. If YES, enter	the name of the fore	ign count	ry here ►						
2		he tax year, did the organizati						foreign	trust? .		
3		see page 5 of the instruct ne amount of tax-exempt in									
		A—Cost of Goods Sold					,				
			1					6			
1		ry at beginning of year	2		,	•	ear				
2		ses	3		_		Subtract line				
3		labor	3		6 from line 5			7			
4a		nal section 263A costs	4a		Part I, line 2		 tion 263A (w		acet to	Yes	No
L	•	schedule)	4b				r acquired fo			169	140
Б 5		osts (attach schedule) Add lines 1 through 4b	5								
		r penalties of perjury, I declare that I ha								nelief i+	is truc
Sig	I	ct, and complete. Declaration of prepa						or my Anov	age and L	, on o 1, 11	io ii ue,
Her			1				Γ		RS discuss th		
		ature of officer	Date					the prepar instruction	rer shown bel s)?		
			Date	'	Date		<u>.</u>	Prena	rer's SSN or		
Paic		Preparer's signature					Check if]	U UUIN UI		
Prep	oarer's	Firm's name (or			self-employed L EIN	1					
Use	Only)		

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(see instructions on page	•	ai Pr	operty	and Persoi	nai Prope	erty L	eased with Real	ı Pr	operty)	
1 Description of property	,									
(1)										
(2)										
(3)										
(4)										
(+)	2 Rent receiv	ad or a	ccrued							
(a) From personal property (if the for personal property is more the more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)					
(1)										
(2)										
(3)										
(4) Total		Total								
(c) Total income. Add totals of chere and on page 1, Part I, line		2(b). Er					(b) Total deduce Enter here and on p Part I, line 6, column	oage	÷ 1,	
Schedule E—Unrelated				see instruction	ons on pag	e 19)	, , , , , , , , , , , , , , , , , , , ,	_ (/		
1 Description of de			(2 Gross inco	me from or	,	Deductions directly con debt-finance			
1 Bookington of do	Dr Illianood proport	y		allocable to debt-financed property		(a) S	straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)								_		
(2)										
(3)										
(4)										
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5 Average adj or alloc debt-finance (attach schedule)			erty	6 Column 4 divided by column 5			ross income reportable blumn 2 × column 6)	8 Allocable deductions (column 6 × total of colum 3(a) and 3(b))		
(1)				%						
(2)				%						
(3)					%					
(4)					%					
Totals							here and on page 1, I, line 7, column (A).		inter here and on page 1, Part I, line 7, column (B).	
Total dividends-received dedu										
Schedule F—Interest, Ar	nnuities, Roya	alties	, and R	ents From	Controlle	d Or	ganizations (see i	nstr	ructions on page 20)	
			Exempt	Controlled	Organizatio	ns				
1 Name of controlled 2 Employer organization identification number 3 Net unro		related income e instructions) 4 Total of specified payments made			5 Part of column 4 that included in the controll organization's gross inc	ling	g connected with income			
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Orga	nizations									
							10 Part of column 9 tha	nt in	44 Deductions directly	
7 Taxable Income 8 Net unrela (loss) (see in				9 Total of specified payments made			included in the controll organization's gross included	ling	11 Deductions directly connected with income in column 10	
(1)										
(2)										
(3)										
(4)										
							Add columns 5 and 10 Enter here and on page Part I, line 8, column (A	e 1,	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	
Totals										
10(a)3										

Schedule G—Investment In	come of a Sect	<u>tion 50</u>			ganization (see	instru			
1 Description of income	2 Amount of income		3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedu		5 Total deductions and set-asides (col. 3 plus col. 4)		
(1)									
(2)									
(3)									
(4)									
Totals	Enter here and on Part I, line 9, colum						Enter he Part I, lir	re and on page 1, ne 9, column (B).	
Schedule I—Exploited Exer	mpt Activity Inc	ome (Other T	han Advertisir	na Income (soo	inetru	tions or	naga 21)	
Scriedule I—Exploited Exel	IIIPL ACTIVITY IIIC	onie, c	Julei i	4 Net income		IIIStruc	JUDIES OF	page 21)	
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income		(loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)									
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).						Enter here and on page 1, Part II, line 26.	
Totals									
Schedule J—Advertising In	· · · · · · · · · · · · · · · · · · ·								
Part I Income From Pe	riodicals Repor	ted on	a Con	solidated Bas	is				
1 Name of periodical	1 Name of periodical 2 Gross advertising income		Direct sing costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income 6 F		adership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)									
(2)								_	
(3)								_	
(4)								_	
(')									
Totals (carry to Part II, line (5))									
Part II Income From Pocolumns 2 through	eriodicals Repo			parate Basis	(For each peri	odical	listed i	n Part II, fill in	
1 Name of periodical	2 Gross advertising income		Direct sing costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income		adership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)									
(5) Totals from Part I									
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A).	page 1	ere and on 1, Part I, , col. (B).					Enter here and on page 1, Part II, line 27.	
Schedule K—Compensatio		irector	rs, and	Trustees (see	instructions on n	age 22	2)		
1 Name			o,	2 Title	2 Percent of		Compensat	ion attributable to ed business	
					9/	5			
					9/				
					9/				
					9/				
Total. Enter here and on page 1, P.	art II, line 14								