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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A</u>	For the	e 2008 calendar year, or tax year beginning and	enaing		
В	Check if applicabl	C Name of organization		D Employer identific	cation number
[3	Addre				
ř	Name chang	pe print or ARABELIDA LEGACY FUND type Doing Business As		20-5	806345
F	Initial return	See Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
一	Termir		600		595-1020
F	Amen	nded tions		G Gross receipts \$	6,011,782.
F	return Applic			H(a) Is this a group re	
_	tion pendii	F Name and address of principal officer ERIC KESSLER	<u> </u>	for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	
$\overline{}$	Tax-ex	rempt status		1	list. (see instructions)
		ite: WWW.ARABELLALEGACYFUND.ORG		H(c) Group exemption	,
			1 Year		State of legal domicile: DC
P	Type of art I 1 2 3 4	Summary	1 L 7 Out	or tollination. 2000 It	, otato or rogar dormond. D C
	1	Briefly describe the organization's mission or most significant activities: TO SI	UPPORT	INNOVATIVE	AND
₩.	'	EFFECTIVE PUBLIC INTEREST PROJECTS.	0110111		
ۃ	9	Check this box If the organization discontinued its operations or dispose	sed of more	than 25% of its assets	
≓ۆ	3	Number of voting members of the governing body (Part VI, line 1a)		3	 5
٦	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3
<u>ე</u> ა	5	Total number of employees (Part V, line 2a)	•	5	0
⊃≋ຼື	6	Total number of volunteers (estimate if necessary)	•	6	5
ผู้ฮู่	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a	0.
= 4	b	Net unrelated business taxable income from Form 990-T, line 640 F (\/F)		7b	0.
Activities &			70	Prior Year	Current Year
		Contributions and grants (Part VIII, line 1h)	3-0sc	1,658,161.	5,998,667.
֓֟֟֝֟֓֟֟ <u>֟</u>	9	Program service revenue (Part VIII. line 20)		0.	<u> </u>
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,202.	13,115.
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 (and 1e)	- -	0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,663,363.	6,011,782.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		10,000.	2,172,460.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	•	0.	0.
ψ	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		291,046.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ä	. в	Total fundraising expenses (Part IX, column (D), line 25) > 94, 6	32.		· · · · · · · · · · · · · · · · · · ·
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		512,431.	1,810,957.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		813,477.	3,983,417.
	19	Revenue less expenses. Subtract line 18 from line 12		849,886.	2,028,365.
Net Assets or	S			Beginning of Year	End of Year
sets	20	Total assets (Part X, line 16)		902,403.	2,982,228.
Ass	21	Total liabilities (Part X, line 26)		49,954.	100,885.
S.	22	Net assets or fund balances Subtract line 21 from line 20		852,449.	2,881,343.
P	art II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules an and complete Declaration of preparer (other than officer) is based on all information of which preparer has a	nd statements,	and to the best of my knowled	ge and belief, it is true, correct,
		and complete Declaration of preparer (office disarronical) is based on an information of which preparer has a	aly knowledge		. 4.
Sig	; n	a fra		11/10	704
He	re	Signature of officer		Date	
		ERIC KESSLER, PRESIDENT			
		Type or print name and title		·	<u></u>
Pai	A	Preparer's Date	Ch	(000 100	er's identifying number structions)
_		signature May		ployed 🕨 🔲	
	parer's Only	yours if LARSONALLEN LLP		EIN >	
USI	. Only	self-employed), address and 2900 SOUTH QUINCY ST., SUITE 150	0		
		ZIP+4 ARLINGTON, VA 22206		Phone no. ► 7	03-998-5100
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
832	001 12-	18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the se	parate ins	tructions.	Form 990 (2008)

Form 990 (2008) ARABELLA LEGACY FUND
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Х	
5	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		
6	Did the organization maintain any donor advised funds or any 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		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		X_
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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	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 U.S.? 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 more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total 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 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
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
	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 questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		Х
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		
25a	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	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990	2008)

Form 990 (2008) ARABELLA LEGACY FUND
Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X	
b	Have a family member who had a direct or indirect business relationship with the organization?		1	
	If "Yes," complete Schedule L, Part IV	28b	Ì	X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X	L
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ŀ		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<u> </u>
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	X	
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		:
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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			
b	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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	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 authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the 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		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	<u>9</u> a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter N/A			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: N/A			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40:	amounts due or received from them.) Section 4047(AV4) and average the midely dependent of the expenses of the form 10412	40-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a_		

Form 990 (2008) ARABELLA LEGACY FUND 20-5806345 Pa

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions	ŀ		
1a	Enter the number of voting members of the governing body 1a	<u>[</u>		
b	Enter the number of voting members that are independent	<u> </u>		
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 customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_	X	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6	<u> </u>	<u> X</u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	<u> </u>	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	ļ. —	X
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	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9a	Does the organization have local chapters, branches, or affiliates?	9a		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?	9b		<u> </u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
sec	tion B. Policies		V	NI-
	Down the control of the conflict of interest school of the land time 10	10-	Yes X	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12b	X	
	to conflicts?	120	- 22	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12c	Х	
40	In Schedule O how this is done	13		Х
13	Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy?	14		X
14 15	Did the process for determining compensation of the following persons include a review and approval by independent	1-1-	 	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		1	
_	The organization's CEO, Executive Director, or top management official?	15a	1	Х
	Other officers or key employees of the organization?	15b	T	Х
~	Describe the process in Schedule O. (see instructions)		1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		ŀ	
	taxable entity during the year?	16a	l	X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
_	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		<u></u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
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	e for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
-	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 organiz	ation:	-	
	ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC - 202-595-1020			
	734 15TH STREET, NW; SUITE 600, WASHINGTON, DC 20005			
13200				12000

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. 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, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Check this box if the organization did not compensate (B)					C)			(D)	(E)	(F)
Name and Title	Average	Position (check all that						Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		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
ERIC KESSLER										
PRESIDENT/DIRECTOR	1.00	X		X				0.	0.	0.
BRUCE BOYD										
SECRETARY/DIRECTOR	1.00	X	L.	X		<u> </u>	L_	0.	0.	0.
ADAM EICHBERG							1		:	
TREASURER/DIRECTOR	1.00	X	1	X		<u> </u>		0.	0.	0.
HARRY DRUCKER								_		
DIRECTOR	1.00	X	 	_			ļ	0.	0.	0.
JOSEPH "PJ" SIMMONS DIRECTOR	1.00	l						0.	0.	0.
								,		
		:								

4	, ooo (0000) ADADELLA	THOROX	171							20 5	0063	45 .	_
	1990 (2008) ARABELLA TVII Section A Officers Directors Ti									20-5	80634	12 F	Page 8
, <u>u</u>	t VII Section A. Officers, Directors, To (A) Name and title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	ſ	(F) Estimat	
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-Mis	s c SC)	other compens from the organization and relations	ation ne tion ited
1b	Total		L	.J	<u> </u>	1	<u> </u>		0.		0.		0.
2	Total number of individuals (including the	se ın 1a) who re	ceıv	ed n	nore	tha	n \$1	00,0	-L				
	compensation from the organization									•		Yes	No
3	Did the organization list any former office			e, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on			
4	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the			ome	ene	ation	nanz	t ot	her compensation from	the organization	·-	3	X
•	and related organizations greater than \$1									organization		4	Х
5	Did any person listed on line 1a receive or									ces rendered to			
	the organization? If "Yes," complete Sche	dule J for such	pers	son								5	X
Sec 1	tion B. Independent Contractors Complete this table for your five highest of	compensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of con	npensati	on from	
	the organization							,					
	(A) (B) (C									(C) npensatio	on		

