

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning 10-01-2007 and ending 09-30-2008

- B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization: Communities In Schools. Number and street: 277 South WASHINGTON STREET No 210. City or town: ALEXANDRIA, VA 22314

D Employer identification number: 58-1289174. E Telephone number: (703) 519-8999. F Accounting method: Accrual

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? H(b) If "Yes" enter number of affiliates. H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling?

G Web site: www.cisnet.org

J Organization type (check only one): 501(c)(3)

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 14,584,946

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets at beginning of year, Other changes in net assets, Net assets at end of year.

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(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.

	(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 <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ 3,082,292 noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	3,082,292	3,082,292	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	25a	1,177,605	650,444	149,300
b Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	25b			
c 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) (attach schedule)	25c			
26 Salaries and wages of employees not included on lines 25a, b and c	26	2,118,152	1,553,472	306,198
27 Pension plan contributions not included on lines 25a, b and c	27	79,343	53,013	11,427
28 Employee benefits not included on lines 25a - 27	28	492,560	336,850	71,990
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31	40,616		40,616
32 Legal fees	32	1,712	1,073	639
33 Supplies	33	16,317	5,731	9,803
34 Telephone	34	63,502	6,855	55,493
35 Postage and shipping	35	47,210	39,271	5,408
36 Occupancy	36	506,229	283,849	112,094
37 Equipment rental and maintenance	37	46,250	1,949	39,521
38 Printing and publications	38	73,139	66,413	3,038
39 Travel	39	239,797	193,390	6,999
40 Conferences, conventions, and meetings	40	1,302,322	1,292,028	1,474
41 Interest	41	3,802	469	3,333
42 Depreciation, depletion, etc (attach schedule)	42	18,505		18,505
43 Other expenses not covered above (itemize)				
a See Additional Data Table	43a			
b	43b			
c	43c			
d	43d			
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	12,163,176	10,557,412	325,535

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part 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.

What is the organization's primary exempt purpose? ▶ TO CHAMPION THE CONNECTION OF NEEDED COMMUNITY RESOURCES WITH SCHOOLS TO HELP YOUNG PEOPLE SUCCESSFULLY LEARN, STAY IN SCHOOL, AND PREPARE FOR LIFE 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.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a RESEARCH, EVALUATION & LEARNING MANAGEMENT - ACTIVITIES INCLUDE AN ANNUAL EVALUATION OF EVIDENCE BASED PROGRAM SERVICE ACCOMPLISHMENTS WITHIN THE CIS NETWORK ON-GOING WORK ON A MULTI-YEAR, third-PARTY STUDY OF THE CIS NETWORK (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	3,449,843
b PUBLIC AWARENESS & COMMUNICATION- ACTIVITIES INCLUDE THE DISTRIBUTION OF INFORMATION ABOUT THE CIS CONCEPT AND SPECIFIC PROGRAM ACTIVITIES (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	1,615,055
c NETWORK OPERATIONS- ACTIVITIES INCLUDED WORKING WITH STATE OFFICES AND LOCAL AFFILIATES TO BUILD CAPACITY WITHIN THE CIS NETWORK (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	5,061,766
d Network Leadership Development - RETAINING AND BUILDING LEADERS WITHIN CIS NETWORK (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	430,748
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) . . . <input type="checkbox"/>	10,557,412

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing		45	
	46 Savings and temporary cash investments	2,453,858	46	4,986,213
	47a Accounts receivable	47a		
	b Less allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a 5,241,315		
	b Less allowance for doubtful accounts	48b	5,432,597	48c 5,241,315
	49 Grants receivable	288,297	49	78,377
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	411,501	53	16,899
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	3,730,831	54b <input checked="" type="checkbox"/>	327,370
	55a Investments—land, buildings, and equipment basis	55a		
	b Less accumulated depreciation (attach schedule)	55b		55c
	56 Investments—other (attach schedule)		56	
	57a Land, buildings, and equipment basis	57a 413,981		
	b Less accumulated depreciation (attach schedule)	57b 373,746	58,740	57c <input checked="" type="checkbox"/> 40,235
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)	145,979	58 <input checked="" type="checkbox"/>	95,135	
59 Total assets (must equal line 74) Add lines 45 through 58	12,521,803	59	10,785,544	
Liabilities	60 Accounts payable and accrued expenses	926,727	60	806,795
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe <input type="checkbox"/> _____)	132,215	65 <input checked="" type="checkbox"/>	69,657
66 Total liabilities Add lines 60 through 65	1,058,942	66	876,452	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	1,500,831	67	985,869
	68 Temporarily restricted	9,962,030	68	8,923,223
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	11,462,861	73	9,909,092
	74 Total liabilities and net assets / fund balances Add lines 66 and 73	12,521,803	74	10,785,544

