SCANNED MAR 1 2 2009

Form . 990

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

20**07**

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

Open to Public Inspection

Α	For th	he 2007 ca	alendar	year, or tax year be	ginning	July 1	, 200	7, and	ending	June 30	, 20 08
В	Check if	applicable	Please	C Name of organization)					D Employe	r identification number
$\bar{\Box}$		s change	use IRS label or	Owens Community	College Fo	undation _				20	1625785
一	Name c	•	print or	Number and street (or	r P O box if	mail is not delivered to	street a	address)	Room/suite	E Telephor	ne number
	Initial re	•	type See	P. O. Box 10,000					,	(567)	661-7641
	Termina		Specific Instruc-	City or town, state or	country, and	d ZIP + 4			•	F Accounting	method: Cash 🗸 Accrual
H		ed return	tions.	Toledo, OH 43699-	1947					_	r (specify) >
\vdash		tion pending	• Sect	tion 501(c)(3) organiza	ations and	4947(a)(1) nonexempt	char	table			o section 527 organizations
ш	гфріїсці	aon por ong		ts must attach a comp						-	or affiliates? Yes 🗹 No
G	Websit	te: > www	owens	edu/foundation							of affiliates >
J	Organi	zation type	(check or	nly one) 🕨 🗹 501(c)	(3) ∢ (ins	ert no)	or [527	H(c) Are all at (If "No,"		ed? Yes No See instructions)
κ				rganization is not a 50					H(d) Is this a s	separate return	filed by an a group ruling? The Yes No
				re than \$25,000 A return	n is not requi	red, but if the organiza	tion cho	oses			
	to file a			a complete return						xemption Nun	e organization is not required
L	Gross	receipts A	Add lines	6b, 8b, 9b, and 10b	to line 12	► 673.66	8				m 990, 990-EZ, or 990-PF)
_	art I			penses, and Cha			und	Balan			
	1			ifts, grants, and si							
	a		_	donor advised fu			1a			0	
	5			pport (not included		·	1b		448,1	39 - 7	
				support (not include		· ·	1c		35,5	—— · · · · · ·	
	d			ntributions (grants)			1d			0	
				1a through 1d) (cas					0)	1e	483,639
	2 2			revenue including g				m Dart			0
									VII, III 16 33)	3	0
		3 Membership dues and assessments						4	16,945		
	4		// 2					• • •	• •	5	62,351
	5	Olvidend	is and if	hterest from secur	illes		6a	• • •	• •	·	
		Gross re	ints ()	1 8 101	· · · ·		6b				
	þ			enses	, , , , ,					6c	0
	7			ne or (loss). Subtra it income (describe		nom me oa	•	•	•	7 7	
Revenue		Other in	vesimer.	tom sales of asset		(A) Securities		(8	Other	' : 	<u></u>
e e	ва					110,733	8a				
æ	L	than inve		er þásis and sales ex	\ . -	98,534	8b		·		
					perises.	12,199	8c	_		- 1251	
				ttach schedule)						8d	12,199
	I -	-). Còmbine line 8c,			:_				
	9	-		d activities (attach sc	•	-	Jamine	, checi	Chere -	' (*	
	a					of	9a			[#\$]	
	١ ,			ported on line 1b)			9b				
				enses other than tools) from special				92		9c	0
				nventory, less retu			10a	; з а .	• • •		
				nventory, less retu oods sold .	iiis ailu ai	iowances	10b				
	b		_	ss) from sales of inve	 nton <i>i l</i> ottoo			10h fra	m line 10e	1 1	0
	11			from Part VII, line						11	
	12			Add lines 1e, 2, 3, 4						12	575,134
_	13			es (from line 44, co				·		13	250,093
es	14	_		id general (from lir			•			14	25,063
Expenses	15			m line 44, column			•			15	18,001
Š	16			iliates (attach sche			•	• • •		16	0
	17			. Add lines 16 and						17	293,157
- s	18			it) for the year. Su				<u>`</u>		40	281,977
set	19			ind balances at be						10	2,127,032
Net Assets	20			n net assets or fur					`'))	20	(256,865)
Z	21			nd balances at end						21	2,152,144

Par	Statement of All organizations mu Functional Expenses organizations and s	ust compi	ete column (A). Colu	umns (B), (C), and (L	u are required for sec	N bar (Claud and (A
	Functional Expenses organizations and s		47(a)(1) nonexempt	charitable trusts but	optional for others (See the instructions.
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	34	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ noncash \$) If this amount includes foreign grants, check here ▶ □	22a	0	0		
22b	Other grants and allocations (attach schedule) (cash \$					
23	If this amount includes foreign grants, check here ► ☐ Specific assistance to individuals (attach	22b	250,093	250,093		
	schedule)	23	0	0		
24	Benefits paid to or for members (attach schedule)	24	0	0		
25a	Compensation of current officers, directors, key employees, etc listed in Part V-A	25a	0	0	0	
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0	0	0	
С	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c	0	0	0	C
26	Salaries and wages of employees not included on lines 25a, b, and c	26	0	0	0	
27	Pension plan contributions not included on lines 25a, b, and c	27	0	0	0	0
28	Employee benefits not included on lines	28	0	0	0	0
29	25a ~ 27	29	0	0	0	0
30	Professional fundraising fees	30	0	0	0	0
31	Accounting fees	31	6,950	0	6,950	0
32	Legal fees	32	2,320	0	2,320	0
33	Supplies	33	475	0	475	
34	Telephone	34	0	0	0	0
35	Postage and shipping	35	6	0	6	0
36	Occupancy	36	0	0	0	0
37	Equipment rental and maintenance	37	0	0	0	0
38	Printing and publications	38	653	0	653	
39	Travel	39	4,975	0	4,975	0
40	Conferences, conventions, and meetings	40	7,400	0	6,949	451
41	Interest	41	0	0	0	0
42	Depreciation, depletion, etc. (attach schedule)	42	0		0	0
43	Other expenses not covered above (itemize).					
а	Donor Recognition	43a	2,620	0	0	2,620
b	Public Relations	43b	14,930	0	0	14,930
С	Memberships	43c	2,560	0	2,560	0
d	Miscellaneous	43d	175	0	175	0
e		43e				
f		43f 43g	-			
g						
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	293,157	250,093	25,063	18,001

e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)	44	293,157	250,093	25,063	18,001
Joint Costs. Check ▶ ☐ if you are following SOP Are any joint costs from a combined educational campaign If "Yes," enter (i) the aggregate amount of these joint cost: (iii) the amount allocated to Management and general \$	and fu	; (ii) the		to Program services	
					Form 990 (2007)

