2009 Exempt Org. Return prepared for:

OAK CREST INSTITUTE OF SCIENCE 2275 E FOOTHILL BLVD. PASADENA, CA 91107

Dalton & Garrett

8055 W Manchester Ave. Ste 617 Playa Del Rey, CA 90293

Form 990

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)

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For the 2009 calendar year, or tax year beginning , 2009, and ending D Employer Identification Number Check if applicable OAK CREST INSTITUTE OF SCIENCE 95-4680961 Address change IRS label or print 2275 E FOOTHILL BLVD. Telephone number Name change or type. See specific Instruc-PASADENA, CA 91107 626 817-0883 Indial return Termination 979,545. G Gross receipts \$ Amended return DR. MARC BAUM H(a) is this a group return for affiliates? F Name and address of principal officer: Application pending Yes No H(b) Are all affiliates included? No Same As C Above If 'No,' attach a list. (see instructions) Tax-exempt status X 501(c) (3) < (insert no.) 4947(a)(1) or 527 Website: ► www.oak-crest.org H(c) Group exemption number Form of organization: Corporation Trust Part I Summary 1 Briefly describe the organization's mission or most significant activities: SCIENTIFIC RESEARCH PROJECTS FOR ENVIRONMENTAL IMPROVEMENTS PROJECTS RELATED TO AIR POLUTION AND MEASUREMENTS Activities & Governance INCLUDING THE DEVELOPEMENT OF PROTOTYPE INSTRUMENTS Check this box ► if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a). Number of independent voting members of the governing body (Part VI, line 1b). 4 0 0 Total number of employees (Part V, line 2a). 5 6 Total number of volunteers (estimate if necessary) 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7 a b Net unrelated business taxable income from Form 990-T, line 34 7 b 0. Current Year 511,880 922,188. Contributions and grants (Part VIII, line 1h). Program service revenue (Part VIII, line 2g) 149,871 56,509. 41,776 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 848. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). 45,016. 748,543. 979,545. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).... Grants and similar amounts paid (Part IX, column (A), lines 1-3). 275,472. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 275,472 539,642. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 282,050 408,313. 947,955. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 832,994. Revenue less expenses. Subtract line 18 from line 12. -84,451 31,590. End of Year Beginning of Year 282,050 327,396. 20 Total assets (Part X, line 16) 19,132. 5,376. 21 Total liabilities (Part X, line 26) 276,674. 22 Net assets or fund balances. Subtract line 21 from line 20. 308,264. Part II Signature Block 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. Sign Here Signature of officer Type or print name and title Date Preparer's identifying number (see instructions) Check if Paid employed > Pre-RICHARD L. GARRETT CPA/CFO N/A parer's Dalton & Garrett Firm's name (or yours if self-Use 8055 W Manchester Ave. Ste 617 EIN N/A Only Playa Del Rey, CA 90293 ▶ 562 422-9696 May the IRS discuss this return with the preparer shown above? (see instructions) Yes

95-4680961

Page 2

Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes, 'complete 2 X Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 3 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete 4 X Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III. 5 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D. 6 6 X Part I..... Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II. 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 X complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; 9 or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete 9 Χ Schedule D. Part IV. Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? I "Yes," complete Schedule D. Part V. 10 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or 11 X X as applicable. Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI.... Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. • Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X · Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII. X 12 12A Was the organization included in consolidated, independent audited financial statement for the tax Yes No Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 X Χ 14a Did the organization maintain an office, employees, or agents outside of the United States?..... 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I. X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II. X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III. 16 Χ Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. 18 lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19 X 19 complete Schedule G, Part III X Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20

Checklist of Required Schedules (continued) Part IV No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II. 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25. X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I X 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b X Schedule L, Part I..... Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II. X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete X 27 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a Χ a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b X Schedule L, Part IV..... c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If 'Yes,' complete Schedule M..... Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I..... 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 32 X Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I... 33 33 Χ Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1..... 34 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 35 X Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2. 36 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI. 37 X 37

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X

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 0 1a Information Returns, Enter -0- if not applicable 0 1 b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? ... 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 0 2a calendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?... 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X 3a this return? b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O ... 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)?..... 4a b If 'Yes,' enter the name of the foreign country: > See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?..... X 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5 c Tax Shelter Transaction?.... 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a X solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 66 deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Χ 7a provided to the payor? 7b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?..... c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c Form 8282? e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.... 7 f X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year?... 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12. 10a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . 10b 11 Section 501(c)(12) organizations. Enter: 11a a Gross income from other members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 12b

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Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| Se | ction A. | Governing Body and Management | | | | |
|-------|---------------------------|--|--|---------|---------|--------|
| | | | | | Yes | No |
| 3 | a Enter the | number of voting members of the governing body | 1a 3 | 4 3 | | |
| | b Enter the | number of voting members that are independent | 1 b | | 107 | |
| 2 | 2 Did any o officer, d | officer, director, trustee, or key employee have a family relationship or a business re irector, trustee or key employee? | lationship with any other | 2 | | Х |
| 200 | B Did the o | organization delegate control over management duties customarily performed by or use, directors or trustees, or key employees to a management company or other person | under the direct supervision on? | 3 | | Х |
| 1 | | organization make any significant changes to its organizational documents | | 4 | | X |
| | since the | prior Form 990 was filed? | | | | |
| į | Did the o | organization become aware during the year of a material diversion of the organization | n's assets? | 5 | | Х |
| 6 | Does the | organization have members or stockholders? | | 6 | | X |
| 1 | 7a Does the | organization have members, stockholders, or other persons who may elect one or rig body? | more members of the | 7 a | | Х |
| | b Are any o | decisions of the governing body subject to approval by members, stockholders, or of | her persons? | 7b | | X |
| 8 | B Did the o | organization contemporaneously document the meetings held or written actions under | rtaken during the year by | | | |
| | | erning body? | | 8a | | X |
| | | nmittee with authority to act on behalf of the governing body? | | 86 | | X |
| | | any officer, director or trustee, or key employee listed in Part VII, Section A, who car tion's mailing address? If 'Yes,' provide the names and addresses in Schedule O. | | 9 | | Х |
| Se | ction B | Policies (This Section B requests information about policies not r | required by the Internal | | | 11 |
| | venue Code | TO CAN WAS A SECOND STREET STREET OF THE PROPERTY OF THE PROPE | 0441100 09 1110 111011101 | | | |
| 1,500 | VETTIGO COMO | 9 | | | Yes | No |
| 1(| | organization have local chapters, branches, or affiliates? | | 10a | | X |
| | | does the organization have written policies and procedures governing the activities of ches to ensure their operations are consistent with those of the organization? | | 10b | | |
| | | organization provided a copy of this Form 990 to all members of its governing body t | | 11 | | X |
| | | in Schedule O the process, if any, used by the organization to review this Form 990 | | | | 37 |
| 12 | | organization have a written conflict of interest policy? If 'No,' go to line 13 | | 12a | | X |
| | to conflic | ers, directors or trustees, and key employees required to disclose annually interests its? | | 12b | | |
| | Schedule | organization regularly and consistently monitor and enforce compliance with the po | Land to the second seco | 12c | | |
| | | organization have a written whistleblower policy? | | 13 | | X |
| | | organization have a written document retention and destruction policy? | | 14 | | X |
| 15 | Did the p persons, | process for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and dec | approval by independent cision? | | | |
| | a The orga | nization's CEO, Executive Director, or top management official | | 15a | | X |
| | | icers of key employees of the organization. | | 15b | | X |
| | If 'Yes' to | o line 15a or 15b, describe the process in Schedule O. (See instructions.) | | | | |
| 16 | a Did the o entity dur | organization invest in, contribute assets to, or participate in a joint venture or similar ring the year? | arrangement with a taxable | 16a | 31 | Х |
| | in joint ve | has the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard th respect to such arrangements? | the organization's exempt | 16b | | |
| Se | ction C. | Disclosures | | | | |
| 17 | 7 List the s | states with which a copy of this Form 990 is required to be filed None | | | | |
| 18 | Section 6 | 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, are in. Indicate how you make these available. Check all that apply. | nd 990-T (501(c)(3)s only) a | vailab | e for | public |
| | | website Another's website Upon request | | | | |
| 15 | Describe statemen | in Schedule O whether (and if so, how) the organization makes its governing documits available to the public. | nents, conflict of interest pol | icy, ar | nd fina | ancial |
| 20 | State the | name, physical address, and telephone number of the person who possesses the b RC BAUM 2275 E FOOTHILL BLVD, CA PASADENA CA 91107 62 | | anizat | ion: | ==:= |
| | | | | | | |