(A) Name and business address	(B) Description of services	(C) Compensation
ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, 734 15TH STREET, NW; SUITE 600, WASHINGTON,	1	555,931.
FAIR ELECTIONS LEGAL NETWORK, 1730 RHODE ISLAND AVE, NW; SUITE 712, WASHINGTON, DC	PROJECT MANAGEMENT	350,000.
TIGERCOMM, 1901 N FT MYER DR, SUITE 850, ARLINGTON, VA 22209	MEDIA AND PUBLIC RELATIONS CONSULTING	103,000.
2 Total number of independent contractors (including those in 1) who received months from the organization ► 3	ore than \$100,000 in compensation	

Form 990 (2008)

832009 02-02-09

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, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	2,007,460.	2,007,460.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,	-			
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	165,000.	165,000.		
4	Benefits paid to or for members	203/0001	103,000.		
5	Compensation of current officers, directors,		-		
9	trustees, and key employees				
6	Compensation not included above, to disqualified				
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages		·		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	525,931.	261,350.	211,988.	52,593
b	Legal	33,007.		33,007.	
С	Accounting	6,025.		6,025.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	1,031,816.	994,623.	340.	36,853
12	Advertising and promotion	101,379.	101,364.		15
13	Office expenses	26,610.	23,495.	929.	2,186
14	Information technology	2,821.		2,821.	
15	Royalties				
16	Occupancy	11,254.	10,129.		1,125
17	Travel	63,581.	61,721.		1,860
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,459.	4,459.		
20	Interest	-,	_,,		
21	Payments to affiliates				
2. 22	Depreciation, depletion, and amortization	522.	522.		
23	Insurance	1,275.		1,275.	
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.)	- 1			
а	MEALS	2,277.	2,277.		
b					
С					
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,983,417.	3,632,400.	256,385.	94,632.
26	Joint Costs Check here I 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				
	12-18-08				Form 990 (2008

•				(A) Beginning of year		(B) End of	year	-
	1	Cash - non-interest-bearing		445,715.	1	2,19	5.7	87.
	2	Savings and temporary cash investments		453,611.	2		4,6	
	3	Pledges and grants receivable, net			3			
	4	Accounts receivable, net	. [-		4			
	5	Receivables from current and former officers, directors, trustees, key			-			
	•	employees, or other related parties. Complete Part II of Schedule L			5			
	6	Receivables from other disqualified persons (as defined under section			<u> </u>			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	İ		l			
		Part II of Schedule L			6			
Ø	7	Notes and loans receivable, net	· ·		7			
Assets	8	Inventories for sale or use	· ·					
As	9	Prepaid expenses and deferred charges	F		9	···		
	ı		, 483.		9			
	ì		,403.					
	D	Less accumulated depreciation Complete	71 =	2 077			1 7	<i>c</i> 0
			,715.		10c		1,7	00
	11	Investments - publicly traded securities	· -		11			
	12	Investments - other securities See Part IV, line 11	 		12			
	13	Investments - program-related See Part IV, line 11			13			
	14	Intangible assets	·		14			
	15	Other assets See Part IV, line 11	<u> </u>		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)			16	2,98		
	17	Accounts payable and accrued expenses	· -	49,954.	17	100	0,8	85
	18	Grants payable			18			
	19	Deferred revenue	-		19			
	20	Tax-exempt bond liabilities	L		20			
es	21	Escrow account liability Complete Part IV of Schedule D			21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employe	ees,		- }			
jap		highest compensated employees, and disqualified persons. Complete P.	Part II		[
		of Schedule L	.		22			
	23	Secured mortgages and notes payable to unrelated third parties			23			
	24	Unsecured notes and loans payable .	.		24			
	25	Other liabilities Complete Part X of Schedule D			25			
	26	Total liabilities. Add lines 17 through 25		49,954.	26	10	0,8	<u>85</u> .
		Organizations that follow SFAS 117, check here X and comp	plete					
es		lines 27 through 29, and lines 33 and 34.	1					
nc E	27	Unrestricted net assets			27	2,02	3,2	<u>95.</u>
3ali	28	Temporanly restricted net assets		852,449.	28	<u> </u>	3,0	48
Fund Balanc	29	Permanently restricted net assets			29	·- ·-		
Ξ		Organizations that do not follow SFAS 117, check here	nd					
		complete lines 30 through 34.			- 1			
Net Assets or	30	Capital stock or trust principal, or current funds	L		30			
\ss	31	Paid-in or capital surplus, or land, building, or equipment fund			31			
et/	32	Retained earnings, endowment, accumulated income, or other funds			32			
Z	33	Total net assets or fund balances	L	852,449.	33	2,883	1,3	43.
	34	Total liabilities and net assets/fund balances		902,403.	34	2,982	2,2	28.
Pa	rt XI	Financial Statements and Reporting						
							Yes	No
1	Acco	ounting method used to prepare the Form 990: 🔲 Cash 🛛 🗶 Accru	ual 🔲	Other				
2a	Were	the organization's financial statements compiled or reviewed by an indep	pendent ac	countant?		2a		X
b		the organization's financial statements audited by an independent accou				2b_		Х
		es" to lines 2a or 2b, does the organization have a committee that assume		ibility for oversight of the a	audıt,			
		w, or compilation of its financial statements and selection of an independe		· · ·	•	2c		
За		result of a federal award, was the organization required to undergo an aud			Audit			
		and OMB Circular A-133?		3		3a		Х
b		es," did the organization undergo the required audit or audits?				3b		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)

nonexempt charitable trusts.

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

2008 Open to Public

Inspection

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Name of the organization

Employer identification number

				A LEGACY FUN						2	<u>0-5806</u>	<u> 345</u>	
Paı	rt I	Reason	for Public Char	rity Status (All organiz	ations mu	st complet	e this part) (see ins	tructions)				
he c	organi	zation is not a	a private foundation	because it is: (Please ch	eck only o	ne organiz	zation)						
1		A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2		A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3				ital service organization (n section	170(b)(1)	(A)(iii). (Att	tach Sche	dule H)			
4		A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter t	he hospital	's nam	e,
		city, and state								•	•		
5		•		benefit of a college or ur	niversity ov	wned or op	perated by	a governr	nental uni	t describe	ed in		
		section 170	(b)(1)(A)(iv). (Compl	ete Part II.)									
6		A federal, sta	ite, or local governm	nent or governmental uni	t described	ın sectio	n 170(b)(1	I)(A)(v).					
7	X	An organizati	on that normally rec	ceives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general p	public desc	rıbed ı	n
		_	b)(1)(A)(vi). (Comple				_						
8		A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		An organizati	on that normally rec	ceives. (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, ar	nd gross re	ceipts f	from
		activities rela	ted to its exempt fu	nctions - subject to certa	an excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	invest	ment
		income and u	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization a	after June 3	30, 197	5
			509(a)(2). (Complete	•		•		•	, ,			•	
10			, ,, , ,	perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	I). (see ins	tructions)		
11		An organizatı	on organized and o	perated exclusively for th	ne benefit o	of, to perfo	orm the fur	nctions of,	or to carn	v out the	purposes o	of one	or
		•	•	ations described in secti		•		-		•	•		
			• • •	organization and comple		-		,		X · 7			
		а Туре І	<u>ت</u> ۱۰ <u>ت</u>	¬		e III · Fund		egrated		d 🗔	Type III - 0	Other	
е				at the organization is not			•	•	r more disc	gualified i			n
		-	•	than one or more publicly		-	•	•		-	-		
f			-	tten determination from t		_				(-)(-)		(-7,-7	
•		_	rganization, check ti				F, -, F-	, , , , .					
g			-	organization accepted ar	ov aift or ce	ontribution	from any	of the follo	nwing ners	sons?			
9		•		directly controls, either al			•		• •			Yes	No
		.,	•	upported organization?		007 ******	po.00.10 c		() aa (, 20.011,	11g(i)		
				n described in (i) above?	-)		•	•			11g(ii)		
			•	a person described in (i) (e?					11g(iii)	1 1	
h		• •		about the organizations		-	nnorts	•	•		1119()		
"		1 TOVIDE LITE I	Cilowing information	about the organizations	ane organ	iization su	oports.						
	Nessa	af auga auta d	(::) FIN	(iii) Type of	(iv) Is the c	organization	(v) Did voi	ı notify the	(vi) Is	the	() An	nount o	4
(1)		of supported Inization	(ii) EIN	organization		sted in your			lorganizátio	on in col.		nount o	ı
	UI Y	Inzation		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	(i) organız U.S	.?	Sup	port	
				(see instructions))	Yes	No	Yes	No	Yes	No			
				, , , , , , , , , , , , , , , , , , , ,	<u> </u>								
												•	
										- T			
									<u> </u>				
ota			L	L	<u> </u>	L	<u> </u>						