Pärt III	Statement	of Program	Service	Accomplishments	(See	the instructions.)	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

F 9	
What is the organization's primary exempt purpose? ▶ See Attachment	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1)
During the 2007-08 academic / fiscal year, the Foundation made nearly 200 scholarship awards to Owens' students. Due to generous donations from the McMaster Foundation and the Owens Alumni Association, the Foundation also announced the creation of the Success Scholarship Program, designed for students who receive partial financial aid in the form of a Federal Pell Grant. The Success Program bridges the gap between the cost of tuition and fees at Owens Community College and the amount of financial aid received by the student. The long term goal of the Success Program is to increase both high school graduation and college enrollment rates. (Grants and allocations. \$ 109,170.) If this amount includes foreign grants, check here. The Foundation provided a grant to Owens Community College to fund a full-time research technician for coolant research and management and to support the College's Manufacturing Technology program. This is in line with the Foundation's mission of providing resources to serve our students and our community.	109,170
(Grants and allocations \$ 72,692) If this amount includes foreign grants, check here ▶ □	72,692
The Foundation provided funding assistance for the College's Findlay campus capital investment in a building that	72,002
Includes a library and 10 classrooms This benefits the College and it's students in the Findlay service area	
(Grants and allocations \$ 30,000) If this amount includes foreign grants, check here ▶	30,000
d The Foundation provided funding to assist in the College's hosting of programs and performances in the College Center for Performing Arts Theater and Terhune Gallery. The promotes the College and the arts to students and the community	
(Grants and allocations \$ 10,400) If this amount includes foreign grants, check here ▶	10,400
e Other program services (attach schedule)	10,400
(Grants and allocations \$ 27,831) If this amount includes foreign grants, check here ▶ □	27,831
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	250,093

Pa	rt IV	Balance Sheets (See the instructions.	<u>) </u>				
N	lote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	within	he description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing			0	45	0
	46	Savings and temporary cash investments .	•		500,053	46	661,346
	10	outings and temperary cash investments ;	•			1 200	
	472	Accounts receivable	47a	1,000		المنتقد	
		Less: allowance for doubtful accounts .	47b	0	4,000	47c	1,000
		Less. allowance for doubtful accounts.					
	400	Pledges receivable	48a	166,655		7	
		Less: allowance for doubtful accounts .	48b	0	141,251	48c	166,655
	49	*			0		0
	50a	Receivables from current and former officers key employees (attach schedule)	0	50a	0		
	_	· · · · · · · · · · · · · · · · · · ·		1			
	D	Receivables from other disqualified persons (4958(f)(1)) and persons described in section 495			0	50b	0
	-4.		b) (attach schedule)		,		
Assets	51a	Other notes and loans receivable (attach	51a	ol			
		schedule)	51b	0	0	51c	0
		Less, allowance for doubtful accounts .				52	0
	52					53	0
	53	Prepaid expenses and deferred charges .		Cost 🗹 FMV	1,652,296		1,440,469
		Investments—publicly-traded securities .				54b	0
	1	Investments—other securities (attach schedu	iie)	Cost LI PMV			
	55a	Investments—land, buildings, and	55a	o			
		equipment: basis	330			12.5	
	b	Less: accumulated depreciation (attach	55b	0	n	55c	0
		schedule)	330		0		0
	56	Investments—other (attach schedule)	L 5701			-	
		Land, buildings, and equipment basis .	57a			学	
	b	Less: accumulated depreciation (attach		اه	٥		0
		schedule)	57b	-		57c	
	58	Other assets, including program-related inve			0		0
		(describe >	2,297,600		2,269,470		
	59	Total assets (must equal line 74). Add lines			78,755	-	48,498
	60	Accounts payable and accrued expenses .			78,755		40,490
	61	Grants payable			·	61	1,709
	62	Deferred revenue			4,402	62	1,705
ies	63	Loans from officers, directors, trustees, and	-		•		0
Liabilities		schedule)			0		0
	64a	Tax-exempt bond liabilities (attach schedule)				10.00	0
		Mortgages and other notes payable (attach s	schedi	- 1		64b	
	65	Other liabilities (describe ► Funds in Custody	<i>!</i>)	87,411	65	67,119
		T ALL BERNALE AND BEEN CO Absence CO			170,568		117,326
	66			· · · · · · · · · · · · · · · · · · ·	170,300		117,320
	Orga	anizations that follow SFAS 117, check here ▶	• ∀ a	and complete lines		(4)	
Ś		67 through 69 and lines 73 and 74.			227 726	***************************************	233,830
ညို	67	Unrestricted			237,726	67	
<u>ag</u>	68	Temporarily restricted			933,263	_	877,751
ä	69	Permanently restricted		_ · · ·	956,043	69	1,040,563
Fund Balances	Orga	anizations that do not follow SFAS 117, check	here	► ∐ and		1 7	
Ţ		complete lines 70 through 74.					
ō	70	Capital stock, trust principal, or current fund				70	
ets	71	Paid-in or capital surplus, or land, building, a		· ·		71	
Net Assets	72	Retained earnings, endowment, accumulated				72	
t A	73	Total net assets or fund balances. Add line				[-	
Se		70 through 72. (Column (A) must equal line		l column (B) must		ننظ	
-		equal line 21)			2,127,032		2,152,144
	74	Total liabilities and net assets/fund balance	s. Add	l lines 66 and 73	2,297,600	74	2,269,470