BAA

Form 990 (2009)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - . List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
 organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| (A) | (B) | | | | | | | (D) | (E) | (F) |
|----------------------|------------------------------|-------------------|-----------------------|---------|----------------|------------------------------|--------|--|---|--|
| Name and Title | Average hours per week | ndividual frustee | Institutional trustee | Officer | a Key employee | Highest compensated employee | Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| DR. MARC BAUM CEO | 0 | | | | | | | 93,358. | 0. | 0. |
| WENDY CANO SECRETARY | 0 | | | | | | | 4,582. | 0. | 0. |
| RICHARD GARRETTCFO | 0 | | | | | | | 0. | 0. | 0. |
| NONE | 0 | | | | | Х | | 0. | 0. | 0. |
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| | a . | | | | | | | | a) | |
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TEEA0107L 11/10/09

| Part VII Section A. Officers, Directors, Trus | Agrange) | ley | EII | 101 | - N | es, | an | Central Centra | A15-2-5 | | |
|---|----------------------|-------|-----------------------|---------------|------------|---------------------------------|--------|--|--|---|--|
| (A) | (B) Average | Posi | tion (| | c) | hat as | only) | (D) | (E) | | (F) |
| Name and Title | hours per week | | institutional trustee | Officer | | Highest compensated employee | former | Reportable compensation from the organization (W-2/1099:MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | amount compe from organ and | mated t of other ensation in the nization related izations |
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| | | | | | | .9. | | | | | |
| 1 b Total | | | | | | | - | 97,940. | 0. | : 8 | 0 |
| 2 Total number of individuals (including but not limite from the organization ► 0 | d to tho | se li | sted | abo | ove) | who | re | ceived more than | \$100,000 in reporta | | ensation |
| 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in | or trust | ee, l | key | emp | loye | ee, c | or hi | ghest compensate | ed employee | 3 | X |
| 4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater ti individual | portable han \$15 | 0,00 | npe 0? | nsat If 'Y | ion es' | and | | er compensation e Schedule J for s | | 4 | X |
| 5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci | ompens | ation | n fro | om a | iny i | unre | late | d organization for | services | | X |
| Section B. Independent Contractors | redure 5 | 101 | 300 | ripe | 1301 | L | CEEL | | | 3 | A |
| Complete this table for your five highest compensate compensation from the organization. | ed inde | pend | lent | con | trac | tors | tha | t received more to | nan \$100,000 of | | |
| (A) Name and business addres | S | | | | | | | Description of | f Services | (C) Compens | |
| NONE , | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 2 Total number of independent contractors (including \$100,000 in compensation from the organization ► | | limit | ed I | to th | ose | liste | ed a | bove) who receive | ed more than | | |