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

11	Total support. Add lines 7 through 10						8,220,245			
12	Gross receipts from related activities,	etc. (see instructi	ons)			12				
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	on 501(c)(3)				
	organization, check this box and stop			-		<u> </u>	<u> </u>			
Sec	ction C. Computation of Publi	ic Support Pe	rcentage							
14	Public support percentage for 2008 (I	ine 6, column (f) d	ıvıded by line 11, d	column (f))		14	%			
15	Public support percentage from 2007	Schedule A, Part	IV-A, line 26f	-	-	15	%			
16a	16a 33 1/3% support test - 2008. 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										
b	33 1/3% support test - 2007. If the o	organization did no	t check a box on l	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check this	s box			
	and stop here. The organization quali	ifies as a publicly	supported organiz	ation	-					
17a	10% -facts-and-circumstances test	t - 2008. If the org	anızatıon dıd not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,			
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check ti	nis box and stop h	nere. Explain in Pa	rt IV how the organi	zation			
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization .		ightharpoons			
b	10% -facts-and-circumstances test	t - 2007. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is 1	0% or			
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, c	neck this box and	stop here. Explair	n in Part IV how the				
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	. ▶□			
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	a, 16b, 17a, or 17i	o, check this box a	and see instructions	> □			
					Sche	edule A (Form 990 d	or 990-EZ) 2008			

Schedule A (Form 990 or 990-EZ) 2008 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 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 · 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c. 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (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's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage % 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 Section D. Computation of Investment Income Percentage 17 % 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2007. If the organization did not check a box on line 19 a, and line 16 is more than 33 1/3%, 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

	01(c)(4), (5), or (6) organiza	tions Complete Part III.			
Name of orga				Empi	oyer identification number
(B) (1)	ARABELL	A LEGACY FUND		504/s)	20-5806345
Part I-A	•	y all organizations exem	ipt under section	501(c) and section 52	27 organizations.
	See the instructions for S				
1 Provide	a description of the organi	zation's direct and indirect politic	cal campaign activities	in Part IV.	
2 Political	expenditures .			▶\$	
3 Voluntee	er hours			- . •	
Part I-B	To be completed b	y all organizations exem	npt under section	501(c)(3).	
	See the instructions for S				
1 Enter the	e amount of any excise tax	incurred by the organization un	der section 4955	▶\$	
2 Enter the	e amount of any excise tax	incurred by organization manag	gers under section 495	5 ▶\$	
3 If the org	ganization incurred a section	on 4955 tax, did it file Form 4720) for this year?		Yes No
4a Was a co	orrection made?		• •		Yes No
b If "Yes,"	describe in Part IV				
Part I-C	To be completed b	y all organizations exem	npt under section	501(c), except section	n 501(c)(3).
	See the instructions for S				
1 Enter the	e amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2 Enter the	e amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527	
exempt 1	function activities			▶\$	
3 Total of	direct and indirect exempt	function expenditures. Add lines	s 1 and 2 and enter he	re and on	
Form 11	20-POL, line 17b			▶\$	
4 Did the f	iling organization file Form	1120-POL for this year?			Yes No
5 State the	e names, addresses and e	mployer identification number (E	IN) of all section 527 p	olitical organizations to which	h payments were made.
Enter the	e amount paid and indicate	e if the amount was paid from th	e filing organization's fu	unds or were political contrib	outions received and
promptly	and directly delivered to	a separate political organization,	, such as a separate se	gregated fund or a political	action committee (PAC)
If addition	onal space is needed, prov	ide information in Part IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	ν-,			filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization
					If none, enter -0-
			}		
					
					,

Schedule C (Form 990 or 990-EZ) 2008			F04/- V0 H	20-5	806345 Page 2
Part II-A To be completed by	. •	•		it filed Form 5/68	3
(election under sec			edule C for details		
	tion belongs to an aff				
B Check L If the filing organiza	tion checked box A a	nd "limited control" pro	visions apply		
	ts on Lobbying Expe ditures" means amou	nditures unts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion ((grassroots lobbying)		5,436.	
b Total lobbying expenditures to influence	uence a legislative bo	dy (direct lobbying)		221,507.	
c Total lobbying expenditures (add li	nes 1a and 1b)			226,943.	
d Other exempt purpose expenditure	es			3,772,299.	
 e Total exempt purpose expenditure 	s (add lines 1c and 1d	d) (b		3,999,242.	
f Lobbying nontaxable amount Enter	er the amount from th	e following table in botl	n columns	349,962.	
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable amo	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	.000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (er	iter 25% of line 1f)			87,491.	
h Subtract line 1g from line 1a. Enter	r-0- if line g is more th	an line a	-	0.	
i Subtract line 1f from line 1c Enter	-0- if line f is more tha	n line c		0.	
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	ation file Form 4720	_	
reporting section 4911 tax for this	year?			<u> </u>	Yes No
	ations that made a s	eraging Period Under section 501(h) election structions for lines 2a	do not have to comp		
	Lobbying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount		0.	0.	349,962.	349,962.
b Lobbying ceiling amount					F04 042
(150% of line 2a, column(e))			· .=.		524,943.
c Total lobbying expenditures		0.	0.	226,943.	226,943.
d Grassroots non-taxable amount		0.	0.	87,491.	87,491.
e Grassroots ceiling amount		· · · · · · · · · · · · · · · · · · ·			
(150% of line 2d, column (e))					131,237.
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `					
f Grassroots lobbying expenditures		0.	0.	5,436.	5,436.