Pa	Reconciliation of Revenue per Audited Financial instructions.)	Statements	With Revenue p	er Re	turn (See the
a b	Total revenue, gains, and other support per audited financial stat Amounts included on line a but not on Part I, line 12:	ements		a	318,269
1	Net unrealized gains on investments	b1		0 :: :: :: :	
2	Donated services and use of facilities		Ţ	0 跨	
3	Recoveries of prior year grants			o 🚞	
1	Other (specify). Net unrealized (losses) on investments				
7	Other (specify).	1 64	(256,86		
				b	(256,865)
_	Add lines b1 through b4			c	575,134
c	Subtract line b from line a			5000	373,134
d .	Amounts included on Part I, line 12, but not on line a:	d1	ı	0	1
1	Investment expenses not included on Part I, line 6b	• • —		一等空	3
2	Other (specify)·		1	# to 1	
			<u> </u>	0	4
	Add lines d1 and d2			d	0
e	Total revenue (Part I, line 12). Add lines c and d	 		<u> </u>	575,134
Pa	rt IV-B Reconciliation of Expenses per Audited Financial	Statement	s With Expenses	per H	
а	Total expenses and losses per audited financial statements .			a	293,157
Ь	Amounts included on line a but not on Part I, line 17:			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
1	Donated services and use of facilities	. <u> b1</u>			
2	Prior year adjustments reported on Part I, line 20	. <u>b2</u>		이	
3	Losses reported on Part I, line 20	b3			
4	Other (specify):			17, 1	
	(1 //			0	
	Add lines b1 through b4			b	0
С	Subtract line b from line a			С	293,157
d	Amounts included on Part I, line 17, but not on line a:			美洲	
1	Investment expenses not included on Part I, line 6b	d1	I	o 建彩	
2	Other (specify):	• • —			
_	• • • • • • • • • • • • • • • • • • • •	חוה ו	ļ	0	
	Add lines d1 and d2		l 	d d	1 0
e	Add lines d1 and d2			e	293,157
Pa	rt V-A Current Officers, Directors, Trustees, and Key Empor key employee at any time during the year even if they we	loyees (List	each person who w	as an c	officer, director, trustee,
	(A) Name and address Title and average h week devoted to	ours per l ()f no	t paid, enter benefit	iutions to ei plans & defi ensation pla	erred and other allowances
See	attachment				
		J			J
			1		
				. <u>. </u>	

Page	6

Pai	t V-A Current Officers, Directors, Trustees	s, and Key Employe	es (continued)	· · · · · · · · · · · · · · · · · · ·		Yes	No		
75a	Enter the total number of officers, directors, and tr	ustees permitted to vo	ote on organizatio	n business at board 22	40 %2		\$ 29.5 5 .7 5 .7 6 .7		
	meetings				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	,,,,			
р	Are any officers, directors, trustees, or key employees listed in Schedule A, Part I, or hig	yees listed in Form 99	0, Part V-A, or his	ghest compensated	1	1 - 6 2 - 1			
	contractors listed in Schedule A, Part II-A or	II-B. related to each	other through	family or business	7,50		المنازية المنازية		
	relationships? If "Yes," attach a statement that ide				75b		✓		
c	Do any officers, directors, trustees, or key	employees listed in	Form 990, Par	t V-A, or highest]		
	compensated employees listed in Schedule A,	Part I, or highest co	ompensated prof	essional and other			3		
	independent contractors listed in Schedule A, organizations, whether tax exempt or taxable, that					- 1 ·	A.		
		at are related to the o		the instructions for	75c	1	سحد		
	If "Yes," attach a statement that includes the info	ormation described in			2 45	2.4.	ا بن ا مدند		
	Does the organization have a written conflict of in		<u> </u>		75d		<u></u>		
Pa	t V-B Former Officers, Directors, Trustees, and officer, director, trustee, or key employee re								
	person below and enter the amount of comp						st triat		
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	accou	Experunt and lowance	lother		
NON	E				1				
					<u> </u>				
					┼				
			·						
					<u> </u>				
					 				
					—				
	••••								
		-			 -				
Day	VI Other Information (See the instruction	10.1	L		┸	Voc	No		
				2 16 "Vee " ettech e	[:::	163	27.71		
76	Did the organization make a change in its activiti detailed statement of each change	es or memous or con		rii res, allach a	76		1		
77	Were any changes made in the organizing or gov	erning documents bu	t not reported to	the IRS?	77	ļ	✓		
	If "Yes," attach a conformed copy of the changes					· · ·	: :		
78a	Did the organization have unrelated business gro	ess income of \$1,000	or more during t	he year covered by	700				
_	this return?	or this year?	• • • • •		78a 78b		1		
79	Was there a liquidation, dissolution, termination, of	•	 tion during the ve	ar? If "Yes " attach	72	. j. j. j. j.	- 7		
13	a statement	· · · · ·			79		1		
80a	Is the organization related (other than by associa						(- T		
	common membership, governing bodies, truste				20-		 		
L	organization?	wens Community Colleg	 1e		80a	1_2			
D	in roo, onto the manne of the organization	and check whether it	<u></u>	r nonexempt	1				
	Enter direct and indirect political expenditures (S	ee line 81 instructions		0					
b	Did the organization file Form 1120-POL for this year?								

	350 (2007)		·	Mago .
Par	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	\	
b	if "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	,	**	
83a	(See instructions in Part III.) Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	1	
	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	✓	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		√
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
D	gifts were not tax deductible?	84b		
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	,		
С	Dues, assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures	1	′	
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices . 85e			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)			
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
g				
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the	85h		
	following tax year?	0011		
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12			;
b	Gross receipts, included on line 12, for public use of club facilities	ł		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	ł		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	-		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or		,	
	partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Part IX	88a		1
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		1
89a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under section 4911 ▶			
b	501(c)(3) and $501(c)(4)$ orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach	89b		
	a statement explaining each transaction	030	L	-
C	Enter: Amount of tax imposed on the organization managers or disqualified			
	persons during the year under sections 4912, 4955, and 4958 ▶	ŀ		
	Enter Amount of tax on line 89c, above, reimbursed by the organization . •			,
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		7
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		✓
	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the			
9	supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		- /
902	List the states with which a copy of this return is filed >			
	· ·			
ď	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)		1-764	0
	Located at ► P 0 Box 10,000, Toledo, 0H ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	91b		1
	account)?	310		-
	If "Yes," enter the name of the foreign country ►			ļ
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			