| | rt VIII Statement of Revenue | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|---|---|----------------------|--|---|--|
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | 1a Federated campaigns. 1a b Membership dues. 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e 913,895. f All other contributions, gifts, grants, and similar amounts not included above 1f 8,293. | | | | |
| NO | g Noncash contribns included in Ins 1a-1f: \$ | | | | |
| Ü ~ | h Total. Add lines 1a-1f Business Code | 922,188. | | | |
| ENDI | 2a RESEARCH PROJ. & TECH ADV | 47,505. | | | 47,505. |
| REV | b MISC | 9,004. | | | 9,004. |
| SERVICE R | c d | | | | 2,001. |
| RAM | e | | | | |
| ROG | f All other program service revenue | F.C. F.O.O. | | | |
| 0. | | 56,509. | | | |
| | Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds | 848. | 848. | | |
| | 5 Royalties. | | | | |
| | 6a Gross Rents b Less: rental expenses c Rental income or (loss) | | | | |
| | d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory. | | | | |
| | b Less: cost or other basis and sales expenses | | | | |
| | c Gain or (loss) | ., | | | |
| JUE. | 8a Gross income from fundraising events (not including, \$ | | | | |
| OTHER REVEN | of contributions reported on line 1c). See Part IV, line 18 | | | | |
| THE | b Less: direct expenses. b | | | | |
| 0 | c Net income or (loss) from fundraising events | | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19a | | | | |
| | b Less: direct expenses b | | | | |
| | c Net income or (loss) from gaming activities | | | | |
| | 10a Gross sales of inventory, less returns and allowances | | | | |
| | c Net income or (loss) from sales of inventory. | | | | No. of Concession, Name of Street, or other Persons, Name of Street, or ot |
| | Miscellaneous Revenue Business Code | | | | |
| | b c d All other revenue | | | | |
| | e Total. Add lines 11a-11d | 070 545 | 0.10 | | EC 500 |
| | 12 Total revenue. See instructions. | 979,545. | 848. | 0. | 56,509. |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 2 2 Grants and other assistance to individuals in the U.S. See Part IV, line 2 3 Grants and other assistance to individuals in the U.S. See Part IV, lines 15 and 16 3 Grants and other assistance to premise the U.S. See Part IV, lines 15 and 16 3 Grants and other assistance to governments, U.S. See Part IV, lines 15 and 16 3 Grants and other assistance to individuals in the U.S. See Part IV, lines 15 and 16 3 Grants and other assistance to individuals in the U.S. See Part IV, lines 15 and 16 3 Grants and other assistance to individuals in the U.S. See Part IV, lines 15 and 16 3 Grants and key employees 5 Grants and key employees 5 Grants and wapse 5 Grants and w | | not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|----|--|-----------------------|---|---|--------------------------------|
| 2 Grants and other assistance to individuals in the U.S. See Part IV, line S and 16 to 16 | 1 | and organizations in the U.S. See Part IV. | | | | |
| organizations, and individuals outside the U.S. See Part IV, line 15 and 16 4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4985(f)) and persons described in section 4985(f) and persons des | 2 | Grants and other assistance to individuals in | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation not included above, to disqualified persons (set defined under section 4955()(1) and persons described in section 4956()(1) and persons described in section 4956()(1) and persons described in section 4965()(3)(8) and section 403(b) employer comfibilitions. 7 Other employee benefits 36,224. 36,224 | 3 | organizations, and individuals outside the | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation not included above, to disqualified persons (set defined under section 4955()(1) and persons described in section 4956()(1) and persons described in section 4956()(1) and persons described in section 4965()(3)(8) and section 403(b) employer comfibilitions. 7 Other employee benefits 36,224. 36,224 | 4 | Benefits paid to or for members | | | | |
| disqualified persons (as defined under section 4958)((3)(8) 7 Other salaries and wages 8 Penston plan contributions (include section 4958)((3)(8)) 8 Penston plan contributions (include section 401(8) askaries and wages 9 Other employee benefits 10 Payroll taxes 11 Peas for services (non-employees) 12 Advertising and promotion. 13 Office expenses 14 Information technology. 15 Royalites. 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Payments to affiliates 10 Conference, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization and survance of the payments of travel or entertainment expenses for any federal state, or local public officials. 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization and survance of Society (170, 170, 170, 170, 170). 16 Contract LABOR 75, 513. 53, 348. 22, 165. 180, 184. 194, 1943. 194, 194, 194, 194, 194, 194, 194, 194, | 5 | Compensation of current officers, directors, | 97,940. | 53,867. | 44,073. | 0. |
| 8 Pension plan contributions (include section 40 (b) employer contributions) 9 Other employee benefits 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 12 Assay a Management 13 Legal 14 Assay a Management 15 Legal 16 Legal 17 Assay a Management 18 Legal 18 Legal 19 Legal 10 Le | 6 | disqualified persons (as defined under section 4958(f)(1) and persons described in | 0. | 0. | 0. | 0. |
| 8 Pension plan contributions (include section 401(k) and section 403(k) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 12 Assessment 13 Abanagement 14 Legal 15 Legal 16 Legal 17 Legal 18 Legal 19 L | 7 | Other salaries and wages | 364,400. | 237,231. | 127,169. | 10 |
| 9 Other employee benefits 36, 224. 38, 567. 24, 297. 14, 270. 17 Payroll taxes 38, 567. 24, 297. 14, 270. 18 Pees for services (non-employees) a Management b Legal 4, 560. 4, 560. 4, 560. 4, 560. 5 Accounting 1, 700. 1, 7 | 8 | 401(k) and section 403(b) employer | 2,511. | | 7/2 17/2/07 | |
| 10 Payroll taxes 38,567. 24,297. 14,270. 11 Fees for services (non-employees) a Management b Legal 4,560. 4,560. 1,700. | 9 | | | | | |
| 11 Fees for services (non-employees) a Management b Legal | | - | | 24,297. | | |
| a Management b Legal | | | | | m.s. F. m. 1056.3 | |
| b Legal | | - | | | | |
| c Accounting d Lobbyrng e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 13,846. 14 Information technology 15 Royalites 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses, Itemize expenses not over above to develope above. (Expenses grouped together convert labeled subspenses shown on line 25 below.) a RESEARCH PROJECTS 80,184. 80,184 | | | 4 560 | | 4 560 | |
| e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other. 12 Advertising and promotion 13 Office expenses 13,846. 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Depreciation, depletion, and amortization 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 2 a RESEARCH PROJECTS 2 BO,184. 3 BO,184. 4 BO,184. 5 CONTRACT LABOR 7 5,513. 5 3,348. 2 2,165. c LABORATORY SUPPLIES 3 9,941. 2 7,958. 1 1,983. d CONSULTANTS 2 7,881. 2 0,800. 2 5,081. e UTTLITTES 5 10 Interious Payments 5 14 Interious Payments 6 4,203. 5 1,333. 5 9,070. 25 Total functional expenses. Add lines 1 through 24f. 9 47,955. 5 69,169. 3 78,786. | | | | | | |
| e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Depreciation, depletion, and amortization 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above, (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 2a RESEARCH PROJECTS 2b CONTRACT LABOR 27, 581 28, 29, 39, 41 29, 29, 39, 41 20, 39, 348 20, 25, 31 21, 39, 348 22, 165 24, 27, 381 25, 20, 371 27, 381 280 29, 20, 371 29, 39, 39, 39, 39, 39, 39, 39, 39, 39, 3 | | - | | | 1,100. | |
| f Investment management fees g Other | | | | | | |
| g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Conferences, conventions, and meetings 20 Depreciation, depletion, and amortization 21 Insurance 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 28 RESEARCH PROJECTS 29 Bontant PROJECTS 30,184. 310 Bontant | | | | | | |
| 13 Office expenses 3,846. 3,846. 14 Information technology 15 Royalties | | | | | | |
| 14 Information technology 35,684. 28,081. 7,603. 16 Occupancy 35,684. 28,081. 7,603. 17 Travel 1,506. 603. 903. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ———————————————————————————————————— | 12 | Advertising and promotion | | | | |
| 14 Information technology. 370,401 (a) 28,081. 7,603. 16 Occupancy 35,684. 28,081. 7,603. 17 Travel 1,506. 603. 903. 18 Payments of travel or entertainment experises for any federal, state, or local public officials ———————————————————————————————————— | 13 | Office expenses | 3,846. | | 3,846. | |
| 15 Royalties. 16 Occupancy 17 Travel 18 Payments of travel or entertainment expénses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 28 RESEARCH PROJECTS 29 CONTRACT LABOR 20 CONTRACT LABOR 20 Total functional expenses State | 14 | N. W. Carlotte, M. | | | | |
| 16 Occupancy 35,684. 28,081. 7,603. 17 Travel 1,506. 603. 903. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20. 20. 19 Conferences, conventions, and meetings 3,122. 493. 2,629. 20 Interest 371. 371. 21 Payments to affiliates 22. 20. 22 Depreciation, depletion, and amortization 43,261. 40,438. 2,823. 23 Insurance 6,170. 6,170. 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 80,184. 80,184. 8 ESEARCH PROJECTS 80,184. 80,184. 80,184. 8 CONTRACT LABOR 75,513. 53,348. 22,165. 5 LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the | 15 | Royalties | | | | |
| 17 Travel 2 1,506. 603. 903. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 371. 371. 371. 371. 21 Payments to affiliates 2 Depreciation, depletion, and amortization 43,261. 40,438. 2,823. 2 Insurance 6,170. 6,170. 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a RESEARCH PROJECTS 80,184. 80,184. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the | 16 | | | 28,081. | 7,603. | |
| expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 3,122. 493. 2,629. 20 Interest 371. 371. 21 Payments to affiliates 22 Depreciation, depletion, and amortization 43,261. 40,438. 2,823. 23 Insurance 6,170. 6,170. 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a RESEARCH PROJECTS 80,184. 80,184. b CONTRACT LABOR 75,513. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here □ if following SOP 98-2. Complete this line only if the | 17 | Travel | | 100000000000000000000000000000000000000 | 903. | |
| 20 Interest 371. 371. | 18 | Payments of travel or entertainment expenses for any federal, state, or local | | 84 | | |
| Payments to affiliates 22 Depreciation, depletion, and amortization 43,261. 40,438. 2,823. | 19 | Conferences, conventions, and meetings | 3,122. | 493. | 2,629. | |
| 22 Depreciation, depletion, and amortization 43,261. 40,438. 2,823. 23 Insurance 6,170. 6,170. 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 80,184. 80,184. a RESEARCH PROJECTS 80,184. 80,184. b CONTRACT LABOR 75,513. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here | 20 | Interest | 371. | | 371. | |
| 23 | 21 | Payments to affiliates | | | | |
| 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 80,184. 80,184. a RESEARCH PROJECTS 80,184. 80,184. b CONTRACT LABOR 75,513. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the | 22 | Depreciation, depletion, and amortization | 43,261. | 40,438. | 2,823. | |
| covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 80,184. 80,184. a RESEARCH PROJECTS 80,184. 80,184. b CONTRACT LABOR 75,513. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the | 23 | Insurance | 6,170. | | 6,170. | |
| b CONTRACT LABOR 75,513. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the 1 following soppose the control of the control o | 24 | covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 | | | | |
| b CONTRACT LABOR 75,513. 53,348. 22,165. c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the 947,955. 569,169. 378,786. | | RESEARCH PROJECTS | 80,184. | 80,184. | | |
| c LABORATORY SUPPLIES 39,941. 27,958. 11,983. d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the SOP 98-2. Complete this line only if the | | | | | 22,165. | |
| d CONSULTANTS 27,881. 2,800. 25,081. e UTILITIES 20,371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the if following the | | | | | | |
| e UTILITIES 20, 371. 14,736. 5,635. f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ☐ if following SOP 98-2. Complete this line only if the | | | | | | |
| f All other expenses 64,203. 5,133. 59,070. 25 Total functional expenses. Add lines 1 through 24f 947,955. 569,169. 378,786. 26 Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the | | | | | | |
| 25 Total functional expenses. Add lines 1 through 24f 947, 955. 569, 169. 378, 786. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the | | | | | | |
| 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the | |) | | | | 0. |
| organization reported in column (E) joint costs from a combined educational campaign and fundraising solicitation | - | Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational | 22.,,000 | | | |

