SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization To use be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

Use Schedule R-1 if additional space is needed.

Part I **Identification of Disregarded Entities** (B) (D) (F) Name, address, and EIN of disregarded entity Legal Domicile (State Primary Activity Total income End-of-year assets Direct Controlling or Foreign Country) Entity (\$) **Identification of Related Tax-Exempt Organizations** Part II (C) (D) (E) (F) Name, address, and EIN of related organization Primary Activity Legal Domicile (State Exempt Code section Public charity status Direct Controlling or Foreign Country) (if 501(c)(3)) Entity

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Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	(D) Direct Controlling Entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income (\$)	(G) Share of end-of-year assets (\$)	(H) Disproportionate allocations?		(I) Code V-UBI amount on Box 20 of K-1 (\$)	Managing Partner?	
							Yes	No		Yes No	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	(D) Direct Controlling Entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income (\$)	(G) Share of end-of-year assets (\$)	(H) Percentage ownership

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Part V Transactions with Related Organizations

	Complete line 1 if any entity is listed in Parts II, III or IV.		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:			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		
	Gift, grant, or capital contribution to other organization	1b		
	Gift, grant, or capital contribution from other organization	1c		
	Loans or loan guarantees to or for other organization	1d		
	Loans or loan guarantees by other organization	1e		
е	Loans of loan guarantees by other organization			
		1f		
	Sale of assets to other organization			
_	The second control of	1g		
	Exchange of assets	1h		
i	Lease of facilities, equipment, or other assets to other organization	1i		
j	Lease of facilities, equipment, or other assets from other organization	1j		
k	Performance of services or membership or fundraising solicitations for other organization	1k		
1	Performance of services or membership or fundraising solicitations by other organization	11		
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		
n	Sharing of paid employees	1n		
0	Reimbursement paid to other organization for expenses	10		
р	Reimbursement paid by other organization for expenses	1p		
а	Other transfer of cash or property to other organization	1q		
r	Other transfer of cash or property from other organization	1r		
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	on thi	eshol	ds.
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	type (a-r)	(\$)	
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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 it 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 501(c)(3) organizations?		(E) Share of End-of-year assets (\$)	(F) Disproportionate allocations?		(G) Code V-UBI amount on Box 20 of K-1 (\$)	(H) General or Managing Partner?	
			Yes	No		Yes	No		Yes	No
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