Form 99	90 (2007)						F	age 8
Part	VI Other Information (continued)						Yes	No
c	At any time during the calendar year, did the if "Yes," enter the name of the foreign count	e organization m	aintain an office o	outside of the	United States?	91c	;	1
92	Section 4947(a)(1) nonexempt charitable trust and enter the amount of tax-exempt interest	ts filing Form 99	0 in lieu of Form	1041Check	k here			. ▶ □
Part	VII Analysis of Income-Producing Ac	ctivities (See th	ne instructions.)	- 		, <u>.</u>		
Note:	Enter gross amounts unless otherwise	Unrelated	business income	Excluded by sec	tion 512, 513, or 514] _	(E) Related	
ındica	ted	(A)	(B)	(C)	(D)		mpt fur	
93 a	Program service revenue.	Business code	Amount	Exclusion code	Amount		incom	e
b		_				↓		
С				ļ		—		
ď		_		ļ		—		
е						1		
f	Medicare/Medicaid payments					+		
g	Fees and contracts from government agencie	es	+	 		 		
94	Membership dues and assessments .	to		14	16,945	+		
95 06	Interest on savings and temporary cash investmen	ıs		14	62,351	+		
96 97	Dividends and interest from securities Net rental income or (loss) from real estate.	下至于代证	4月15日		8,102,5125.			20 mg 1
a a	debt-financed property	V 742 857 41 45		T Ship Ti	1,442			<u>* · · · · · · · · · · · · · · · · · · ·</u>
b	not debt-financed property					 		
98	Net rental income or (loss) from personal property	v						
99	Other investment income	' <u> </u>				Ι		
100	Gain or (loss) from sales of assets other than inventor	ry		18	12,199			
101	Net income or (loss) from special events .							
102	Gross profit or (loss) from sales of inventory					<u> </u>		
103	Other revenue: a	_	<u> </u>			<u>↓</u>		
b				ļ		-		
С		_		<u> </u>		 		
đ				 	· ·	├─		
е		F1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	· · · · · · · · · · · · · · · · · · ·	01.405	├		
104	Subtotal (add columns (B), (D), and (E))			्याप _ल ्ल् संस्कृत ।	91,495	L		1,495
105 Note:	Total (add line 104, columns (B), (D), and (E) Line 105 plus line 1e, Part I, should equal the							1,433
Part				onses (See th	ne instructions)			
Line						- 2000	molish	ment
▼								
NA								
					-			
Part			isregarded Entit	ies (See the	instructions.)			
	Name, address, and EIN of corporation,	(B) Percentage of	(C) Nature of a		(D)	Er	(E) nd-of-ye	ear
4.045	partnership, or disregarded entity o	wnership interest	Nature of ac	Clivities	Total income	—	assets	<u> </u>
NONE			-			 		
	-	%				├		
		% %						
Part	X Information Regarding Transfers Ass		sonal Benefit Co	ntracts (See t	he instructions)	Щ_		
								1 N =
(a) (b)	Did the organization, during the year, receive any funds, Did the organization, during the year, pay pro- e: If "Yes" to (b), file Form 8870 and Form 4	emiums, directly	or indirectly, on a				es ☑ es ☑	

Part	Information Regarding is a controlling organizati	Transfers To and Fro	m Controlled Entities in 512(b)(13).	. Complete only if t	the organi	zatıor
106	Did the reporting organization mathe Code? If "Yes," complete the	ake any transfers to a co	ntrolled entity as defined	in section 512(b)(13)	Yes	No V
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description o transfer	f Amo	(D) ount of trans	sfer
a						
b		-				
c		-				
	Totals					
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"				Yes	No V
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amo	(D) ount of trans	ifer
a						
b						
c						
	Totals					·
108	Did the organization have a bindi rents, royalties, and annuities des			covering the interest,	Yes.	No
Pleas Sign Here	Under penalties of perjury, I declare that and belief, it is true, correct, and complete Signature of officer Elizabeth A Savage, Foundat Type or print name and title	ate Declaration of preparer (other	ding accompanying schedules a er than officer) is based on all in	ind statements, and to the formation of which prepare Feb. 12,	er has any kno	owledge owledge
Paid Prepare	Preparer's signature		Date Check is self-employs	f Preparer's SSN o	r PTIN (See Ger	ı. Inst X)
Use Oni	i Film S hame for yours k			Phone no • ()		
					Form 990	(2007)

SCHEDULE A

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),

or 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2007

Employer identification number

			<u> </u>	1625785
				and Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Compensation of the Five Highest Paid Employees Other Than Officers, Directors, a (See page 1 of the instructions. List each one. If there are none, enter "None.") (a) Name and address of each employee paid more than \$50,000 NONE Total number of other employees paid over \$50,000. ▶ 0 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Ser (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") NONE Total number of others receiving over \$50,000 for professional services (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation of Professional Services (d) Type of services (e) Compensation of the Five Highest Paid Independent Contractors for Professional Services (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of services (c) Compensation of the Five Highest Paid Independent Contractors for Professional Services (b) Type of services (c) Compensation of the Five Highest Paid Independent Contractors for Professional Services (b) Type of services (c) Compensation of the Five Highest Paid Independent Contractors for Professional Services, whether ind firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of services				
Total number of other employees paid over \$50,000 . ▶	0	思想管所有政智	蒙 医过程态 医生物	国語語が記述には
				(c) Compensation
NONE				
Total number of others receiving over \$50,000 for professional services ▶	0	· · · · · · · · · · · · · · · · · · ·		
(List each contractor who perform	ned services other than p	orofessional serv		dividuals or
(a) Name and address of each independent contractor	paid more than \$50,000	(b) Type	of service	(c) Compensation
NONE				
				1,-0
Total number of other contractors receiving over \$50,000 for other services	0			