BAA

Form 990 (2009)

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Federal Worksheets

Page 1

OAK CREST INSTITUTE OF SCIENCE

95-4680961

Form 990, Part IX, Line 24 Other Expenses

| | (A)Total | (B) Program Services | (C) Management & General | (D) Fundraising |
|---|---|----------------------------|---|--------------------|
| 401K PROCESSING AUTOMOTIVE EXPENSES BANK CHARGES BID AND PROPOSAL SUPPLIES | | 44. | 2,553. 4,118. 39. 5,034. | |
| CERTIFICATIONS COMPUTER EXPENSES DONATION | 410. 4,418. | 300. | 110. 4,418. | |
| DUES AND SUBSCRIPTIONS EQUIPMENT RENTAL EQUIPMENT REPAIR FRANCHISE TAX INTERNET COSTS JANITORIAL | 1,679. 7,367. 7,428. 20. 1,658. 2,093. | 4,789. | 1,679. 2,578. 7,428. 20. 1,658. 2,093. | |
| LA CO PERS PROPERTY TAXES MATERIAL FOR PROJECTS PAYROLL PROCESSING Postage and Shipping Printing and Publications | 347. 2,943. 2,423. 3,624. | | 347. 2,943. 2,423. 3,624. | |
| PROFESSIOANL DEVELOPEMENT PROJECT SUPPLIES RECRUITMENT REPAIRS RESEARCH MATERIALS | 25. 25. 2,350. 835. | | 25. 25. 2,350. 835. | |
| TELEPHONE USE TAX WORKERS COMPENSATION INS | 2,982. 3,780. 8,008. Total \$ 64,203. | \$ 5,133. | 2,982. 3,780. 8,008. \$ 59,070. | \$ 0. |

Part X Balance Sheet

| | | | | | (A) Beginning of year | | (B) End of year | |
|------------------|------|---|--|---------------------|--------------------------|---------|--------------------|--|
| П | 1 | Cash - non-interest-bearing | TENCHERA | | -94. | 1 | | |
| | 2 | Savings and temporary cash investments | | 73,375. | 2 | 115,924 | | |
| | 3 | Pledges and grants receivable, net | | | 3 | | | |
| | 4 | Accounts receivable, net | | 51,026. | 4 | 74,287 | | |
| | 5 | Receivables from current and former officers, directo and highest compensated employees. Complete Part | s, key employees, dule L | | 5 | | | |
| | 6 | Receivables from other disqualified persons (as defin | section 4958(f)(1)) | | HAN E | | | |
| | | and persons described in section 4958(c)(3)(B). Com | plete Part | II of Schedule L | | 6 | | |
| A SOCIAL SECTION | 7 | Notes and loans receivable, net | | | 7 | | | |
| | 8 | Inventories for sale or use | | | | 8 | | |
| 5 | 9 | Prepaid expenses and deferred charges. | 2001101050000 | | | 9 | | |
| | 10 a | Land, buildings, and equipment: cost or other basis. | 10a | 276,958. | | | | |
| | | Complete Part VI of Schedule D | | | | | | |
| | b | Less: accumulated depreciation | 10 b | 155,316. | 152,043. | 10 c | 121,642 | |
| - | 11 | Investments - publicly-traded securities | | 2222355345642535664 | | 11 | | |
| | 12 | Investments - other securities. See Part IV, line 11. | | | | 12 | | |
| | 13 | Investments - program-related. See Part IV, line 11. | masystem | nesser se manevaren | | 13 | | |
| - | 14 | Intangible assets | | MITTHET WATER | | 14 | | |
| - | 15 | Other assets. See Part IV, line 11. | | 5,700. | 15 | 15,543 | | |
| - | 16 | Total assets. Add lines 1 through 15 (must equal line | VIA,TA, 0.004-AAAA 20.005-AAAAA | 282,050. | 16 | 327,396 | | |
| 7 | 17 | Accounts payable and accrued expenses | | | 5,376. | 17 | 16,571 | |
| - | 18 | Grants payable | | 18 | | | | |
| | 19 | Deferred revenue | | | 19 | | | |
| | 20 | Tax-exempt bond liabilities | | | 20 | | | |
| 3 | 21 | Escrow or custodial account liability. Complete Part | | 21 | | | | |
| | 22 | Payables to current and former officers, directors, tru highest compensated employees, and disqualified pe | rsons. Cor | nplete Part II | | | | |
| | | of Schedule L | | | | 22 | | |
| | 23 | Secured mortgages and notes payable to unrelated the | | | | 23 | | |
| | 24 | Unsecured notes and loans payable to unrelated third | | | | 24 | | |
| | 25 | Other liabilities. Complete Part X of Schedule D | | | | 25 | 2,561 | |
| 4 | 26 | Total liabilities, Add lines 17 through 25 | | | 5,376. | 26 | 19,132 | |
| 1 | | Organizations that follow SFAS 117, check here > | X and c | omplete lines | | | | |
| - 1 | | 27 through 29 and lines 33 and 34. | | | | | | |
| | 27 | Unrestricted net assets | | | 276,674. | 27 | 308,264 | |
| | | Temporarily restricted net assets | | | | 28 | | |
| | 29 | Permanently restricted net assets. | pro- | | | 29 | | |
| | | Organizations that do not follow SFAS 117, check he lines 30 through 34. | ere ► | and complete | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | 30 | | | |
| - 1 | 31 | Paid-in or capital surplus, or land, building, and equip | ment fund | 1 | | 31 | | |
| | 32 | Retained earnings, endowment, accumulated income | ed earnings, endowment, accumulated income, or other funds | | | | | |
| | 33 | Total net assets or fund balances | | | 276,674. | 33 | 308,264 | |
| BALANCES | 34 | Total liabilities and net assets/fund balances | ********** | | 282,050. | 34 | 327,396. | |

BAA Form 990 (2009)

Financial Statements and Reporting Part XI Yes No X Accrual 1 Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 2b X c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Both consolidated and separate basis Separate basis Consolidated basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X 3a b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b