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990 EZ) 2008 ARABELLA LEGACY FUND 20-5806345 Page 3

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details

local legislation, or referendum, that a Volunteers? b Paid staff or man c Media advertiser				(a))	(b)
local legislation, or referendum, that a Volunteers? b Paid staff or man c Media advertiser				Yes	No	Amo	ount
or referendum, the a Volunteers? b Paid staff or mar c Media advertiser	did the filing organization	n attempt to influence foreign	, national, state or				
a Volunteers?b Paid staff or marc Media advertiser	including any attempt to	influence public opinion on a	legislative matter				
b Paid staff or marc Media advertiser	nrough the use of.				j		
c Media advertiser							
	agement (include comp	ensation in expenses reporte	d on lines 1c through 1i)?				_
- Madenaa ta mam	nents?						
a Mailings to mem	bers, legislators, or the p	oublic?					
e Publications, or	oublished or broadcast s	statements?				•	
f Grants to other of	organizations for lobbying	g purposes?					
g Direct contact w	th legislators, their staffs	s, government officials, or a le	egislative body?				
h Rallies, demonst	rations, seminars, conve	entions, speeches, lectures, c	r any other means?				
i Other activities?	If "Yes," describe in Part	t IV					
j Total lines 1c thr	ough 1ı						
a Did the activities	in line 1 cause the organ	nization to be not described i	n section 501(c)(3)?				
b If "Yes," enter th	e amount of any tax incl	urred under section 4912					
c If "Yes," enter th	e amount of any tax incu	urred by organization manage	rs under section 4912				
d If the filing organ	ization incurred a section	n 4912 tax, did it file Form 47	20 for this year?				
art III-A To be	completed by all of	organizations exempt	under section 501(c)(4)	, section (501(c)(5)	, or sect	ion
501(c	(6). See the instructions	s for Schedule C for details.				· · · · · · · · · · · · · · · · · · ·	
					<u> </u>	Yes	N
Were substantia	lly all (90% or more) due:	s received nondeductible by	members?		1		
Did the organiza	tion make only in-house l	lobbying expenditures of \$2,	000 or less?		2		
		obbying and political expendi	tures from the prior year? under section 501(c)(4)		3		
	ered "Yes." See Schents nts and similar amounts	edule C instructions for detail from members	ls		1		
Section 162(e) n	on-deductible fobbying a	and political expenditures (do	not include amounts of poli-	tical			
expenses for w	hich the section 527(f) t	tax was paid).					
a Current year			_		2a		
b Carryover from la	ast year		·	_	2b		
c Total					2c		
A	nt reported in section 60	033(e)(1)(A) notices of nonder	luctible section 162(e) dues		3		
Aggregate amou			n line 3, what portion of the ex	cess			
			f nondeductible lobbying and				
If notices were s	,			•	4		
If notices were s does the organiz	•	expenditures (line 2c total m	inus 3 and 4)			,,,,,	
If notices were s does the organiz expenditure nex			· · · · · · · · · · · · · · · · · · ·				
	t year?	expenditures (line 2c total m		political	4 5		
If notices were s does the organiz expenditure nex Taxable amount	emental Information	<u> </u>			ine 1. Alaa		
If notices were s does the organiz expenditure nex Taxable amount art IV Supp	emental Information	required for Part I.A. line 1. D	art I.R. line 4: Part I.C. line 5, a	nd Part II.R I		complete	this
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl mplete this part to	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Aiso	, complete	this
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl mplete this part to	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this p
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl implete this part to	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this p
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl implete this part to	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this p
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl implete this part to p	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this p
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl complete this part to p	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this f
does the organizexpenditure next Taxable amount	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this f
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl complete this part to p	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this
If notices were s does the organiz expenditure nex Taxable amount art IV Suppl implete this part to	provide the descriptions	required for Part I-A, line 1; P	art I-B, line 4; Part I-C, line 5, a	nd Part II-B, I	ine II. Also	, complete	this

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that

OMB No 1545-0047 Open to Public Inspection

Name of the organization

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer identification number 20-5806345

	ARABELLA LEGACY FU		20-5806345
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	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 fu	inde
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
J	for charitable purposes and not for the benefit of the donor of	,	, – –
Pai			
1	Purpose(s) of conservation easements held by the organizat		, mie 7.
'	Preservation of land for public use (e.g., recreation or p		olly, and and and area
	Protection of natural habitat	Preservation of certified his	storic structure
_	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a conserva	tion easement on the last day
	of the tax year		
			Held at the End of the Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	•	2b
С	Number of conservation easements on a certified historic str	1,7	2c
d	Number of conservation easements included in (c) acquired	•	_ 2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	anization during the taxable
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, violations, and	
	enforcement of the conservation easements it holds?		L Yes L No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	_	<u></u>
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing easements during the year ► \$	····
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)((B)(i)
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the o	rganization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections o		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, no	ot to report in its revenue statement and balanc	e sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public se	ervice, 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 sh	neet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service, pro-	vide the following amounts relating to
	these items	, , , , , , , , , , , , , , , , , , , ,	ğ ,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(2) Assets restricted in Farm 000 Part V		▶ \$
2	If the organization received or held works of art, historical tre		provide
_	the following amounts required to be reported under SFAS 1		, p. 01.00
а	Revenues included in Form 990, Part VIII, line 1	To roughly to those holds.	> \$
h	Assets included in Form 000. Dort V		. \$
U	Assets included in Form 990, Part X		. • •

		A LEGACY F			·		2	<u> 20 – 58</u>	0634	<u>5 Pa</u>	ge 2
Par	t III Organizations Maintaining C	ollections of A	<u>rt, Hist</u>	torical Tr	easures, c	or Oth	er Simila	r Asse	ts (conti	nued)	
3	Using the organization's accession and other	r records, check any	of the f	ollowing tha	it are a signif	icant us	e of its colle	ection ite	ms (chec	k all	
	that apply).										
а	Public exhibition	d	ı 🗀 1	Loan or exc	hange progra	ams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ney further tl	he organizati	on's exe	mpt purpo	se in Par	t XIV.		
5	During the year, did the organization solicit or	r receive donations	of art, h	storical trea	sures, or oth	er sımıla	r assets				
	to be sold to raise funds rather than to be ma	aintained as part of	the organ	nization's co	ollection?			Ε	Yes		No
Par	t IV Trust, Escrow and Custodial					ered "Ye	s" to Form	990. Par		9. or	
	reported an amount on Form 990, Par		•	_				•	,	•	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets no	t included				
	on Form 990, Part X?		•						Yes		No
b	if "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing 1	table	•	•					
	, .	•	J						Amoun		
c	Beginning balance						1c				
ď	Additions during the year	•				•	1d				
-	Distributions during the year	•	••	•			1e		-		
•	Ending balance				•	•	1f	_			
22	Did the organization include an amount on Fo	orm 990 Part X line	212	-			<u></u>		Yes		No
	If "Yes," explain the arrangement in Part XIV.						-	L	_ 103		140
Par			ered "Ye	s" to Form 9	990 Part IV	line 10					
		(a) Current year		rior year	(c) Two yea		(d) Three ye	ars back	(e) Four	vears h	
1a	Beginning of year balance	(a) Content year	(5)	noi yeai	(C) 1 WO yea	13 Dack	(d) Times ye	ars back	(e) i oui	years	uok
b	Contributions								-		
_	Investment earnings or losses										
C											
d	Grants or scholarships									-	
e	Other expenditures for facilities					l					
_	and programs				-						
1	Administrative expenses										
g	End of year balance				<u> </u>				<u> </u>		—
2	Provide the estimated percentage of the year										
а	Board designated or quasi-endowment		_%								
ь	Permanent endowment	%									
		%		. ,				_			
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	ered for t	the organiza	ation	ſ		
	by:								1 1	Yes	No
	(i) unrelated organizations .		-					-	3a(i)	+	
	(ii) related organizations								3a(iı)		
b	If "Yes" to 3a(ii), are the related organizations	· · · · · · · · · · · · · · · · · · ·							3b		
4	Describe in Part XIV the intended uses of the				 						
Pai	t VI Investments - Land, Building			e Form 990	, Part X, line	10.					
	Description of investment	(a) Cost or o basis (investr			or other (other)	(c) [Depreciation	ו	(d) Bool	k value	
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment				3,483.		1,71	.5.		1,76	<u> 8.</u>
e	Other .										
Total	. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colu	ımn (B),	line 10(c).)			_			1,76	. 8

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

(a) Description of security or category (including name of security)	(b) Book value	(c) Method Cost or end-of-	l of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
	 		