Pá	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$	12	المارة المارة	✓
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	一年 一日 一日	The state of the s	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property?	2a	;	✓
b	Lending of money or other extension of credit?	2b		✓
С	Furnishing of goods, services, or facilities?	2c		1
ď	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	✓	
e	Transfer of any part of its income or assets?	2e		✓
3а	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	✓	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		1
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3с		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3d		✓
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a 4b		✓
b	Did the organization make any taxable distributions under section 4966?	40		
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year			NA
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			NA
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			13
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		28	7,445

	t IV	Reason for Non-Private		Places should	k only ONE on	alicable boy \	<u> </u>
cen		t the organization is not a private church, convention of churches				olicable box)	
•	_				, , , , ,		
6	∐ A	school Section 170(b)(1)(A)(ii). (Also complete Pa	art V)			
7	□ A	hospital or a cooperative hospit	tal service organiz	zation. Section 170(b)(1)	(A)(III).		
8	□ A	federal, state, or local government	ent or governmen	ntal unit. Section 170(b)(1)(A)(v)		
9	_	medical research organization o	•	· ·		(A)(III) Enter th	e hospital's name, c
10	_	n organization operated for the be lso complete the Support Sche o	_	or university owned or o	perated by a go	vernmental un	it Section 170(b)(1)(A)
11a	_	n organization that normally recei '0(b)(1)(A)(vi). (Also complete the		•	a governmental	unit or from th	e general public Sect
11b	□ A	community trust Section 170(b))(1)(A)(vi) (Also co	omplete the Support Sc	hedule in Part	IV-A.)	
12	fro fro	n organization that normally receion activities related to its charitation gross investment income an ganization after June 30, 1975	able, etc., function ad unrelated busin	ns-subject to certain ex ness taxable income (le	ceptions, and ss section 511	(2) no more the tax) from bus	an 331/3% of its supplinesses acquired by
13		n organization that is not contro quirements of section 509(a)(3)					nd otherwise meets
		Type I Type II	□Type I	II-Functionally Integrat	ed [Type III-Othe	r
		Provide the following infor	mation about th	e supported organizat			
Nai	me(s) ((a) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	organization the sup organiz	ipported on listed in oporting	(e) Amount of support
					Yes	No	
				<u> </u>			

	endar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003		(e) Total
15	Gifts, grants, and contributions received (Do						
	not include unusual grants. See line 28).	259,344	509,553	255,663	249,	892	1,274,452
16	Membership fees received	0	0	0]	0	0
17	Gross receipts from admissions, merchandise						
	sold or services performed, or furnishing of facilities in any activity that is related to the						
	organization's charitable, etc., purpose	o	0	0		0	0
18	Gross income from interest, dividends,						
	amounts received from payments on securities						
	loans (section 512(a)(5)), rents, royalties,				}		1
	income from similar sources, and unrelated						,
	business taxable income (less section 511 taxes) from businesses acquired by the						
	organization after June 30, 1975	65,989	75,526	55,428	43.	688	240,631
19	Net income from unrelated business	30,000				•	_ ::/:::
	activities not included in line 18	o	0	0		0	0
 20	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on						
	its behalf	0	o	0		0	l o
21	The value of services or facilities furnished to						
	the organization by a governmental unit						
	without charge. Do not include the value of services or facilities generally furnished to the		ł				}
	public without charge	o	0	0		0	0
22	Other income, Attach a schedule Do not						
	include gain or (loss) from sale of capital assets	59,417	96,311	101,531	12,	025	269,284
23	Total of lines 15 through 22	384,750	681,390	412,622	305,	605	1,784,367
24	Line 23 minus line 17	384,750	681,390	412,622	305,	605	1,784,367
25	Enter 1% of line 23	3,848	6,814	4,126	3,	056	Secretary Secretary
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in columi	n (e), line 24 .	▶ 🛓	26a	35,687
ь	Prepare a list for your records to show the nan	ne of and amount	t contributed by e	ach person (oth	erthan a 🗟		
	governmental unit or publicly supported organiz					-2	
	amount shown in line 26a Do not file this list wi					26b	230,410
С	Total support for section 509(a)(1) test Enter li	ne 24, column (e)				26c	1,784,367
d	Add Amounts from column (e) for lines 18	240,631	19	0	الما الما الما الما الما الما الما الما		拿这是一个影响
	22	269,284	26b230,4	<u>10</u>	▶ 🖾	26d	740,325
е	Public support (line 26c minus line 26d total)		•		▶	26e	1,044,042
f	Public support percentage (line 26e (numera	tor) divided by I	ine 26c (denomir	nator)) .	. •	26f	58.5 %
27	Organizations described on line 12: a Fo	r amounts includ	led in lines 15, 1	6, and 17 that v	vere received	fro	m a "disqualified
21					ar from each		qualified person.'
21	person," prepare a list for your records to show	the name of, and			i iioiii, eacii	"aısı	
21	person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and sum of such am	nounts for each ye	ear			
21	person," prepare a list for your records to show	the name of, and sum of such am	nounts for each ye	ear			•••••
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and such am of such am of such am of such am of such person each person each person of the such person each perso	nounts for each you (2004)son (other than "di	ear squalified person	. (2003) s"), prepare a	list t	for your records to
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and a sum of such am of such am over the sum of such am over the sum of the	nounts for each year (2004)son (other than "diverting than the larger of	ear squalified person of (1) the amount	. (2003) s"), prepare a on line 25 for	list t	for your records to year or (2) \$5,000
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and e sum of such and wed from each persyear, that was more through 11b, as well	nounts for each you (2004)son (other than "do re than the larger of well as individuals.)	ear squalified person of (1) the amount Do not file this li	(2003) s"), prepare a on line 25 for st with your r	list the y	for your records to year or (2) \$5,000 n. After computing
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and e sum of such and wed from each persyear, that was more through 11b, as well	nounts for each you (2004)son (other than "do re than the larger of well as individuals.)	ear squalified person of (1) the amount Do not file this li	(2003) s"), prepare a on line 25 for st with your r	list the y	for your records to year or (2) \$5,000 n. After computing
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	ved from each per byear, that was mor 5 through 11b, as we the larger amount	nounts for each you (2004)	squalified person of (1) the amount Do not file this li r (2), enter the si	. (2003) s"), prepare a on line 25 for st with your n um of these o	list the yeturn	for your records to year or (2) \$5,000 n. After computing ences (the excess
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	ved from each per syear, that was mor 5 through 11b, as v the larger amount	nounts for each you (2004)	squalified person of (1) the amount Do not file this li r (2), enter the si	. (2003) s"), prepare a on line 25 for st with your n um of these o	list the yeturn	for your records to year or (2) \$5,000 n. After computing ences (the excess
	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	ved from each per year, that was mor the larger amount	nounts for each year (2004)	squalified person if (1) the amount Do not file this li r (2), enter the si	. (2003) s"), prepare a on line 25 for st with your r um of these o	list the yeturn	for your records to year or (2) \$5,000 n. After computing ences (the excess
b	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	ved from each per year, that was mor through 11b, as v	(2004)	squalified person of (1) the amount Do not file this li or (2), enter the si	(2003) s"), prepare a con line 25 for st with your rum of these con (2003)	list the yeturn	for your records to year or (2) \$5,000 n. After computing ences (the excess
b	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	ved from each per year, that was mor through 11b, as v	nounts for each year (2004)	squalified person of (1) the amount Do not file this li or (2), enter the si	(2003) s"), prepare a on line 25 for st with your n um of these of	list the yeturn differ	for your records to year or (2) \$5,000 n. After computing ences (the excess
b c	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and e sum of such am of such am oved from each per year, that was more through 11b, as we the larger amount and line 27b total tail).	nounts for each year (2004) son (other than "dire than the larger of well as individuals.) and described in (1) of (2004)	squalified person of (1) the amount Do not file this li or (2), enter the si	(2003) s''), prepare a on line 25 for st with your rum of these of (2003)	list the yeturn difference 27c 27d 27e	for your records to year or (2) \$5,000 n. After computing ences (the excess
b c d	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and e sum of such am of such am oved from each per year, that was more through 11b, as we the larger amount and line 27b total tal).	nounts for each your conditions on (other than "direct than the larger of well as individuals.) of described in (1) of (2004)	squalified person of (1) the amount Do not file this li r (2), enter the s	(2003) s"), prepare a on line 25 for st with your num of these of these of the second (2003)	list the yeturn difference 27c 27c 27d 27e	for your records to year or (2) \$5,000 n. After computing ences (the excess
b c d e f g	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and e sum of such am of such am oved from each per year, that was more through 11b, as we the larger amount and line 27b total tal)	nounts for each your conditions on (other than "direct than the larger of well as individuals.) is described in (1) or (2004)	squalified person of (1) the amount Do not file this li r (2), enter the s	(2003) s"), prepare a on line 25 for st with your rum of these of (2003)	list the yeturn differ 27c 27d 27e 27g	for your records to year or (2) \$5,000 n. After computing ences (the excess
b c d e f	person," prepare a list for your records to show Do not file this list with your return. Enter the (2006)	the name of, and e sum of such am of such am oved from each per year, that was more through 11b, as we the larger amount and line 27b total tal)	nounts for each your conditions on (other than "direct than the larger of well as individuals.) is described in (1) or (2004)	squalified person of (1) the amount Do not file this li r (2), enter the s	(2003) s"), prepare a on line 25 for st with your rum of these of (2003)	list the yeturn difference 27c 27c 27d 27e	for your records to year or (2) \$5,000 n. After computing ences (the excess