Part VI Other Information (continued)

Form 990 (2007) Part VI Other Information (continued)
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?
82b 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) 5,394,111
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h 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 following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b 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
88b 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
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0, section 4912 0, section 4955 0
89b 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 a statement explaining each transaction
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
90a List the states with which a copy of this return is filed
90b Number of employees employed in the pay period that includes March 12, 2007 (See instructions) 39
91a The books are in care of THE CORPORATION Telephone no (703) 519-8999
277 S WASHINGTON STREET Ste 210
Located at ALEXANDRIA, VA ZIP + 4 22314
91b 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)?
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

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No

If "Yes," enter the name of the foreign country _____

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year **92** _____

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a national conference					451,806
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	165,741	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property			16	3,000	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-160	
101 Net income or (loss) from special events			01	21,716	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a <u>Miscellaneous</u>			01	3,970	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				194,267	451,806
105 Total (add line 104, columns (B), (D), and (E))					646,073

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
97a	Rental income from sublease of office space

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No



NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).




Part XI Information Regarding Transfers To and From Controlled Entities Complete only if the organization is a controlling organization as defined in section 512(b)(13)

				Yes	No
106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
Totals					

				Yes	No
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer	
a					
b					
c					
Totals					

		Yes	No
108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?			

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	 _____ Signature of officer	2009-04-02 Date
	 Janice K Bigelow Chief Financial Officer Type or print name and title	

Paid Preparer's Use Only	Preparer's signature 	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 Johnson Lambert & Co LLP 700 Spring Forest Road Ste 335 Raleigh, NC 27609			EIN 
				Phone no  (919) 719-6400

SCHEDULE A
(Form 990 or 990EZ)

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.)

OMB No 1545-0047

2007

Department of the Treasury
Internal Revenue Service

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

Name of the organization
Communities In Schools

Employer identification number

58-1289174

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(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	(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
Momodu Taylor Communities in Schools Alexandria, VA 22314	dirinftech 40 00	89,625	5,378	0
bob seidel Communities in Schools Alexandria, VA 22314	dirgovgrant 40 00	89,379	1,788	0
Mike Hayes Communities in Schools Alexandria, VA 22314	dirstate&Field 40 00	86,768	1,735	0
Manoma sirisena Communities in Schools Alexandria, VA 22314	controller 40 00	84,250	2,975	0
gary chapman Communities in Schools Alexandria, VA 22314	dirperformlearn 40 00	82,400	4,944	0
Total number of other employees paid over \$50,000	17			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
CALIBER ASSOCIATES INC PO Box 7777-W510501 Philadelphia, PA 19175	RESEARCH & EVALUATION	908,000
bridgespan group 535 boylston street 10th floor boston, MA 02116	STRATEGIC PLANNING	531,349
collaborative communications 1029 vermont ave 9th floor washington, DC 20005	COMMUNICATIONS FOR PLC's	111,951
campbell company 1 east wicker dr suite 3350 chicago, IL 60601	RESOURCE DEVELOPMENT SUPPORT	87,133
holland knight llp po Box 32092 lakeland, FL 33802	strategic advocacy	81,059
Total number of others receiving over \$50,000 for professional services	3	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over \$50,000 for other services		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, include 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 ▶ \$ <u>171,862</u> (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)</p> <p>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</p>	1	Yes	
<p>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.)</p> <p>a Sale, exchange, or leasing property?</p>	2a		No
<p>b Lending of money or other extension of credit?</p>	2b		No
<p>c Furnishing of goods, services, or facilities?</p>	2c		No
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	Yes	
<p>e Transfer of any part of its income or assets?</p>	2e		No
<p>3a 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)</p>	3a	Yes	
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	3b	Yes	
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	3c		No
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	3d		No
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	4a	Yes	
<p>b Did the organization make any taxable distributions under section 4966?</p>	4b		
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	4c		
<p>d Enter the total number of donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____</p>			
<p>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 ▶ <u>0</u></p>			
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ <u>0</u></p>			