	ļ		
			
Total. (Col (b) should 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		d of valuation
		Cost or end-or-	year market value
		····	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)	·		
Part IX Other Assets. See Form 990, Part X, In			
(a) Description		(b) Book value
			,
Total. (Column (b) should equal Form 990, Part X, col (B)	line 15)	<u> </u>	<u> </u>
Part X Other Liabilities. See Form 990, Part X			
(a) Description of liability	(t) Amount	
Federal income taxes			

Schedule F (Form 990)

Statement of Activities Outside the United States

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

Open to Public Inspection

Nan	ne of the organization					Employer ident	ification number
ΔR	ABELLA LEGAC	Y FUND				20-58063	45
	rt I General Info	ormation on A	ctivities Out	side the United States. Comple	ete if the orgai	nization answered	"Yes"
	to Form 990, Pa	art IV, line 14b					
1	For grantmakers. Doe	es the organization	n maintain record	is to substantiate the amount of the gr	ants or assist		
	grantees' eligibility for	the grants or assi	stance, and the s	selection criteria used to award the gra	nts or assista	nce?	Yes No
2	For grantmakers. Des	scribe in Part IV th	e organization's	procedures for monitoring the use of g	rant funds ou	tside the United Si	ates.
3	Activities per Region (Use Schedule F-1	(Form 990) if ad	ditional space is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	ıs a pro describi	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures in region
							
							

20-5806345

ARABELLA LEGACY FUND

Schedule F (Form 990) 2008

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

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han \$5,(if addition
re than \$5,(90) if addition
more than \$5,0	n 990) if additior
ved more than \$5,0	Form 990) if addition
sceived more than \$5,0	-1 (Form 990) if addition
to received more than \$5,0	lle F-1 (Form 990) if addition
t who received more than \$5,(edule F-1 (Form 990) if addition
lent who received more than \$5,(Schedule F-1 (Form 990) if addition
recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,00	Use Schedule F-1 (Form 990) if additional space is needed

(i) Method of valuation (book, FMV, appraisal, other)						
(h) Description of non-cash assistance						
(g) Amount of non-cash assistance	0	0				ovided a
(f) Manner of cash disbursement	140000, WIRE TRANSFER	25 000 WIRE TRANSFER				e or counsel has pr
(e) Amount of cash grant	140000"	25,000,1				which the grante
(d) Purpose of grant	FUBLIC AWARENESS EVENT FOR POVERTY CONDUCTED IN CONJUNCTION WITH THE	TO HOLD A CONFERENCE TITLED: "G8 INTERNATIONAL PARLIAMENTARIAN'S				Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has browded a
(c) Region	EUROPE	SIA AND THE				e recognized as charities
(b) IRS code section and EIN (if applicable)						organizations that ar
1 (a) Name of organization						2 Enter total number of

Enter total number of other organizations or entitles section 501(c)(3) equivalency letter

SEE PART IV FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2008

က

Page 3

ARABELLA LEGACY FUND

Schedule F (Form 990) 2008

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. 20-5806345

Use Schedule F.1 (Form 990) if additional space is needed

Schedule F (Form 990) 2008 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2008 ARABELLA LEGACY FUND 20-5806345 Pag	<u>ge 4</u>
Part IV Supplemental Information Complete this part to provide the information required by Part I, line 2, and any other additional information	
SCHEDULE F, PART I, LINE 2: FOR THE FOREIGN GRANTS DISBURSED, THE	
ORGANIZATION REQUIRES THAT ORGANIZATIONS RECEIVING FUNDS SUBMIT A	
PROPOSAL AND PROVIDE POST-GRANT REPORTS.	
PART II, COLUMN (D):	
REGION: EUROPE	
(D) PURPOSE OF GRANT: PUBLIC AWARENESS EVENT FOR POVERTY CONDUCTED IN	
CONJUNCTION WITH THE G8 SUMMIT.	
REGION: EAST ASIA AND THE PACIFIC	
(D) PURPOSE OF GRANT: TO HOLD A CONFERENCE TITLED: "G8 INTERNATIONAL	
PARLIAMENTARIAN'S CONFERENCE ON POPULATION AND SUSTAINABLE DEVELOPMENT -	
GLOBAL HEALTH, CLIMATE CHANGE AND FOOD SECURITY."	

CHEDULE I		,		•			OMB No 1545-0047
Form 990)		Grants and Governr	ants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations to U.S.	æ		2008
epartment of the Treasury	▲ Comp	Complete if the organization	in answered "Yes,	" on Form 990, Pa	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.		Open to Public
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Attach to Form 990.	n 880.			Employer identification number
name or the organization ARABELLA	LEGACY FU	FUND			:		20-5806345
10	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	
	ıstance?						X Yes No
꺐	rocedures for moni	toring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States, Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	• United States, C	omplete if the orga	ınızatıon answered "Y	'es" on 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 I-1 (Form 990) if additional space is needed	\$5,000 Check this	box if no one recipier	it received more th	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							TO SUPPLEMENT FUNDING
MERICAN HIKING SOCIETY							FROM TWO OTHER SOURCES
N.							THAT WILL ALLOW AMERICAN
ILVER SPRING, MD 20910	51-0211993	501(C)(3)	10,000.	0			HIKING SOCIETY TO
							TO SUPPORT NEW MEXICO
ENTER OF SOUTHWEST CULTURE							PUBLIC LANDS ACTION
00 COPPER AVE, NW; SUITE 103							NETWORK (NM PLAN), A NEW
LBUQUERQUE, NM 87102	85-0402832	501(C)(3)	100,000	•0			COALITION OF NEW MEXICANS
RIENDS OF IRONWOOD FOREST							BIOLOGICAL, GEOLOGICAL,
O BOX 3444							ARCHAEOLOGICAL, AND
UCSON, AZ 85722	70-1032020	501(C)(3)	68 600	0			HISTORICAL RESOURCES AND
							TO ENSURE THE BUREAU OF
ATIONAL CONSERVATION SYSTEM							LAND MANAGEMENT IS ABLE
OUNDATION - PO BOX 618 - DURANGO,							TO PROVIDE LONG-TERM
0 81301	20-8924520	501(C)(3)	48 173.	0			PROTECTION FOR THE LANDS
ROGRESSIVE FUTURE, INC							TO FUND THE
536 WYNKOOP ST. SUITE 100							ORGANIZATION'S COMMUNITY
	26-1525298	501(C)(4)	299,970	0			VOTER'S PROJECT,
ROJECT VOTE							TO FUND THE
39 BICHTH ST SE. SITTE 202							ORGANIZATION'S VOTER
	72-1268719	501(0)(3)	300 000	0			PARTICIPATION PROJECT.
1 2 2	ond dovernment of	raanizations					15.
	and government of				-		2.
ء ا	egiton Act Notice	see the Instructions	for Earm 990				Schedule I (Form 990) 2008
רטו דוויאמנץ אכן מווט	יייייייייייייייייייייייייייייייייייייי	raper work negation Act Notice, see the man actions for 1911 350.	SCRIPTION	מ			+

(f) Description of non-cash assistance (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Use Schedule I-1 (Form 990) if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information LINE 2: FOR MOST GRANTS CONTRIBUTED, THE ORGANIZATION REQUIRES THAT ORGANIZATIONS RECEIVING FUNDS SUBMIT A PROPOSAL AND PROVIDE (H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPLEMENT FUNDING FROM TWO OTHER SOURCES THAT WILL ALLOW AMERICAN HIKING SOCIETY TO CONTINUE THROUGHOUT 2008 ITS EFFORT TO COORDINATE AND SERVE AS A RESOURCE TO GRASSROOTS (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients PART II, LINE 1, COLUMN (H): (a) Type of grant or assistance ALLIES IN THE PACIFIC. PART I, POST-GRANT REPORTS SCHEDULE I, Part IV Part III