Pa	Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N	A	
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	مار دور مار دور مار دور	34.71 24.71
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	7	1
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	The state of the s	· · · · · · · · · · · · · · · · · · ·	
32	Does the organization maintain the following.	أنينا	: د د د	أستعنا
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	-1 ,	程料
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	見が見		
		[: 13 [:2]	es.	
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c	-	-
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		_
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h	1 ₂₁ = "	ا نام
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			Table to
		,	37.	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34ь		<u> </u>
	If you answered "Yes" to either 34a or b, please explain using an attached statement			, ,
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05	-36		
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Page	6

Pa	rt VI-A Lobbying Expenditures by E (To be completed ONLY by a					tions.) NA
Che	ck ▶ a ☐ If the organization belongs to an affil			you checked "a" a		ontrol"	provisions apply
	Limits on Lobby (The term "expenditures" me				(a) Affiliated totals		(b) To be completed for all electing organizations
				36	<u> </u>		Organizations
36	Total lobbying expenditures to influence publi		, .,	37			
37	Total lobbying expenditures to influence a leg		· -	38	 		
38	Total lobbying expenditures (add lines 36 and			39			
39 40	Other exempt purpose expenditures Total exempt purpose expenditures (add lines			40	 		
41	Lobbying nontaxable amount Enter the amount			200 to	11/2012	رفر کیلی پڑے	The British William
71	, 3	lobbying nontaxa	•	. 17 Hz.		ار مردختون و در سرار	
		of the amount or					
	•	.000 plus 15% of t		i00.000	多流线。		
		,000 plus 10% of th					
		,000 plus 5% of the					
		00,000			1	ع آر ج المتحددة	
42	Grassroots nontaxable amount (enter 25% of	line 41)		42			
43	Subtract line 42 from line 36 Enter -0- if line	42 is more than li	ne 36	43			
44	Subtract line 41 from line 38. Enter -0- if line	41 is more than li	ne 38,	44	F71 - 84 171-	aramaka	
	6 15 16 16 16 16 16 16 16 16 16 16 16 16 16				是我们的	# 1 1 1 T	
	Caution: If there is an amount on either line 4	3 or line 44, you i	must file Form 47	20.	語語は記録	A	The state of the s
_	(Some organizations that made a secti See the instructions	for lines 45 throug		of the instruction	ns.)		
	Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2006	(c) 2005	(d) 2004		(e) Total
	ilscar year beginning in	2007	2000	2003	200-		Total
45	Lobbying nontaxable amount	S. S. S. D. W. C. S.	The Est while the same	Ze 32 50 21 23 35 175		وي ، جوء	
46	Lobbying ceiling amount (150% of line 45(e))						
<u>47</u>	Total lobbying expenditures						
48	Grassroots nontaxable amount	22.3 - 4 - 5 - 5 - 6 - 5 - 5		Asia as Associated asia	#16 a 1/ 55 =1016	Te 1, 40,	
<u>49</u>	Grassroots ceiling amount (150% of line 48(e))						
50	Grassroots lobbying expenditures						
Pa	rt VI-B Lobbying Activity by Nonele (For reporting only by organiz			Part VI-A) (See	page 14	of the	e instructions.)
	ng the year, did the organization attempt to infl		•	•	any Yes	No	Amount
atte	mpt to influence public opinion on a legislative	matter or referend	lum, through the	use of:		-	m tage of the state of the
а					· ·	 	
b	Paid staff or management (Include compensation	tion in expenses r	eported on lines	c through h.) .	ļ	+	اعتشدتانها لأشتنانا
C						+	
d	Mailings to members, legislators, or the public				.	+	
e	Publications, or published or broadcast staten			• • • •	· ·	+	
f	Grants to other organizations for lobbying pur				·	+	
9	Direct contact with legislators, their staffs, government, demonstrations, seminars, conventions		-		•	†	
h i	Total lobbying expenditures (Add lines c through		ires, or any other	means .	, <u>; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;</u>	- 5-	
•	If "Yes" to any of the above, also attach a sta		etailed descriptio	n of the lobbying	activities		