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
- Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					<input type="checkbox"/>

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar 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)	14,502,589	11,916,463	7,365,235	7,319,824	41,104,111
16 Membership fees received					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	15,708	275,588	443,713	145,500	880,509
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	217,528	82,783	36,117	3,474	339,902
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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 public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	877	16,481			17,358
23 Total of lines 15 through 22	14,736,702	12,291,315	7,845,065	7,468,798	42,341,880
24 Line 23 minus line 17	14,720,994	12,015,727	7,401,352	7,323,298	41,461,371
25 Enter 1% of line 23	147,367	122,913	78,451	74,688	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a 829,227
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					26b 21,303,788
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 41,461,371
d Add Amounts from column (e) for lines	18 339,902	19 0			
	22	26b	21,303,788		
e Public support (line 26c minus line 26d total)					26e 19,800,323
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 4775 61 %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year (2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add Amounts from column (e) for lines	15 _____	16 _____			
	17 _____	20 _____	21 _____		
d Add Line 27a total _____ and line 27b total _____					27c _____
e Public support (line 27c total minus line 27d total)					27d _____
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)					27e _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27f _____
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27g _____
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					27h _____

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
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?		
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?		
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? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? 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 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Additional Data

Software ID:
Software Version:
EIN: 58-1289174
Name: Communities In Schools

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a Other Contract Services	43a	2,222,243	2,000,620	16,781	204,842
b Employee Training	43b	10,870	1,241	1,803	7,826
c Property and Other taxes	43c	8,265		8,265	
d Corporate Insurance	43d	23,303	53	23,040	210
e Meals and Entertainment	43e	54,137	41,345	2,820	9,972
f MISCELLANEOUS	43f	33,879	29,645	1,882	2,352
g Computer Services	43g	31,045	6,609	24,371	65
h Advertising	43h	352,035	346,701	4,957	377
i dues and subscriptions	43i	13,013	9,475	1,011	2,527
j bank fees	43j	4,998		4,998	
k payroll outsourcing	43k	75,735	15,000	51,935	8,800
l computer supplies	43l	24,300	9,274	14,688	338

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
WILLIAM E MILLIKEN Communities in Schools Alexandria, VA 22314	VICE CHAIR & FOUNDER 40 00	216,000	16,710	6,214
DANIEL J CARDINALI Communities in Schools Alexandria, VA 22314	PRESIDENT 40 00	246,250	12,908	0
JANICE K BIGELOW Communities in Schools Alexandria, VA 22314	CHIEF FINANCIAL OFFICER 40 00	116,757	6,627	0
Louise Reaves Communities in Schools Alexandria, VA 22314	chief operating officer 40 00	138,038	8,282	0
SUSAN SIEGEL Communities in Schools Alexandria, VA 22314	Vice President REALM 40 00	121,012	7,261	0
DEBORAH VENEY ROBINSON Communities in Schools Alexandria, VA 22314	VP OF COMMUNICATIONS 40 00	122,330	7,340	0
Janella Franklin Communities in Schools Alexandria, VA 22314	VP of Development 40 00	115,031	6,902	0
daniel fuller Communities in Schools Alexandria, VA 22314	vp of government resources 40 00	29,943	0	0
hon veronica biggins Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
James cox chambers Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
RayMOND G CHAMBERS Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
MILLARD S DREXLER Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
John r ETTINGER Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
hon linda gale white Communities in Schools alexandria, VA 22314	DIRECTOR 5 00	0	0	0
hon DAN GLICKMAN Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
dr paul houston Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
georGE H JOHNSON Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
linda leSOURD LADER Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
robERT LIGHT Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
Jillian manus Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
john H MOBLEY II Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
john nixon Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
dean L OVERMAN Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
yvonne m petrasovits Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
johnathon g powers Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
richard rogel Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
sherrIE ROLLINS WESTIN communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
leoNARD STERN Communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
donna WEISS communities in Schools Alexandria, VA 22314	DIRECTOR 5 00	0	0	0
elainE WYNN Communities in Schools Alexandria, VA 22314	chairman 5 00	0	0	0