Schedule I (Form 990) 2008

832102 12-18-08

Page 2

20-5806345

ARABELLA LEGACY FUND

Schedule I (Form 990) 2008

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Continuation Sheet for Schedule I (Form 990)

▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047
2008
Open to Public,
Inspection

Ope In Oper identification nu

Employer identification number 20-5806345

ARABELLA LEGACY FUND

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	uzations in the U.	S. (Schedule I (For	m 990), Part II.)		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY - 2000 P STREET, NW; SUITE 240 - WASHINGTON, DC 20036	93-1102740	501(C)(3)	25,000,	0			THE ORGANIZATION WILL DEMONSTRATE THE NEGATIVE EFFECTS THAT IRRESPONSIBLE ATV USE IS
SAVE THE CHILDREN 54 WILTON RD WESTPORT, CT 06880	06-0726487	501(C)(3)	20 000	0			TO FUND DISASTER RECOVERY EFFORTS IN BURMA,
A SMARTER COLORADO 3165 S WAXBERRY WAY DENVER, CO 80202	26-2695462	501(C)(4)	174,000	0			TO PROMOTE PASSAGE OF COLORADO AMENDMENT 58.
D 7 7	94-3110245	501(C)(3)	73,000.	0			TO FUND THE ORGANIZATION'S RENEWAL: A STUDENT CREATION CARE NETWORK PROJECT,
VINEYARD CHURCH OF ANN ARBOR 2275 PLATT RD ANN ARBOR MT 48104	38-2508282	501(C)(3)	000 89	0			\$40,000 TO FUND THE ORGANIZATION'S RENEWAL: A STUDENT CREATION CARE NETWORK PROJECT, \$28,000
WESTERN CONSERVATION FOUNDATION 1536 WYNKOOP ST, SUITE 510 DENVER, CO 80202	33-1107506	501(C)(3)	344,830,	0			5 6 6 6
WESTERN RESOURCE ADVOCATES 2260 BASELINE RD, SUITE 200 BOULDER, CO 80302	84-1113831	501(C)(3)	24,640.	0			TO FUND THE ORGANIZATION'S COLORADO OIL & GAS CONSERVATION COMMISSION PROJECT.
WHITE RIBBON ALLIANCE FOR SAFE MOTHERHOOD - ONE THOMAS CIRCLE, NW - WASHINGTON, DC 20005	20-2029170	501(C)(3)	42,747.	0			CAMPAIGN TO REDUCE MATERNAL MORTALITY AND MORBIDITY,
2 Enter total number of Section 501(c)(3) and government organizations	nd government or	ganizations	:	-			

 ² Enter total number of Section 501(c)(3) and government organiza
 3 Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

REHABILITATION IN ANTIOUE ORGANIZATION'S PROGRAMS. Open to Public, OMB No 1545-0047 ORGANIZATION'S GET OUT ORGANIZATION'S TYPHOON Inspection (h) Purpose of grant or assistance Employer identification number TO PROVIDE GENERAL THE VOTE PROJECT UPPORT TO THE FRANK CALAMITY 20-5806345 TO FUND THE TO FUND THE (g) Description of non-cash assistance appraisal, other) (f) Method of valuation (book, FMV, Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990) (e) Amount of non-cash assistance (d) Amount of cash grant 5 000 200,000 200 000 (c) IRC Code if applicable section 501(C)(3) 501(C)(3) 501(C)(3) Enter total number of Section 501(c)(3) and government organizations ARABELLA LEGACY FUND 55-0889748 20-2035052 95-1922279 (b) EIN 34834 WEYERHAEUER WAY S, PO BOX 97 WORKING AMERICA EDUCATION FUND (a) Name and address of organization or government FEDERAL WAY, WA 98063-9716 WOMEN VOTE WASHINGTON DC 20036 WASHINGTON, DC 20006 815 16TH STREET, NW Name of the organization 1707 L STREET, NW Department of the Treasury Internal Revenue Service WOMEN'S VOICES, SCHEDULE 1-1 WORLD VISION (Form 990)

B32241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I-1 (Form 990) 2008

- (H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT NEW MEXICO PUBLIC LANDS

 ACTION NETWORK (NM PLAN), A NEW COALITION OF NEW MEXICANS WHO USE THE

 STATE'S PUBLIC LANDS THAT ARE WORKING TO PROMOTE RESPONSIBLE USE OF THESE

 LANDS AND ENSURE THAT THE STATE'S ORV-RELATED LAWS ARE STRONGLY AND

 EFFECTIVELY ENFORCED IN A WAY THAT MAKES SENSE TO ALL NEW MEXICANS.
- (H) PURPOSE OF GRANT OR ASSISTANCE: TO PROTECT THE BIOLOGICAL,

 GEOLOGICAL, ARCHAEOLOGICAL, AND HISTORICAL RESOURCES AND VALUES FOR WHICH

 THE IRONWOOD FOREST NATIONAL MONUMENT WAS ESTABLISHED.
- (H) PURPOSE OF GRANT OR ASSISTANCE: TO ENSURE THE BUREAU OF LAND

 MANAGEMENT IS ABLE TO PROVIDE LONG-TERM PROTECTION FOR THE LANDS AND

 WATERS WITHIN THE NATIONAL LANDSCAPE CONSERVATION SYSTEM.
- (H) PURPOSE OF GRANT OR ASSISTANCE: THE ORGANIZATION WILL DEMONSTRATE

 THE NEGATIVE EFFECTS THAT IRRESPONSIBLE ATV USE IS HAVING ON RURAL

 COMMUNITIES, INCLUDING OUT-GUNNED STAFF AND LAW ENFORCEMENT OFFICERS AS

 MEASURED THROUGH 1) ASSAULTS AND OTHER INCIDENTS; 2) PUBLIC SAFETY AND

 LAW ENFORCEMENT EFFECTIVENESS, AS MEASURED BY DIVERSION OF STAFF TIME,

 FUNDING AND OTHER RESOURCES; AND 3) BOTTOM-LINE LOSSES OF PUBLIC

 RESOURCES.
- (H) PURPOSE OF GRANT OR ASSISTANCE: \$40,000 TO FUND THE ORGANIZATION'S

 RENEWAL: A STUDENT CREATION CARE NETWORK PROJECT. \$28,000 TO FUND THE

 ORGANIZATION'S CREATION CARE FOR PASTORS PROJECT.
- (H) PURPOSE OF GRANT OR ASSISTANCE: \$130,000 TO PROVIDE THE RESOURCES