Pa	t VII			ransfers To and e page 14 of the ir		ctions and Relationship ns.)	s With Nor	ncharitable
51		reporting orga	nization directly or	indirectly engage in a	any of the	following with any other organ		ed in section
_				- · · · · · · · · · · · · · · ·		on 527, relating to political organization of	ariizatioris.	Yes No
а		is ironi ine rep ish		to a noncharitable ex	empt orga	inization or	51a(i	
		her assets ,			•		a(ii)	/ - / ,
h		ransactions.						1
D			as of assats with a	noncharitable exemp	t organizat	tion	b(i)	
		_		ritable exempt organiza	•		b(ii)	
				her assets			b(iii)	
		imbursement a					b(iv)	
	• •	ans or loan gua	-	· · · · · · · · · · · · · · · · · · ·			b(v)	
		-		ship or fundraising sol	 Icitations		b(vi)	
_	• •			sts, other assets, or p			C	1
	-		• •	•		Column (b) should always show	w the fair marke	t value of the
•	goods,	other assets, o	r services given by	the reporting organiz	ation If the	ne organization received less the s, other assets, or services received.	nan fair market	
(a	1)	(b)		(c)		(d)		
Line		mount involved	Name of none	charitable exempt organization	tion	Description of transfers, transaction	ons, and sharing a	rrangements
								
					 -			
								
								
	describ	ed in section 50	•	other than section 501		e or more tax-exempt organizen section 527?	. 🗀	es 🗹 No
		(a)		(b)		(c)		
		Name of organiz	ation	Type of organizat	ion	Description of	relationship	
_								
							· 	
_								
_								
	-							
							-	
						-		
							_	

Form 990 2007 Part I, Lines 8a - 8d

Part I, Lines 8a - 8d Investments - Summary of Sales / Gains/(Losses) FY2008

(A) Securities			Sale	Original	Gain/
Fund Name	# shares	Date	Proceeds _	Cost	(Loss)
Trust Company of Toledo Investm	<u>ents</u>				
MFS Int'l New Discovery	(919.842)	08/08/07	28,000 00	24,697 21	3,302 79
Zimmers Holdings Inc.	(25.000)	09/10/07	2,008 71	1,958 36	50 35
MFS Int'l New Discovery	(918.555)	10/29/07	30,000.00	23,616 05	6,383 95
Zimmers Holdings Inc.	(2.000)	10/31/07	137 95	156 55	(18 60)
Vanguard Institutional Index	(370.947)	11/30/07	50,000 00	47,546 50	2,453 50
Manulife stock	(15.000)	05/21/08	586 79	560 18	26 61
GRANT TOTAL - 990 Part I Line	8.		110,733.45	98,534.85	12,198.60
			PROCEEDS	COST	GAIN/(LOSS)
			8(A)a	8(A)b	8(A)c, 8d

Owens Community College Foundation EID # 20-1625785 FORM 990 - 2007 Explanation Attachment

Form 990 2007 Part I, Line 20

Part I, Line 20
Other changes in net assets or fund balances

This is the unrealized market loss on the Foundation's investments during fiscal year 2008 (July 1, 2007 through June 30, 2008).

Form 990 2007 Part III

Part III

Statement of Program Service Accomplishments

What is the organization's primary exempt purpose?

The mission of the Owens Community College Foundation is to develop and provide resources to advance the College's mission of serving our students and our community. Simply put: *We Invest in Your Success*.

The vision of the Owens Community College Foundation is that higher education should be available to everyone. The Foundation works to remove barriers to education by providing student scholarships and supporting growth and innovation at Owens Community College.

Form 990 2007 Part III, Line e

Part III, Line e **Other Program Services**

Description

Amount

Provided funding (\$ 2,432) for the purchase of sound equipment for the theater in the College Center for Performing Arts, purchased LCD monitors for the student newspaper newsroom and provided miscellaneous funding of other various equipment, conferences and. events for College programs.

19,831

Contributed (\$ 2,500) to the American Red Cross to assist with flood relief and promote Owens Community College in the Findlay service area, contributed (\$ 5,000) to an economic development initiative for Northwest Ohio that would benefit the College by bringing in new business to the areas that the College serves and (\$500) to sponsor an Ohio Business Teachers Association (OBTA) conference of which an Owen's faculty member is an officer.