TY 2007 Cash Grants Paid Schedule

Name: Communities In Schools

EIN: 58-1289174

Class of Activity	Recipient's name	Address	Amount	Relationship
Awards Grants and Scholarships	CIS of ALASKA INC	PO Box 140090 Anchorage, AK 99514	547,344	
Awards Grants and Scholarships	CIS of ARIZONA Inc	4520 N Central Avenue Suite 560 Phoenix, AZ 85012		
awards Grants and Scholarships	CIS of the Nations Capital	1700 Pennsylvania Avenue NW Suite 850 Washington, DC 20006	82,039	
awards Grants and Scholarships	CIS of DeLAWARE	100 Campus Drive Dover, DE 19904		
Awards Grants and Scholarships	CIS of FloRIDA Inc	444 Appleyard Drive Tallahassee, FL 32304		
Awards Grants and Scholarships	CIS of GeoRGIA Inc	600 West Peachtree Street Suite 1200 Atlanta, GA 30308	714,579	
Awards Grants and Scholarships	CIS of KANSAS	317 North 250th Mulberry, KS 66756		
Awards Grants and Scholarships	CIS of MichIGAN	11172 ADAMS sT Holland, MI 49423		

Class of Activity	Recipient's name	Address	Amount	Relationship
Awards Grants and Scholarships	CIS of NeW JERSEY	155 Washington Street Suite 201 Newark, NJ 07102		
Awards Grants and Scholarships	CIS of NORTH CAROLINA	222 N Person Street Raleigh, NC 27601	325,500	
Awards Grants and Scholarships	CIS of PENNSYLVANIA	225 Boulevard of the ALlies Suite 204 Pittsburgh, PA 15222	375,000	
Awards Grants and Scholarships	CIS of South carolina Inc	2712 Middleburg Drive Suite 207-B Columbia, SC 29204		
Awards Grants and Scholarships	cis of virginia	413 Stuart Circle Suite 130 richmond, VA 23220	283,500	
Awards Grants and Scholarships	cis of washington State	1904 Third Avenue Suite 435 seattle, WA 98101	161,500	
Awards Grants and Scholarships	cis of miami	11900 SW 128th Street miami, FL 33186	10,000	
Awards Grants and Scholarships	cis of nassau County Inc	516 South 10th Street Suite 205 fernandina Beach, FL 32034		

Class of Activity	Recipient's name	Address	Amount	Relationship
Awards Grants and Scholarships	cis of atlanta	600 W Peachtree Sreet NE Suite 1250 atlanta, GA 30308	45,000	
Awards Grants and Scholarships	cis of elkhart & LaGrange Counties	po box 812 goshen, IN 46527		
Awards Grants and Scholarships	cis of new orleans Inc	1600 constance Street new Orleans, LA 70130	136,500	
Awards Grants and Scholarships	cis of detriot Inc	5830 Field detriot, MI 48213	6,250	
Awards Grants and Scholarships	cis of mancelona	205 Grove Street mancelona, MI 49659		
Awards Grants and Scholarships	cis of jackson	975 North Street Suite 103 jackson, MS 39202	50,000	
awards Grants and Scholarships	cis of brunswick County Inc	8520 River Road SE southport, NC 28461		
awards Grants and Scholarships	cis of charlotte- Mecklenburg	601 East 5th Street Suite 300 charlotte, NC 28202	40,000	