BAA Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047 2009

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

| OAK | | | TE OF SCIENCE | | | | | | | 680961 | | |
|-------|---|--|--|--|-----------------------|---|---------------------|---|-------------------------|---|----------------------------|----------------------------|
| Part | I Re | ason for Pu | iblic Charity State | us (All organization: | s must | comple | ete this | s part. |) See i | instruct | ions | |
| The o | rganizat | tion is not a pr | ivate foundation beca | use it is: (For lines 1 thr | ough 11, | check of | only one | box.) | | | | |
| 1 | A ct | nurch, convent | ion of churches or as | sociation of churches de | scribed in | n sectio | n 170(b) | (1)(A)(i |). | | | |
| 2 | A so | chool described | d in section 170(b)(1) | (A)(ii). (Attach Schedule | E.) | | | | | | | |
| 3 | A h | ospital or coop | erative hospital servi | ce organization describe | d in sect | ion 170(| b)(1)(A) | (iii). | | | | |
| 4 | A m | edical researc | h organization operat | ed in conjunction with a | hospital | describe | ed in se | ction 17 | 70(b)(1)(| A)(iii). Er | nter the hos | spital's |
| | nam | ne, city, and st | ate: | | | | | | | | | |
| 5 | 170 | (b)(1)(A)(iv). (| Complete Part II.) | t of a college or universi | | | | | rnmenta | ıl unit de: | scribed in s | ection |
| 6 | | | | governmental unit desc | | | | | a a | 150 | V 5 E | 5 2 5 |
| 7 | in s | ection 170(b)(1 | I)(A)(vi). (Complete F | CORP. COLOR | | | overnme | ntal un | it or fror | n the ger | neral public | described |
| 8 | | A PROPERTY OF THE PARTY OF THE PARTY OF THE PARTY. | | 170(b)(1)(A)(vi). (Compl | | | | | | | | |
| 9 | 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 exempt 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). (Complete Part III.) | | | | | | | | | | | |
| 10 | _ An o | organization or | ganized and operated | f exclusively to test for p | oublic saf | ety. See | section | n 509(a) | (4). | | | |
| 11 | mor | e publicly supr | ported organizations | exclusively for the beni described in section 509 zation and complete line | (a)(1) or | section | 509(a)(| nctions (2). See | of, or ca section | rry out th 509(a)(3 | e purpose:). Check th | s of one or ne box that |
| | a | Type I | b Type II | c Type | III — Fun | ctionally | integra | ted | | d | Type III- | Other |
| е | than | checking this b foundation m (a)(2). | ox, I certify that the or anagers and other that | rganization is not contro an one or more publicly | lled dire | ctly or in d organi | directly zations | by one describ | or more ed in se | disquali ction 509 | fied perso (a)(1) or se | ns other ection |
| f | If th | e organization | | termination from the IRS | | | | l or Typ | e III sup | porting o | organization | ١, [|
| q | Sinc | e August 17, 2 | 2006, has the organiza | ation accepted any gift | or contrib | oution fr | om any | of the f | ollowing | persons | ? | |
| | | | š | | | | 5 | | | | Ī | Yes No |
| | (i) | a person who | o directly or indirectly | controls, either alone or supported organization?. | together | r with pe | ersons d | escribe | d in (ii) | and (iii) | 1000 000 | |
| | | | | | | | | | | | | |
| | (ii) | | The second secon | cribed in (i) above? | | | | | | | 11 g (ii) | |
| | | | | n described in (i) or (ii) | | | | | | | 11 g (iii) | |
| h | Prov | vide the followi | ng information about | the supported organizat | ions. | | Processing of | ~ | T | 1 | 50 de 50 centro de 100 | |
| | (i) Nami Ori | e of Supported ganization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | organiza (i) liste | is the tion in col, d in your eming ment? | the organ | ou notify lization in (i) of apport? | organizat (i) organi | s the ion in col. zed in the S.? | (vii) Amount | of Support |
| | | | | | Yes | No | Yes | No | Yes | No | | |
| | | | | | | | | | | | | |
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| | | | | | | 1 - 1 | | | 127 | | | |
| Total | | | | | | | | | | | | |
| - | For Privac | y Act and Paperv | work Reduction Act Notice | , see the Instructions for For | m 990 or 99 | 90-EZ. | | 5 | Schedule | A (Forn | n 990 or 99 | 0-EZ) 2009 |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) alu if you checked the box on line 5.7 or 8 of Part L)

| | (Complete only if you checke | d the box on mie | J. 7. 01 0 01 1 ait | 1-7 | | | |
|--------------|---|--|--|--|---|---|---|
| Sec | tion A. Public Support | | | | | | |
| Cale | ndar year (or fiscal year nning in) * | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') | | | | | | 0. |
| 2 | Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf. | | | | | | 0. |
| 3 | 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. |
| 4 | Total. Add lines 1-through 3 | 0. | 0. | 0. | 0. | 0. | 0. |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 0. |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 0. |
| Sec | tion B. Total Support | | | | | | |
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 7 | Amounts from line 4 | 0. | 0. | 0. | 0. | 0. | 0. |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | | | | | | 0. |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on. | | | | | | 0. |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | * | | | | 0. |
| 11 | Total support. Add lines 7 through 10 | | | | | | 0. |
| 12 | Gross receipts from related activ | vities, etc. (see ins | structions) | | 4 | 12 | 0. |
| 13 | First five years. If the Form 990 organization, check this box and | is for the organization | ation's first, secor | nd, third, fourth, | or fifth tax year a | s a section 501(c | (3) ► X |
| Sec | tion C. Computation of Pu | blic Support P | ercentage | | | | |
| 14 | Public support percentage for 20 | 009 (line 6, column | n (f) divided by lin | ne 11, column (f) | | 14 | % |
| 15 | Public support percentage from | 2008 Schedule A, | Part II, line 14 | | | 15 | % |
| | a 33-1/3 support test — 2009. If the and stop here. The organization | quantes as a par | silely supported o | Gardine and the control of the contr | | | 555005000000000000000000000000000000000 |
| 1 | b 33-1/3 support test — 2008. If the and stop here. The organization | e organization did qualifies as a put | not check a box olicly supported or | on line 13, or 16a rganization | a, and line 15 is 3 | 33-1/3% or more, | check this box |
| | a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts | meets the 'facts-a s-and-circumstand | end-circumstance es' test. The org | s' test, check this anization qualifie | s as a publicly su | re. Explain in Par pported organizat | ion ▶ |
| | b 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an | meets the 'facts-a d-circumstances' | test. The organi | s test, check this zation qualifies a | s a publicly suppo | orted organization | Try now the |
| 18 | Private foundation. If the organi | ization did not che | eck a box on line, | 13, 16a, 16b, 17a | a, or 17b, check t | his box and see i | nstructions |

Part III Support Schedule for Organizations Described in Section 509(a)(2)

| (Complete o | only if you | checked | the box | on lin | ne 9 c | of Part | 1.) |
|-------------|-------------|---------|---------|--------|--------|---------|-----|
|-------------|-------------|---------|---------|--------|--------|---------|-----|

| Sec | tion A. Public Support | | | | | | |
|-------|---|-------------------------|---------------------|--|---|-----------------------|-------------|
| Calen | ndar year (or fiscal yr beginning in) > | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.'). | | | | | | |
| | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose. | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7 a | Amounts included on lines 1, 2, 3 received from disqualified persons. | | | | | | |
| | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year. | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line | I SUNTER | | | and the later and | | |
| | 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | T 2000000000000000000000000000000000000 | 0.0020000 | 2000 E 0 W |
| Cale | ndar year (or fiscal yr beginning in) 🟲 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| | Amounts from line 6 | | | | | | |
| 10 a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | | 2 | | | | |
| ь | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 | Total support. (add Ins 9, 10c, 11, and 12.) | | | | | | |
| 14 | First five years. If the Form 990 organization, check this box and | is for the organiz | ation's first, seco | nd, third, fourth, | or fifth tax year a | s a section 501(c)(| 3) |
| | | | | Carried States Control | | *************** | |
| | tion C. Computation of Pul Public support percentage for 20 | | | 20. 12. column (f) | | 15 | % |
| | | | | | | | % |
| | Public support percentage from : tion D. Computation of Inv | | | | ************ | 10 | |
| | Investment income percentage for | | | | umn (fl) | 17 | % |
| 02020 | Investment income percentage for | | | | | | % |
| 18 | 33-1/3 support tests – 2009. If the | rom 2006 Scriedo | t check the hove on | line 14 and line 15 | s is more than 33-1/3 | 3% and line 17 is not | |
| | more than 33-1/3%, check this b | ox and stop here | e. The organization | n qualifies as a p x on line 14 or 19 | Pa and line 16 is i | more than 33-1/3% | and line 18 |
| | is not more than 33-1/3%, check | this box and sto | p here. The organ | nization qualifies | as a publicly supp | orted organization | |
| 20 | Private foundation. If the organi | zation did not che | eck a box on line | 14, 19a, or 19b, | check this box and | see instructions | |