SCHEDULE L

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

Open To Public Inspection

Employer identification number

	AR.	ABELLA	LEGAC	Y FUNI	D				2	0-58	0634	5	
Part I	Excess Benefit	t Transacti	ons (secti	on 501(c)(3) and section	501(c)(4)	organizatio	ns only)					
	To be completed by	y organizations	s that answ	vered "Yes	s" on Form 990	0, Part IV,	line 25a or 2	25b, or F	orm 990	0-EZ, Par	t V, line	40b	
1		15 1				4 > 5						(c) Corr	ected?
	(a) Name of dis	squalified pers	son			(b) L	Description (of transa	ction		!	Yes	No
		<u> </u>				_							
		· ·											
								-					
	-			-									
	r the amount of tax Imp	oosed on the o	organization	n manager	s or disqualifie	ed persons	s during the	year un	der	▶ \$			
		any, on line 2, above, reimbursed by the organization /or From Interested Persons. by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (b) Loan to or from (c) Original principal (d) Balance due (e) In (f) Approved by board or organization?											
O Lino	i ano amount of tax, in c	y, oo <u>L</u> ,	ubovo, rom		y and Organiza			-	••	•			
Part II	Loans to and/o	or From Int	erested	Persons	s.		 						
	To be completed by	v organization:	s that ansv	vered "Yes	s" on Form 99	0. Part IV.	line 26. or F	orm 990	-EZ. Pa	rt V. line	38a.		
(a) l	Name of interested							i —		(f) Apr	roved	(a) W	ritten
	rson and purpose					(u) Dan		defa	ult?				
		То	From	7	1			Yes	No		· .	Yes	No
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Total		. •		-	▶ \$								
Part III	Grants or Assi	stance Ber	nefiting l	nterest		s.		'					
	To be completed by	v organization:	s that ansv	vered "Yes	s" on Form 99	0. Part IV.	line 27						
								and		(c) Amou	unt of ar	ant or tv	pe
	(a) mamo or microsida	. ролоси		(b) Holar				u					
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	To From Yes No Y												
Part IV	Business Tran	sactions In	volving	Interest	ed Person	s.						•	
	To be completed b	y organization	s that ansv	vered "Yes	s" on Form 99	0, Part IV,	lines 28a, 2	8b, or 2	3c			_	
			m Interested Persons. Izations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. Loan to or from e organization? To From (c) Original principal amount (d) Balance due default? Yes No No Yes No No Yes No										
				person ar	nd the organiz	(b) Description of transaction (b) Description of transaction (c) Corrected? Yes No (d) Part IV, line 26, or Form 990-EZ, Part V, line 38a. (d) Balance due (e) In default? Yes No Yes No Yes No Yes No (d) Part IV, line 27 Then interested person and ganization (c) Amount of grant or type of assistance (e) Amount of transaction (d) Description of transaction (e) Amount of grant attion (e) Sharing of organization (e) Amount of transaction (e) Sharing of organization (e) Sharing organization (e) Sharing of organization (e) Sharing orga							
												Yes	No
ARABE	LLA PHILANT	HROPIC	INVEN'	TITY	MORE TH	AN 35	555	,931	.CON	SULT	'ING/		X
*													
LHA For	Privacy Act and Pape	erwork Reduc	tion Act N	otice, see	the Instructi	ions for Fo	orm 990.		Schedu	le L (For	m 990 c	r 990-E	Z) 2008

(Form 990)

*Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

ARABELLA LEGACY FUND

Employer identification number 20-5806345

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
THE ORGANIZATION ADDED A NUMBER OF NEW PROGRAMS INCLUDING THE CLIMATE
CHANGE WIKI, CONSERVATION LEADERSHIP PROGRAM, DISASTER RECOVERY FUND,
GLOBAL HEALTH SMALL GRANTS INITIATIVE, FRIENDS OF IRONWOOD FOREST,
VOTER REGISTRATION FUND, WESTERN CLEAN ENERGY INITIATIVE, AND WESTERN
LANDS CONSERVATION PROJECT. SEE PROGRAM DESCRIPTIONS FOR GREATER
DETAIL.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
THE ORGANIZATION DISCONTINUED OR PUT ON HOLD THREE EXISTING PROGRAMS:
CITIZENS AGAINST UN-AMERICAN VOTER INTIMIDATION PROJECT, THE AGUA FRIA
NATIONAL MONUMENT, AND THE GLOBALIST FOUNDATION.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
FAIR ELECTIONS LEGAL NETWORK: A NATIONAL, NONPARTISAN NETWORK OF
EXPERIENCED ELECTION LAWYERS WHO ARE INVOLVED IN REMOVING IMPEDIMENTS
TO INCREASED VOTER PARTICIPATION. THE CORE PROJECT MISSION IS TO HELP
BRING ABOUT INCREASED VOTER PARTICIPATION BY TRADITIONALLY
UNDER-REPRESENTED CONSTITUENCIES.
EXPENSES \$ 315031. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
WESTERN LANDS CONSERVATION PROJECT: THIS PROJECT WORKS TO SUPPORT
INITIATIVES THROUGH FUNDING THAT PROMOTE CONSERVATION EFFORTS IN
WESTERN LANDS.
EXPENSES \$ 321959. INCLUDING GRANTS OF \$ 308830. REVENUE \$ 0.

(Form 990)

832211 12-18-08

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

ARABELLA LEGACY FUND

Employer identification number $20 - \underline{5806345}$

CREATION CARE FUND (CCF): THIS FUND PROVIDES FINANCIAL AND TECHNICAL
SUPPORT TO CHRISTIAN GRASSROOTS EFFORTS TO CARE FOR GOD'S GRACIOUS GIFT
OF CREATION. THE CCF PROVIDES A NEW AND STRATEGIC VEHICLE FOR
SUPPORTING THE GRASSROOTS OF THE CHRISTIAN CREATION CARE MOVEMENT AND
ITS UNIQUE EFFORTS.
EXPENSES \$ 247707. INCLUDING GRANTS OF \$ 141000. REVENUE \$ 0.
CONSERVATION LEADERSHIP PROGRAM: THIS PROJECT SEEKS TO PROMOTE
PROGRESSIVE CONSERVATION LEADERSHIP IN THE NEXT PRESIDENTIAL
ADMINISTRATION.
EXPENSES \$ 142291. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
211 211 22
EDITENDO OF TRANSPOOR BARROW, MUTO PRATICAL MARKON
FRIENDS OF IRONWOOD FOREST: THIS PROJECT WORKS TO PROTECT THE
BIOLOGICAL, GEOLOGICAL, ARCHAEOLOGICAL, AND HISTORICAL RESOURCES AND
VALUES FOR WHICH THE IRONWOOD FOREST NATIONAL MONUMENT WAS ESTABLISHED.
EXPENSES \$ 68600. INCLUDING GRANTS OF \$ 68600. REVENUE \$ 0.
FRIENDS OF MISSOURI BREAKS: THIS PROJECT SEEKS TO BRING TOGETHER
CITIZENS AND BUSINESS OWNERS WHO CARE ABOUT THE MISSOURI RIVER BREAKS
NATIONAL MONUMENT AND RECOGNIZE ITS POTENTIAL AS AN ECONOMIC,
RECREATIONAL, AND CULTURAL ASSET TO MONTANA.
EXPENSES \$ 52815. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
NATIONAL CONSERVATION SYSTEMS FOUNDATION: THIS PROJECT WORKS TO ENSURE
THE BUREAU OF LAND MANAGEMENT IS ABLE TO PROVIDE LONG-TERM PROTECTION
FOR THE LANDS AND WATERS WITHIN THE NATIONAL LANDSCAPE CONSERVATION LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

ARABELLA LEGACY FUND

Employer identification number 20 – 5806345

SYSTEM.
EXPENSES \$ 48173. INCLUDING GRANTS OF \$ 48173. REVENUE \$ 0.
DISASTER RECOVERY FUND: THIS FUND SUPPORTS LONG-TERM RECOVERY EFFORTS
IN THE AFTERMATH OF A DISASTER. THE FUND SUPPORTS ORGANIZATIONS HELPING
COMMUNITIES DEVASTATED BY DISASTERS REBUILD THE AGRICULTURAL, HEALTH,
EDUCATION, ENVIRONMENTAL AND OTHER INFRASTRUCTURE SYSTEMS ON WHICH THEY
DEPEND.
EXPENSES \$ 25000. INCLUDING GRANTS OF \$ 25000. REVENUE \$ 0.
CLIMATE CHANGE WIKI: THIS PROJECT SEEKS TO DEVELOP AND MAINTAIN A
WEBSITE THAT SERVES AS A CENTRAL DATABASE (OR "WIKI") OF INSTITUTIONAL
DATA AND RESEARCH RELATED TO CLIMATE CHANGE. THIS WEBSITE WILL BE
UTILIZED BY FOUNDATIONS, ORGANIZATIONS AND OTHER INSTITUTIONS INVESTED
IN CLIMATE CHANGE.
EXPENSES \$ 16677. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
WESTERN CLEAN ENERGY INITIATIVE: THIS PROJECT PROVIDES TIMELY AND
EFFECTIVE FUNDING TO PROJECTS ADDRESSING CLEAN ENERGY INITIATIVES IN
WESTERN LANDS.
EXPENSES \$ 243503. INCLUDING GRANTS OF \$ 238140. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 2: ERIC KESSLER, ARABELLA LEGACY FUND
BOARD PRESIDENT AND BRUCE BOYD, ARABELLA LEGACY FUND BOARD SECRETARY SHARE
A BUSINESS RELATIONSHIP.