8,000

TOTAL

\$27,831 Line e

Form 990 - 2007 Part V-A

Part V-A List of Officers, Directors, Trustees and Key Employees As of 6/30/08

(A) Name and address	(B)Title and average hours/week	(C)Compensation	(D) Benefits	(E) Expenses
Dr. Christa Adams Owens Community College President PO Box 10,000 Toledo, OH 43699-1947	Ex officio, voting 1 hour	- 0 -	- 0 -	- 0 -
James W. Baehren Owens-Illinois SeniorVP-Strategic Planning One SeaGate - 8th Floor Toledo, OH 43666	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
Charles L. Bills Ohio Logistics & Affiliates President/CEO 2001 Industrial Drive, PO Box 952 Findlay, OH 45840	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
James F. Carter Wood County Commissioner One Courthouse Square Bowling Green, OH 43402-2431	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
John W. Christy Owens Corning Vice President & Asst General Counsel One Owens Corning Parkway Toledo, OH 43659	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
Timothy V. Coleman National City Bank Sr VP/ Market Executive 405 Madison Ave. Toledo, OH 43604	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
James H. Geers Retired 1920 Queenswood Drive Findlay, OH 45840	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
Daniel E. Kimmet Retired 6515 Emden Oaks Lane Toledo, OH 43623	Director-at-large, Treasurer I hour	- 0 -	- 0 -	1,779
Allan J. Libbe Rudolph/Libbe, Inc. 6494 Latcha Rd Walbridge, OH 43465	Ex officio, voting College Board of Trustees designee 0.5 hour	- 0 -	- 0 -	- 0 -
John H. McDermott Hylant Group Vic President, Sales 811 Madison Ave Toledo, OH 43604	Director-at-large 0.5 hour	- 0 -	- 0 -	- 0 -

Form 990 - 2007 Part V-A

Part V-A List of Officers, Directors, Trustees and Key Employees As of 6/30/08

(A) Name and address	(B)Title and average hours/week	(C)Compensation	(D) Benefits	(E) Expenses
Paul Meinerding Key Bank Senior Vice President PO Box 10099 Toledo, OH 43699-0099	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
John C. Moore Owens Community College Trustee 64 Wolf Ridge Dr Holland, OH 43528	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
James M. Murray First Energy President, Ohio Operations 300 Madison Ave Toledo, OH 43652	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
Thomas F. Pounds The Toledo Free Press President & Publisher 605 Monroe St Toledo, OH 43604	Director-at-large, Secretary I hour	- 0 -	- 0 -	1,801
Alan Sattler Promedica Health System Senior Vice President, Finance 2121 Hughes Dr Toledo, OH 43606	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
Elizabeth A. Savage Owens Community College Executive Director for Fund Devt PO Box 10,000 Toledo, OH 43699-1947	Ex officio, non-voting Foundation President/CEO 10 hours	- 0 -	- 0 -	333
David W. Seeger Great Lakes Credit Union, Inc President/CEO 624 W South Boundary Perrysburg, OH 43551	Ex officio, voting Alumni Assn President 0 5 hour	- 0 -	- 0 -	- 0 -
Rasesh H. Shah The Andersons, Inc President, Rail Group PO Box 119 Maumee, OH 43537	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -
Arthur H. Smith Retired 421 West Broadway Maumee, OH 43537	Director-at-large, Vice Chairman I hour	- 0 -	- 0 -	2,026
Diana H. Talmage Owens Community College Trustee 45 Exmoor Toledo, OH 43615	Director-at-large 0 5 hour	- 0 -	- 0 -	- 0 -

Form 990 - 2007 Part V-A

List of Officers, Directors, Trustees and Key Employees As of 6/30/08

(A) Name and address	(B)Title and average hours/week	(C)Compensation	(D) Benefits	(E) Expenses
Emily A. Walton Hancock County Commissioner 300 S Main St Findlay, OH 43840	Director-at-large 0.5 hour	- 0 -	- 0 -	- 0 -
John R. Zajac Signature Bank Senior Vice President & CFO 4607 W Sylvania Toledo, OH 43623	Director-at-large 0.5 hour	- 0 -	- 0 -	- 0 -
J. Michael Wilder Marathon Petroleum Company LLC General Counsel and Secretary 539 South Main Street Findlay, OH 45840	Director-at-large, Chairman I hour	- 0 -	- 0 -	1,484

Form 990 - 2007 Part V-A, Line 75c

Part V-A Line 75c Statement

Line 13C Statement					
FY2008				Contributions to	Expense account
				benefit plans &	and other
Name	Relationship explanation	Compensation Arrangement	Compensation	deferred comp	allowances
·					
Dr. Christa E. Adams	- Ex officio Board member of the	Amounts paid by the			
	Owens Community College Foundation	Foundation in FY08	0	0	0
	- President of Owens Community College	Amounts paid by Owens			
	which is the supported organization	Community College in FY08			
		(EIN 34-1059164)	287,119	96,500	1,259
Debra K. Green	- Assistant Secretary of the Owens	Amounts paid by the			
	Community College Foundation	Foundation in FY08	0_	0	o
	- Senior Administrative Coordinator for	Amounts paid by Owens			
	Owens Community College which is	Community College in FY08			
	the supported organization	(EIN 34-1059164)	45,625	6,388	4,876
Elizabeth A. Savage	- President/CEO of the Owens	Amounts paid by the			
	Community College Foundation	Foundation in FY08	0_	0	
	- Director of Fund Development	Amounts paid by Owens			
	for Owens Community College which is	Community College in FY08			
	the supported organization	(EIN 34-1059164)	88,711	12,420	4,984
Patricia M. Smith	- Assistant Treasurer of the Owens	Amounts paid by the			
	Community College Foundation	Foundation in FY08	0	0_	0
	- Senior Accountant for Owens	Amounts paid by Owens			
	Community College which is the	Community College in FY08			
	supported organization	(EIN 34-1059164)	63,651	8,911	42

General Note: Foundation Directors receive no compensation for their services to the Foundation.

All of the above individuals are employees of Owens Community College, are paid by Owens Community College and perform other duties for the College in addition to the work they do for the Foundation.

Owens Community College Foundation EID # 20-1625785 Schedule A (Form 990 2007) Attachment

Form 990- 2007 Sch. A Part III Line 3a

Part III Line 3a Scholarship award explanation

The Owens Community College Financial Aid department presents a list of qualified and recommended individuals to a Scholarship Committee consisting of Foundation board members. From that list the committee selects the award recipients based on the criteria that is set forth for the various scholarship funds. These criteria include such things as financial need, grade point average and area of study.

Owens Community College Foundation EID # 20-1625785 Schedule A (Form 990 2007) Attachment

Form 990- 2007 Sch. A Part IV-A Line 22

Part IV-A Line 22 Other income

	<u>2006</u>	<u>2005</u>	2004	<u>2003</u>
Realized gain on investment sales	59,417	96,311	101,531	12,025
Total Other income	59,417	96,311	101,531	12,025