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

OAK CREST INSTITUTE OF SCIENCE

Employer Identification number

| | | | | 95-4680961 |
|-----|--|--|---|---|
| Pa | rt I Organizations Maintaining Donor A | Advised Funds or Other Simil | ar Funds or Acco | unts Complete if |
| | the organization answered 'Yes' to I | Form 990, Part IV, line 6. | | ante complete n |
| | 50775 1 MILES HIS HIS HOUSE SETTINGS OF COLUMN 1 100000 NO. | (a) Donor advised funds | (b) Fu | nds and other accounts |
| 1 | Total number at end of year | | (0) | The diffe of the decounts |
| 2 | Aggregate contributions to (during year) | | | |
| 3 | Assessments assessed for a VIII and a VIII a | | | |
| 4 | Aggregate value at end of year. | | | |
| 5 | Did the organization inform all donors and donor funds are the organization's property, subject to | advisors in writing that the assets h | eld in donor advised | |
| | | | | Yes No |
| | Did the organization inform all grantees, donors, used only for charitable purposes and not for the purpose conferring impermissible private benefit | benefit of the donor or donor advisor?? | or or for any other | |
| | t II Conservation Easements Complete | | |), Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the | |). | |
| | Preservation of land for public use (e.g., recr | reation or pleasure) Preser | rvation of an historical | ly important land area |
| | Protection of natural habitat | Preser | rvation of certified hist | oric structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization last day of the tax year. | held a qualified conservation contrib | oution in the form of a | conservation easement on the |
| | | | | Held at the End of the Year |
| ě | Total number of conservation easements | | 2a | |
| | Total acreage restricted by conservation easemen | | | |
| (| : Number of conservation easements on a certified | I historic structure included in (a) | 2c | |
| 0 | Number of conservation easements included in (| c) acquired after 8/17/06 | 2d | |
| 3 | Number of conservation easements modified, train | nsferred, released, extinguished, or | terminated by the orga | anization during the tax |
| | year > | | | |
| 4 | Number of states where property subject to conse | ervation easement is located > | | |
| 5 | Does the organization have a written policy regar | ding the periodic monitoring, inspec | tion, handling of violat | ions, |
| 6 | and enforcement of the conservation easement it Staff and volunteer hours devoted to monitoring, during the year | | | Yes No |
| 7 | Amount of expenses incurred in monitoring, inspeduring the year | ecting, and enforcing conservation e | asements \$ | |
| | Salkman Communication Communic | | | |
| | Does each conservation easement reported on lir 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | | | Yes No |
| | In Part XIV, describe how the organization reports co include, if applicable, the text of the footnote to the conservation easements. | he organization's financial statement | ts that describes the o | rganization's accounting for |
| Par | Organizations Maintaining Collectic Complete if the organization answer | ons of Art, Historical Treasur red 'Yes' to Form 990, Part IV | res, or Other Simi /, line 8. | lar Assets |
| 1 a | If the organization elected, as permitted under SP treasures, or other similar assets held for public ethe text of the footnote to its financial statements | exhibition, education, or research in | statement and balance furtherance of public s | e sheet works of art, historical service, provide, in Part XIV. |
| b | If the organization elected, as permitted under SF treasures, or other similar assets held for public eamounts relating to these items: | exhibition, education, or research in | furtherance of public s | service, provide the following |
| | (i) Revenues included in Form 990, Part VIII, line | e 1 | | \$ |
| | (ii) Assets included in Form 990, Part X | | | |
| 2 | If the organization received or held works of art, I amounts required to be reported under SFAS 116 | historical treasures, or other similar a | | |
| а | Revenues included in Form 990, Part VIII, line 1. | | | - \$ |
| | Assets included in Form 990, Part X. | | | ▶\$ |