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

ARABELLA LEGACY FUND	20-5806345
FORM 990, PART VI, SECTION A, LINE 3: ARABELLA LEGACY	FUND HAS AN
ADMINISTRATIVE SERVICES AGREEMENT WITH ARABELLA PHILA	NTHROPIC INVESTMENT
ADVISORS, LLC. ARABELLA LEGACY FUND PAID \$555,931 DUR	ING THE YEAR FOR
MANAGEMENT/ADMINISTRATIVE/PERSONNELL/CONSULTING SERVI	CES TO ARABELLA
PHILANTHROPIC INVESTMENT ADVISORS, LLC.	-
FORM 990, PART VI, SECTION A, LINE 8B: ARABELLA LEGAC	Y FUND DOES NOT HAVE
ANY COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE	GOVERNING BODY; THUS
DOES NOT DOCUMENT MEETINGS HELD OR WRITTEN ACTIONS BY	SUCH A COMMITTEE.
FORM 990, PART VI, SECTION A, LINE 10: THE BOARD OF D	IRECTORS AND THE
ORGANIZATION'S LEGAL COUNSEL DID REVIEW THE RETURN PR	IOR TO FILING. IN
ADDITION, MANAGEMENT PERFORMED AN INDEPTH REVIEW PRIOR	R TO THE RETURN BEING
PROVIDED TO THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION B, LINE 12C: ALL PERSONS C	OVERED BY THE
ORGANIZATION'S CONFLICT OF INTEREST POLICY ARE RECULR	ED TO DECLARE

CONFLICTS OF INTEREST ANNUALLY. COVERED INDIVIDUALS CANNOT VOTE ON MATTERS BEFORE THE BOARD WHEN THEY HAVE A CONFLICT IN THE MATTER. DISINTERESTED MEMBERS MUST DETERMINE WHETHER OR NOT THERE ARE ANY SUITABLE ALTERNATIVES TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT. IF A COVERED PERSON IS FOUND IN VIOLATION OF THIS POLICY IT MAY BE CAUSE FOR REMOVAL FROM THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Employer identification number

ARABELLA LEGACY FUND 20-5806345 AVAILABLE. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF INTERESTED PERSON: ARABELLA PHILANTHROPIC INVESTMENT ADVISORS. LLC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: ENTITY MORE THAN 35% OWNED BY ERIC KESSLER-PRES AND BRUCE BOYD SEC (C) AMOUNT OF TRANSACTION \$ 555931. (D) DESCRIPTION OF TRANSACTION: CONSULTING/ADMINISTRATIVE SERVICES WERE PROVIDED TO ARABELLA LEGACY FUND BY ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC AT RATES APPROVED BY THE ORGANIZATION'S BOARD OF DIRECTORS. IN ADDITION. SALARIES AND RELATED COSTS WERE ALSO PROVIDED BY ARABELLA PHILANTHROPIC INVESTMENT ADVISORS, LLC. THE CONTRACT WAS APPROVED BY INDEPENDENT MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS. (E) SHARING OF ORGANIZATION REVENUES? = NO

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Identification of Disregarded Entities

Part

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

2008 ' Open to Public Inspection

OMB No 1545-0047

Employer identification number

20-5806345

▶ See separate instructions. ARABELLA LEGACY FUND Name of the organization

Direct controlling entity Œ 25,943.N/A End-of-year assets Œ Œ 0 Total income 0 9 Legal domicile (state or foreign country) <u>O</u> <u>Θ</u> AMERICANS WHO ENJOY THE ENVIRONMENTALLY MINDED Primary activity <u>@</u> <u>@</u> RESPONSIBLE TRAILS AMERICA LLC - 26-1417500 COALITION OF Identification of Related Tax-Exempt Organizations Name, address, and EIN of disregarded entity 3 ARLINGTON, VA 22209 1901 N FT MYER DR Part II

Schedule R (Form 990) 2008			0.	ce, see the Instructions for Form 99	LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
de de company de servicio de la company de					
entity	status (if section 501(c)(3))	section	foreign country)		of related organization
Direct controlling	Public charity	Exempt Code	Legal domicile (state or	Primary activity	Name, address, and EIN
) -	2	2	(c)

20-5806345 Page 2.

Schedule R (Form 990) 2008 ARABELLA LEGACY FUND

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicite (state or	(C) (D) Legal domicile Direct controlling entity	(E) Predominant income (related, investment,	(F) Share of total income	(G) Share of end-of-year	(H) Disproportion-	(I) Code V-UBI	(J) General or managing
		foreign country)				assets	Yes No	20 of Schedule K-1 (Form 1065)	Yes No
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust	ganizations Taxable as a Cc	rporation or	Trust						

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Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
		•					
832162 12-23-08						Schedule R (Form 990) 2008	·m 990) 2008

Page 3

Part V Transactions With Related Organizations

		-	1-
Note. Complete line 1 if any entity is listed in Parts II, III, or IV.		<u>*</u>	Yes No
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?			_
a Receipt of (i) interest (ii) annuities (iii) royalities (iv) rent from a controlled entity	•	1a	×
b Gift, grant, or capital contribution to other organization(s)		1b	×
		5	×
		P	×
		1e	×
	•		
f Sale of assets to other organization(s)	-	+	×
g Purchase of assets from other organization(s)		19	×
	•	4	×
Lease of facilities, equipment, or other assets to other organization(s)		1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	٠	÷	×
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×
m Sharing of facilities, equipment, mailing lists, or other assets	•	Ę	×
n Sharing of baid employees		1n	×
o Reimbursement paid to other organization for expenses		9	×
p Reimbursement paid by other organization for expenses		1p	X
q Other transfer of cash or property to other organization(s)	-	19	×
Other transfer of cash or property from other organization(s)		11	×
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	saction thresholds		
(A)	(8)	<u>(</u>)	
Name of other organization(s)	Transaction type (a·r)	Amount involved	olved
(1) RESPONSIBLE TRAILS AMERICA, LL&	0	115,	000
(2)			
(E)			

Schedule R (Form 990) 2008

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4

20-5806345

Page 4

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Schedule R (Form 990) 2008 ARABELLA LEGACY FUND

Part VI Unrelated Organizations Taxable as a Partnership

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 country)	(D) Are all partners section 501(c)(3) organizations? Yes No	(E) Share of end-of- year assets	(F) Disproportionate allocations? Yes No	(G) Code V UBI amount in box 20 of Schedule K-1 (Form 1065)	(H) General or managing partner? Yes No
							-
						Schedule R (Form 990) 2008	990) 2008