Class of Activity	Recipient's name	Address	Amount	Relationship
awards Grants and Scholarships	cis of cleveland County	502 South Lafayette Street shelby, NC 28150	2,000	
awards Grants and Scholarships	cis of rowan county	204 East Innes Street salisbury, NC 28145		
awards Grants and Scholarships	cis of southern Nevada	8695 Martinique Bay Lane las Vegas, NV 89147		
awards Grants and Scholarships	cis of columbus	510 east North Broadway Suite 4a colubmus, OH 43214	50,000	
awards Grants and Scholarships	cis of philadelphia	2000 hamilton Street Suite 201 philadelphia, PA 19130	14,582	
Awards Grants and Scholarships	cis of charleston	701 EAst Bay Street charleston, SC 29403		
Awards Grants and Scholarships	cis of chester county inc	3595 Lancaster Highway ricburg, SC 29729		
Awards Grants and Scholarships	cis of greenville County	506 S Pleasantburg Drive Bldg 105 greenville, SC 29606		

Class of Activity	Recipient's name	Address	Amount	Relationship
Awards Grants and Scholarships	cis of bell-Coryell Counties Inc	4520 E Cen-Tex Expressway Suite 106 killeen, TX 76543		
Awards Grants and Scholarships	cis of central TExas Inc	3000 S IH 35 austin, TX 78704	18,000	
Awards Grants and Scholarships	cis daLLAS region Inc	8700 N Stemmons FWY Suite 1250 dallas, TX 75247		
Awards Grants and Scholarships	cis houston Inc	2150 W 18th Street Suite 100 houston, TX 77008	25,000	
Awards Grants and Scholarships	cis of san Antonio Inc	1616 E commerce Building 1 san antonio, TX 78205	2,500	
Awards Grants and Scholarships	cis of lakewood	6402 100th Street SW lakewood, WA 98499		
Awards Grants and Scholarships	cis of peninsula	po box 684 vaughn, WA 98394		
Awards Grants and Scholarships	cis of durham	411 w chapel hill street durham, NC 27701		

Class of Activity	Recipient's name	Address	Amount	Relationship
Awards Grants and Scholarships	cis of jacksonville	3100 university blvd south suite 300 jacksonville, FL 32216	75,000	
Awards Grants and Scholarships	cis of newark	155 Washington Street Suite 205 newark, NJ 07102	40,000	
awards Grants and Scholarships	cis of los angeles	2000 avenue of the stars los angeles, CA 90067	35,748	
Awards Grants and Scholarships	cis of tacoma	1615 S 92nd Street tacoma, WA 98444		
Awards Grants and Scholarships	CIS of pittsburgh	225 Boulevard of the Allies Suite 404 pittsburgh, PA 15222	2,500	
awards Grants and Scholarships	cis of richmond	1518 willow lawn drive richmond, VA 23230	250	
awards Grants and Scholarships	cis of south west PA	137 n beason avenue uniontown, PA 15401	2,500	
awards Grants and Scholarships	city of valdosta	1204 williams street valdosta, GA 31603	2,500	

Class of Activity	Recipient's name	Address	Amount	Relationship
awards Grants and Scholarships	cis of putnam county	po box 490 paltka, FL 32178	2,000	
awards Grants and Scholarships	cis of high point	503 ferndale boulevard high point, NC 27262	2,500	
awards Grants and Scholarships	cis of schools of hart county	267 east johnson street hartwell, GA 30643	2,500	
awards Grants and Scholarships	cis of chorpus christie	po box 331203 corpus christie, TX 78463	2,500	
awards Grants and Scholarships	cis of cedar valley	213 east fourth street waterloo, IA 50703	25,000	

TY 2007 Depreciation and Depletion Schedule

Name: Communities In Schools

EIN: 58-1289174

Asset	Amount
Furniture and equipment	18,505

TY 2007 Gain/Loss from Sale of Public Securities Schedule**Name:** Communities In Schools**EIN:** 58-1289174**Gross Sales Price:** 3,784,136**Basis:** 3,784,296**Sales Expenses:** 0**Total (net):** -160

TY 2007 Investments - Securities Schedule

Name: Communities In Schools

EIN: 58-1289174

Description	Book Value	Cost/FMV
mutual funds	327,370	F

TY 2007 Land etc. Schedule

Name: Communities In Schools

EIN: 58-1289174

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Furniture and equipment	413,981	373,746	40,235

TY 2007 Other Assets Schedule

Name: Communities In Schools

EIN: 58-1289174

Description	Beginning of Year Amount	End of Year Amount
cash held for restricted purposes	145,979	95,135

TY 2007 Other Changes in Net Assets Schedule**Name:** Communities In Schools**EIN:** 58-1289174

Description	Amount
Unrealized LOSS on investments	-96,656

TY 2007 Other Expenses Included Schedule

Name: Communities In Schools

EIN: 58-1289174

Description	Amount
special events expense	94,587

TY 2007 Other Liabilities Schedule

Name: Communities In Schools

EIN: 58-1289174

Description	Beginning of Year Amount	End of Year Amount
Deferred Rent	100,595	54,347
Capital Lease Obligation	31,620	15,310

TY 2007 Other Revenues Included Schedule

Name: Communities In Schools

EIN: 58-1289174

Description	Amount
special events expense	94,587

TY 2007 Special Events Schedule

Name: Communities In Schools

EIN: 58-1289174

Event Name	Gross Receipts	Contributions	Gross Revenue	Direct Expense	Net Income (Loss)
lunch w ith a leader	116,303	0	116,303	94,587	21,716

TY 2007 Other Income Schedule

Name: Communities In Schools

EIN: 58-1289174

Description	2006	2005	2004	2003	Total
bankruptcy court		16,454			16,454
miscellaneous	877	27			904

TY 2007 Scholarship Award Statement

Name: Communities In Schools

EIN: 58-1289174

Statement: NAMED AFTER CIS'S FOUNDING BOARD CHAIRMAN, THE ROBERT H.B. BALDWIN FELLOWS PROGRAM BRINGS TOGETHER CURRENT AND EMERGING LEADERS TO LEARN FROM EACH OTHER AND DEVELOP LONG-TERM LEADERSHIP SUSTAINABILITY THROUGH ONE-YEAR FULL OR PART TIME FELLOWSHIPS. THE FELLOWS PROGRAM WAS BASED ON BEST PRACTICES FROM EXISTING INITIATIVES, CONSULTATION WITH CIS NETWORK LEADERS, AND OUTREACH TO OTHER NATIONAL NONPROFIT FELLOWS OR LEADERSHIP PROGRAMS. CIS FELLOWS SUBMIT AN APPLICATION AND PROPOSED WORK PLAN WHICH IS REVIEWED AND EVALUATED BY CIS NATIONAL STAFF AND BOARD LEADERSHIP.

Form 8453-EO

Exempt Organization Declaration and Signature for Electronic Filing

OMB No 1545-1879

For calendar year 2007, or tax year beginning OCT 1, 2007, and ending SEP 30, 2008

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

2007

Department of the Treasury Internal Revenue Service

See instructions.

Name of exempt organization

COMMUNITIES IN SCHOOLS

Employer identification number

58-1289174

Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here [X] b Total revenue, if any (Form 990, line 12) 1b 10706063
2a Form 990-EZ check here [] b Total revenue, if any (Form 990-EZ, line 9) 2b
3a Form 1120-POL check here [] b Total tax (Form 1120-POL, line 22) 3b
4a Form 990-PF check here [] b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here [] b Balance due (Form 8868, line 3c) 5b

Declaration of Officer

I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2007 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount shown on the copy of the organization's electronic return, I consent to allow my immediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here [Signature] 14.2.09 CHIEF FINANCIAL OFFICER
Signature of officer Date Title

Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernization e-file (MeF) Information for Authorized IRS e-file Providers. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only [Signature] Date 4/6/09 Check if also paid preparer [X] Check if self-employed [] ERO's SSN or PTIN T00544178
Firm's name (or yours if self-employed), address, and ZIP code JOHNSON LAMBERT & CO LLP EIN 52-1446779
700 SPRING FOREST ROAD, STE 335 Phone no. 919-719-6400
RALEIGH, NC 27609

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer's Use Only [Signature] Date Check if self-employed [] Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code EIN
Phone no.