| Part IV Escrow and Custodial Arrangements Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. I is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? I is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table: Amount | raitin Organizations mainta | ining conecti | ons of Art, mist | offical freasures, or | Other Similar Ass | sets (c | ,OHUH | uea) |
|---|--|--|---|---|---|-----------|------------|---------|
| b Scholarly research e Other Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar sases to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Niv. Part IV Excrow and Custodial Arrangements Complete if organization answered Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? b if Yes' explain the arrangement in Part XIV and complete the following table: | 3 Using the organization's acquisiti items (check all that apply): | on accession and | d other records, che | ck any of the following t | hat are a significant us | se of its | collect | tion |
| c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Pert XV. 5 During the year, did the organization solicit or receive denations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 2, or reported an amount on Form 990, Part X, line 2). 1a Is the organization an agent, furstee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance. d Additions during the year. e Distributions during the year. f Ending balance. 1 | a Public exhibition | | d Loan | or exchange programs | | | | |
| c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Niv | b Scholarly research | | e Other | | | | | |
| Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes N. Part VI Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990. Part XIV and complete the following table: c Beginning balance. d Additions during the year. e Distributions during the year. 1 | c Preservation for future gener | ations | | | | | | |
| assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes New Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990. Part X? b if "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance. d Additions during the year. e Distributions during the year. 1e 1d | 4 Provide a description of the orga Part XIV. | nization's collecti | ons and explain ho | w they further the organi | zation's exempt purpo | se in | | |
| 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance. d Additions during the year. 1e 1 | 5 During the year, did the organiza assets to be sold to raise funds r | tion solicit or rece ather than to be | eive donations of ar maintained as part | t, historical treasures, or of the organization's coll | other similar ection? | Yes | ; | No |
| included on Form 990, Part X? b If 'Yes,' explain the arrangement in Part XIV and complete the following table: c Beginning balance. d Additions during the year. e Distributions during the year. 1 | Part IV Escrow and Custodia 9, or reported an amo | I Arrangemen unt on Form 9 | ts Complete if o 90, Part X, line | organization answere 21. | ed 'Yes' to Form 9 | 90, Pa | art IV, | line |
| c Beginning balance d Additions during the year e Distributions during the year f Ending balance. 2 a Did the organization include an amount on Form 990, Part X, line 212. 3 a Did the organization include an amount on Form 990, Part X, line 212. 3 b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1 a Beginning of year balance. 1 a Beginning of year balance. 2 b Contributions | 1 a Is the organization an agent, trus included on Form 990, Part X? | tee, custodian, o | r other intermediary | for contributions or other | er assets not | Yes | s 1 | No |
| c Beginning balance. d Additions during the year. e Distributions during the year. f Ending balance. 2a Did the organization include an amount on Form 990, Part X, line 21? bif Yes, explain the arrangement in Part XIV. Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance. b Contributions c Net Investment earnings, gains, and losses. d Grants or scholarships e Other expenditures for facilities and programs. 1 Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment \(\bigcite{\textit{BOMMENTAILY}} \) c Term endowment \(\bigcite{\textit{LOSS}} \) c Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: 1 Describe in Part XIV the intended uses of the organization's endowment tunds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (c) Accumulated Depreciation basis (other) Description of investment 2 | b If 'Yes,' explain the arrangement | in Part XIV and | complete the follow | ing table: | | Amour | ıt. | |
| d Additions during the year. e Distributions during the year. f Ending balance. 2a Did the organization include an amount on Form 990, Part X, line 21? bit "Yes," explain the arrangement in Part XIV. Part V Endowment Funds Complete if organization answered "Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance. b Contributions c Net Investment earnings, gains, and losses. d Grants or scholarships e Other expenditures for facilities and programs. g End of year balance. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment \$\frac{1}{2}\$\$ to Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Description of investment (a) Cost or other basis (investment) Description of investment (a) Cost or other basis (investment) Description of investment (b) Pour year to Form 990, Part X, line 10. Description of investment (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (e) Four years (d) Three years back (e) Fo | c Beginning balance | | | | 1c | 7.1110011 | | |
| e Distributions during the year. f Ending balance. 2 a Did the organization include an amount on Form 990, Part X, line 21? b If 'Yes,' explain the arrangement in Part XIV. Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10. 1 a Beginning of year balance. b Contributions. c Net Investment earnings, gains, and losses. d Grants or scholarships. e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. b Permanent endowment 3 a Are there endowment produce the estimated percentage of the year end balance held as: a Board designated or quasi-endowment 5 Permanent endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?. 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis ((b) Cost or other basis (other) Describion of investment (a) Cost or other basis ((b) Cost or other basis (other) Describion of investment (a) Cost or other basis (other) 1 a Land b Buildings. c Leasehold improvements 2 28,610. 1 3,162. 15,446 d Equipment. 6 Other 1,706. 1,589. 117 | | | | | | | | |
| f Ending balance. 2a Did the organization include an amount on Form 990, Part X, line 212. b If Yes, explain the arrangement in Part XIV. Part V Endowment Funds Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance. b Contributions. c Net Investment earnings, gains, and losses. d Grants or scholarships. e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. b Permanent endowment \(^*\)_\(\begin{arrange}{c}\) & \(^*\) & \(^*\) earned balance held as: a Board designated or quasi-endowment \(^*\)_\(\begin{arrange}c}\) & \(^*\) earned the estimated percentage of the year end balance held as: a Board designated or quasi-endowment \(^*\)_\(\begin{arrange}c}\) & \(^*\) at the related organization by: (i) unrelated organizations. b If Yes to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment a) Cost or other basis ((b) Cost or other basis ((the Cost or other) basis (other) Description of investment a) Cost or other basis ((b) Cost or other) basis (other) 1a Land. b Buildings. c Leasehold improvements. d Equipment. 246,642. 140,565. 117,66. 1,789. 117 | | | | | | | | |
| 2a Did the organization include an amount on Form 990, Part X, line 21? | | | | | | | | |
| b If 'Yes,' explain the arrangement in Part XIV. Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10. 1 a Beginning of year balance. (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back | | | | | | Vac | Ī | No |
| Part V Endowment Funds Complete if organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (e) Four years (e) Four year | | | 20, 1:01: 7, 1110 21. | 8. F F Str. 8. Str. 10 - 10 - 11 - 12 - 12 - 12 - 12 - 12 - | | 165 | | NO |
| 1 a Beginning of year balance. b Contributions. c Net Investment earnings, gains, and losses. d Grants or scholarships. e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. (ii) related organizations. (iii) related organizations. (iii) related organizations. 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) b Buildings. c Leasehold improvements. 28,610. 13,162. 15,448 d Equipment. 246,642. 140,565. 106,077 e Other. 21,706. 1,589. 117 | | | nization answer | ed 'Yes' to Form 990 |) Part IV line 10 | | | |
| 1a Beginning of year balance b Contributions. c Net Investment earnings, gains, and losses. d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance | Endowner and So | M 522 - 23 | 1 0000 La | | 1 1000000000000000000000000000000000000 | 1 000 | Enur year | re back |
| b Contributions. c Net Investment earnings, gains, and losses. d Grants or scholarships. e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment \(\begin{array}{c} | 1a Reginning of year halance | | | (c) Two years back | (u) Three years back | (6) | i Qui yeai | is Daun |
| c Net Investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment it is is in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (other) b Buildings. c Leasehold improvements c Leaseh | | | | | | | | |
| and losses. d Grants or scholarships e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment di) i) i) i) urelated organizations (ii) related organizations (iii) related organizations (iii) related organizations. b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (c) Accumulated Depreciation 1 a Land. b Buildings. c Leasehold improvements (28,610. 13,162. 15,446) d Equipment (246,642. 140,565. 106,077) e Other. (20,612. 140,565. 106,077) e | the state of the s | | | | | | | |
| e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment c) (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Description of investment (a) Cost or other basis (investment) b Buildings c Leasehold improvements | and losses | | | | | | | |
| and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations | | | | | | | - 1 | |
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| 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment | | | | | | | 30.30 | |
| a Board designated or quasi-endowment be Permanent endowment be Permanent endowment be Remainded to the corporation by: 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) unrelated organizations (iv | g End of year balance | | | | | | | LICY. |
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| Description of investment | | | | | line 10. | | | |
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| c Leasehold improvements 28,610. 13,162. 15,448 d Equipment 246,642. 140,565. 106,077 e Other 1,706. 1,589. 117 | 1a Land | U_U_UVUL_U | | A | | | | |
| c Leasehold improvements 28,610. 13,162. 15,448 d Equipment 246,642. 140,565. 106,077 e Other 1,706. 1,589. 117 | b Buildings. | | | | | | | |
| d Equipment 246,642. 140,565. 106,077 e Other 1,706. 1,589. 117 | [| | | 28,610. | 13,162. | | 15 | ,448. |
| e Other 1,706. 1,589. 117 | | | | | | | | |
| | | | | | | | | 117. |
| 121.647 | | | orm 990, Part X. c | olumn (B), line 10(c).1 | | | 121 | ,642. |

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
|--|---|---|
| nancial derivatives | | and or one or your morney variety |
| osely-held equity interests | | |
| ner | | |
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| | | |
| 1. (Column (b) must equal Form 990 Part X, col. (B) line 12.) | | |
| rt VIII Investments-Program Related (See | | |
| (a) Description of investment type | (b) Book value | (c) Method of valuation |
| | | Cost or end-of-year market value |
| | | |
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| al. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) | | |
| | | |
| ort IX Other Assets (See Form 990, Part X | . line 15) N/A | |
| art IX Other Assets (See Form 990, Part X | | (b) Book value |
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| art IX Other Assets (See Form 990, Part X (a) (| | |
| art IX Other Assets (See Form 990, Part X (a) (| | |
| (a) I al. (Column (b) must equal Form 990, Part X, col.(B). | Description line 15). | |
| art IX Other Assets (See Form 990, Part X (a) I | Description line 15). | |
| (a) I al. (Column (b) must equal Form 990, Part X, col.(B). | Description line 15). | |
| art IX Other Assets (See Form 990, Part X (a) (a) (a) (a) (a) (b) must equal Form 990, Part X, col.(B) (b) art X Other Liabilities (See Form 990, Part X) | Description line 15). t X, line 25) | |
| al. (Column (b) must equal Form 990, Part X, col.(B) rt X Other Liabilities (See Form 990, Part X) (a) Description of Liability eral Income Taxes | Description line 15). t X, line 25) | |
| al. (Column (b) must equal Form 990, Part X, col.(B) rt X Other Liabilities (See Form 990, Part X, col.(B) real Income Taxes 1K CONTRIBUTIONS PAYABLE | line 15). t X, line 25) (b) Amount | |
| al. (Column (b) must equal Form 990, Part X, col.(B) at X Other Liabilities (See Form 990, Part X) (a) Description of Liability leral Income Taxes 1K CONTRIBUTIONS PAYABLE | line 15). t X, line 25) (b) Amount 2,511. | |
| al. (Column (b) must equal Form 990, Part X, col.(B) art X Other Liabilities (See Form 990, Part X) (a) Description of Liability leral Income Taxes 1K CONTRIBUTIONS PAYABLE | line 15). t X, line 25) (b) Amount 2,511. | |
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| al. (Column (b) must equal Form 990, Part X, col.(B) art X Other Liabilities (See Form 990, Part X) (a) Description of Liability leral Income Taxes 1K CONTRIBUTIONS PAYABLE | line 15). t X, line 25) (b) Amount 2,511. | |
| al. (Column (b) must equal Form 990, Part X, col.(B) art X Other Liabilities (See Form 990, Part X) (a) Description of Liability leral Income Taxes 1K CONTRIBUTIONS PAYABLE | line 15). t X, line 25) (b) Amount 2,511. | |

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

BAA TEEA3304L 02/02/10 Schedule **D** (Form 990) 2009

| 12/31/09 | | 20 | 09 Fe | dera | Boo | k Dep | 2009 Federal Book Depreciation Schedule | on Sc | hedu | <u>a</u> | | | | | Page 1 |
|------------------------------|----------|--------------|----------------|--------------|---------------------|----------------------------|---|-----------------------------|------------------------------|----------------|----------------|--------|------|------|------------------|
| | | | | OAK (| CREST | INSTITU | OAK CREST INSTITUTE OF SCIENCE | CIENCE | | | | | | 9. | 95-4680961 |
| .No Description | Date | Date Sold | Cost/ Basis | Bus. Pet. | Cur 179 Bonus | Special Depr. Allow. | Pritor 179/ Bonus/ Sp. Depr. | Prior Dec. Bal. Depr. | Salvage /Basis Reductn | Depr. Basis | Prior Depr. | Method | al I | Rate | Current Denr. |
| Form 990/990-PF | | | | | | | | | | | | | | | |
| Furniture and Fixtures | | | | | | | | | | | | | | | |
| 1 010104010104 | 10/01/00 | | 640 | | | | | | | 640 | 640 | 1/S | 7 | | 0 |
| 7 OFFICE EQUIP-FILE CABINET | 9/09/00 | | 222 | | | | | | | 222 | 222 | S/L | 7 | | 0 |
| 9 OFFICE EQUIP-METER | 1/30/01 | | 148 | | | | | | | 148 | 148 | \$/1 | 7 | | 0 |
| 17 OFFICE EQ- | 2/06/04 | | 303 | | | | | | | 309 | 305 | S/L | 50 | | 4 |
| 26 OFFICE FURN EQ-COMPUTER | 6/29/06 | ,, | 387 | | | | | | | 387 | 193 | S/L | 10 | | 77 |
| Total Furniture and Fixtures | | | 1,706 | | 0 | 0 | 0 | 0 | 0 | 1,706 | 1,508 | | | 5 | 100 |
| Improvements | | | | | | | | | | | | | | | |
| 8 LEASE IMPROVEMENTS | 7/01/00 | | 550 | | | | | | | 550 | 550 | S/L | HD | | 0 |
| 12 LEASE IMPROVEMENTS | 6/30/01 | | 172 | | | | | | | 172 | 172 | S/L | 163 | | 0 |
| 15 LEASE IMPROVEMENTS | 6/30/02 | | 337 | | | | | | | 337 | 323 | 1/8 | ю | | 0 |
| 21 LEASE IMPRVE-ELECTRICAL | 3/04/04 | | 4,050 | | | | | | | 4,050 | 3,915 | S/L | 190 | | 135 |
| 22 LEASE IMPROVE-INFRUCTURE | 4/25/04 | | 2,410 | | | | | | | 2,410 | 2,249 | S/L | 10 | | 191 |
| | 6/07/04 | | 880 | | | | | | | 880 | 807 | S/L | 10 | | 73 |
| | 7/02/04 | | 1,696 | | | | | | | 1,696 | 1,526 | 1/8 | sex. | | 170 |
| | 6/30/07 | | 2,381 | | | | | | | 2,381 | 714 | T/S | um) | | 476 |
| | 10/13/08 | | 3,275 | | | | | | | 3,275 | 164 | S/L | 40 | | 655 |
| 33 LEASE IMPORVE = ROOF AIR | 7/30/09 | J. | 12,860 | 1) | Ì | | | | İ | 12,860 | | 1/8 | 160 | ij | 1,072 |
| Total Improvements | | | 28,611 | | 0 | 0 | 0 | 0 | 0 | 28,611 | 10,420 | | | | 2,742 |
| Machinery and Equipment | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | æ | | | | | | | | | | | |
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| 12/3 | 12/31/09 | | 20 | 2009 Federal Book Depreciation Schedule | eral | Boo | k Dep | reciat | ion Sc | hedu | <u>e</u> | | | | | Page 2 |
|------|-------------------------------|----------|------|---|-------|---------------------|----------------------------|---------------------------------------|-----------------------------|------------------------------|----------------|---------------|--------|-----|---|------------|
| | | | | | JAK C | REST | INSTITU | OAK CREST INSTITUTE OF SCIENCE | CIENCE | | | | | | 6 | 95-4680961 |
| No | a Description | Date | Date | Cost/ Basis | Bus. | Cur 179 Bonus | Special Depr. Allow. | Prior 1797 Borius/ Sp. Depr. | Prior Dec. Bal. Depr. | Salvage /Basis Reductn | Depr. Basis | Prior Denr | Method | ā | 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0 | Current |
| - 24 | 2 COMPUTERS | 10/01/00 | | 700 | | | | | | | 700 | 700 | S/L | | | C |
| | 3 RESEARCH EQUIPMENT | 10/01/00 | | 14,514 | | | | | | | 14,514 | 14,514 | SVL | | | 0 |
| 7 | 4 RESEARCH EQUIP GAS CHROMA | 2/17/00 | | 1,074 | | | | | | | 1,074 | 1,074 | S/L | 7 | | 0 |
| 14.2 | 5 RESEARCH EQUIP-LAB TABLE | 11/01/00 | | 16 | | | | | | | 6 | -6 | S/L | 1 | | 0 |
| 9 | 6 COMPUTER EQUIP | 3/02/00 | | 486 | | | | | | | 486 | 486 | S/L | S | | 0 |
| 10 | | 2/15/01 | | 200 | | | | | | | 900 | 200 | S/L | 5 | | 0 |
| | | 6/30/01 | | 17,016 | | | | | | | 17,016 | 17,016 | S/L | 7 | | 0 |
| 2 | | 6/30/02 | | 4,354 | | | | | | | 4,354 | 4,354 | S/L | un. | | 0 |
| 14 | | 8/30/02 | | 3,908 | | | | | | | 3,908 | 3,627 | S/L | 7 | | 500 |
| 15 | | 1/30/03 | | 802 | | | | | | | 802 | 802 | S/L | 90 | | 0 |
| | | 3/16/04 | | 1,946 | | | | | | | 1,946 | 1,848 | S/L | 10 | | 86 |
| 18 | | 4/13/04 | | 989 | | | | | | | 586 | 999 | S/L | un, | | 30 |
| 20 | | 6/21/04 | | 1,034 | | | | | | | 1,034 | 931 | S/L | S | | 103 |
| 25 | | 4/22/05 | | 3,366 | 7 | | | | | | 3,366 | 2,468 | S/L | S | | 673 |
| 27 | | 10/25/06 | | 3,270 | | | | | | | 3,270 | 1,417 | S/L | in | | 654 |
| 28 | | 2/28/06 | | 1,055 | | | | | | | 1,055 | 268 | S/L | ín | | 211 |
| 30 | | 3/09/07 | | 32,691 | | | | | | | 32,691 | 11,987 | S/L | 10 | | 6,538 |
| 50 | 1 RESEARCH EQ - GCMS | 10/24/07 | TE: | 159,249 | Į | ĺ | | | j | | 159,249 | 37,158 | S/L | 10 | | 31,850 |
| | Total Machinery and Equipment | | | 246,642 | | 0 | 0 | 0 | 0 | 0 | 246,642 | 100,127 | | | | 40,438 |
| | Total Depreciation | | . 11 | 276,959 | 1 1 | 0 | 0 | 0 | | 0 | 276,959 | 112,055 | | | 1 1 | 43,261 |
| | Grand Total Depreciation | | • | 276,959 | | 0 | | | 0 | 0 | 276,959 | 112,055 | | | | 43,281 |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |