NOTICE

GuideStar has been informed of an IRS processing error on electronically filed Forms 990 between January 1, 2009 and December 3, 2010 for filing year 2008. These processing errors have resulted in inaccurate data appearing on the scanned images of these tax returns and do not reflect the information filed with the IRS.

These errors include:

- Organization's mission description (Part III, line 1) and the description of program
 achievements (Part III, line 4a) may not reflect what was originally submitted by the
 nonprofit organization
- 2. Gross Income for Special Events value transposed
 - Part VIII The value in Line 8a may not be accurate
- 3. Other Salaries and Wages, Management and General Expenses is not reported
 - Part IX Line 7c might show a blank where a value was originally reported
- 4. Endowments Funds, Possession by Related Organizations checkbox transposed
 - Schedule D, Part V Line 3a (ii) checkbox values may be transposed

GuideStar is working with the IRS and reaching out directly to this organization to obtain a true and accurate copy of the 2008 Form 990. GuideStar will replace this Form 990 when the accurate return is made available.

Please direct any questions to nposervices@guidestar.org.

DLN: 93493119012520

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)

2008

OMB No 1545-0047

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 D Employer identification number Name of organization
ARRL FOUNDATION INC **B** Check if applicable Please use IRS label or Address change 3-7325472 Doing Business As E Telephone number Name change print or type. See Specific (860) 594-0200 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-G Gross receipts \$ 579,870 225 MAIN STREET Termination tions. City or town, state or country, and ZIP + 4 NEWINGTON, CT 06111 Amended return Application pending Name and address of Principal Officer **H(a)** Is this a group return for Mary M Hobart ┌ Yes ┌ No affiliates? 225 MAIN STREET NEWINGTON, CT 06111 ┌ Yes ┌ No H(b) Are all affiliates included? Tax-exempt status (If "No," attach a list See instructions) Group Exemption Number 🕨 J Web site: ► arrlf org K Type of organization ✓ Corporation ✓ trust ✓ association ✓ other ► L Year of Formation 1973 M State of legal domicile CT

Part	П	Summary		
	1	Briefly describe the organization's mission or most significant activities		
		TO OPERATE FOR CHARITABLE, EDUCATIONAL AND SCIENTIFIC PURPOSE	:s	
	2	Check this box 🖵 if the organization discontinued its operations or disposed of m	ore than 25% of its assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 _	9
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 _	9
	5	Total number of employees (Part V , line 2a)	5 _	0
	6	Total number of volunteers (estimate if necessary)	6 _	9
:	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	. 7a _	0
	ь	Net unrelated business taxable income from Form 990-T, line 34	7b	0
			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	158,868	78,797
≧	9	Program service revenue (Part VIII, line 2g)		(
1 Annel 1	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	116,740	120,980
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		(
1	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	275,608	199,777
1	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	80,661	112,354
1	14	Benefits paid to or for members (Part IX, column (A), line 4)		(
<u>g</u> 1	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,191	5,640
<u>~</u> 1	16a	Professional fundraising fees (Part IX, column (A), line 11e)		(
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ь	(Total fundraising expenses, Part IX, column (D), line 25 $\frac{0}{2}$		
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	20,316	21,575
1	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	107,168	139,569
1	19	Revenue less expenses Subtract line 18 from line 12	168,440	60,208
Ces			Beginning of Year	End of Year
9 2	20	Total assets (Part X, line 16)	2,494,047	2,355,326
Fund Balances	21	Total liabilities (Part X, line 26)		(
E	22	Net assets or fund balances Subtract line 21 from line 20	2,494,047	2,355,326
Part	Ш	Signature Block	<u> </u>	
		Under penalties of perjury, I declare that I have examined this return, including accompanying sch and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based or		

Please Sign

Here

2010-04-29 Signature of officer mary m hobart Secretary Type or print name and title

Preparer's **Use Only**

Date Check if Preparer's PTIN (See Gen Inst) Preparer's signature empolyed 🕨 🤽 Firm's name (or yours JH COHN LLP EIN ▶ if self-employed), address, and ZIP + 4 180 GLASTONBURY BOULEVARD Phone no 🕨 (860) 633-3000

May the IRS discuss this return with the preparer shown above? (See instructions)

GLASTONBURY, CT 06033

▼Yes 「No

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

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported iii (Code) (Expenses 112,354 including grants of \$) (Revenue \$) THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO STUDY AND CONTRIBUTE TO THE DEVELOPMENT OF AMATEUR SATELLITE PROGRAMS AND OTHER INNOVATIVE PROGRAMS RELATED TO THE PURPOSES OF THE AMERICAN RADIO RELAY LEAGUE, INC. III (Code) (Expenses \$ including grants of \$) (Revenue \$) III (Code) (Expenses \$ including grants of \$) (Revenue \$)	4e	Total program service expenses \$	112,35	A Must equal Part IY	, Line 25, column (B).	
Did the organization undertake any significant program services during the year which were not listed on the pnor Form 990 or 990-E2?	4d			f\$) (Revenue \$)
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?	4.1	0.11				
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27	4c	(Code) (Expenses	\$	including grants of \$) (Revenue \$)
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	4b	(Code) (Expenses	\$	including grants of \$) (Revenue \$)
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?						
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?						GRAMS AND OTHER
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	1a				• • • • • • • • • • • • • • • • • • • •) OGDAMS AND OTHER
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	4	Section 501(c)(3) and (4) organizat	ions and 4947(a)(1)	trusts are required to i	report the amount of grants and	
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?			Schedule O		,	res No
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	3	Did the organization cease conducti		t changes in how it coi	nducts any program	Vac IZ Na
2 Did the organization undertake any significant program services during the year which were not listed on						res / No
ee Additional Data Table	2			ervices during the year	r which were not listed on	Vac V Na
Briefly describe the organization's mission	L ee A					

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νo
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	_
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11		No
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
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, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
Ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part VI

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	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		Νο
37	Did the organization conduct more than 5 percent 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.	37		Νo

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	Yes	
2a	gaming (gambling) winnings to prize winners?	10	163	
	Statements filed for the calendar year ending with or within the year covered by this			
h	return			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	3a		Νο
h	return?	3b		NO
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νo
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		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		Νo
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νο
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		
f	benefit contract?	7e 7f		N o N o
ď	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	71 7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	, 9		110
	required?	7h		Νo
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the	8		
9	year?			
	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	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			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
_	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
4.5		.		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
D	year			

Section A. Governing Body and Management

9b

10

11

Yes

Νo

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

b If "Yes," does the organization have written policies and procedures governing the activities of such chapters,

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

			Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
3	Enter the number of voting members of the governing body 1a 9			
Ь	Enter the number of voting members that are independent 1b 9			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4				
	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
	Does the organization have members or stockholders?	6		No
3	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
3	Does the organization have local chapters, branches, or affiliates?	9a		Νo

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $$.	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		Νo
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed CT
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website.

 upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Barry Shelley 225 MAIN STREET Newington, CT 061110000 (860) 594-0200

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

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

Check this box if the organization did not compensate any officer, director, trustee or key employee										
		(C) Position (check all that apply)								(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Key employee Officei		Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
THOMAS FRENAYE , PRESIDENT and Director	50	Х		Х				0	0	0
George R Isely , VICE PRESIDENT	50	Х		Х				0	0	0
FRANK M BUTLER JR , DIRECTOR	50	Х						0	0	0
TOM COMSTOCK , DIRECTOR	50	Х						0	0	0
JIM FENSTERMAKER , DIRECTOR	50	Х						0	0	0
MARTIN GREEN , DIRECTOR	50	Х						0	0	0
FRANK FALLON , DIRECTOR	50	Х						0	0	0
EUGENE H HASTINGS , DIRECTOR	50	Х						0	0	0
Bruce Frahm , DIRECTOR	50	Х						0	0	0
JAMES MCCOBB , TREASURER	2 00			Х				6,140	0	0
MARY M HOBART , SECRETARY	50			Х				0	0	0

Part VIII Continued

(A) Name and Title	(B) Average hours per week	Individual Trustee or Director		appl	у)	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total			•				F	6,140	0	0

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►0

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		No	
4	4 For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual				
	marviada,	4		No	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services	_		N.	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(C) Compensation				
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation					

Part Statement of Revenue VIII

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
22	1a	Federated camp	paigns 1a					314
a Tu	Ь	Membership du	es					
ಶ್ಮ	l c		ents 1c					
± E =	d		ations 1 d					
Contributions, gifts, grants and other similar amounts	_ e	Government grants						
ons sin	f	_	ons, gifts, grants, and 1f	 78,797				
量更	'	similar amounts no	t included above					
£ E ₹	g		butions included in					
<u> </u>	h		s 1a-1f)	▶	78,797			
<u> </u>	<u> </u>	Total (Add line.		1				
e L	3-			Business Code				
ven	2a							
22	b							
40.e	C							
E S	d							
Ē	e							
Program Serwoe Revenue	f	All other progra	m service revenue					
Ě	g	Total. Add lines	2a-2f	 - \$				
	3		ome (including dividen					
			nounts)		143,417			143,417
	4		tment of tax-exempt bond					
	5	Royalties		•				
			(ı) Real	(11) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	, ,	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	357,656					
		assets other						
	Ь	than inventory Less cost or	380,093					
		other basis and sales expenses						
	c	Gain or (loss)	-22,437					
	d	Net gain or (los	s)		-22,437			-22,437
	8a	Gross income frevents (not incl	udıng					
÷		of contributions	reported on line 1c)					
重		See Part IV, lin	e 18 <i>G ıf total exceeds</i>					
ě			a					
<u>-</u>	ь	Less direct exp	penses b					
Other Revenue	С	Net income or (loss) from fundraising	events 🟲				
•	9a	See part IV, lin	rom gaming activities e 19 ule G if total exceeds					
			а					
	b		penses b					
	C		loss) from gamıng actı	vities				
	10a	Gross sales of i						
			a					
	ь	Less cost of go	oods sold b					
	С	Net income or (loss) from sales of inve	entory 🟲				
		Miscellaneous	Revenue	Business Code				
	11a							
	Ь							
	c							
	d	All other revenu	ne					
	e		11a-11d	\$				
	12	Total Revenue.	Add lines 1h, 2g, 3, 4,	5, 6d, 7d, 8c,	199,777	0	0	120,980
		9c, 10c, and 11	.e	•				Form 990 (2008)

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete solumn (A) but are not re				.,
	all other organizations must complete column (A) but are not re	_	(B)	(B), (C), and (D	(D)
Do	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV, line 21 $$				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	112,354	112,354		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	112,651	112,001		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	5,640		5,640	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
LO	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	21,500		21,500	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
L2	Advertising and promotion				
L3	Office expenses				
L4	Information technology				
L 5	Royalties				
L6	Occupancy				
L7	Travel				
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
L9	Conferences, conventions and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				<u> </u>
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)				
а	ANNUAL FILING FEES	75		75	
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	139,569	112,354	27,215	
26	Joint Costs. Check If following SOP 98-2 Complete this				
	line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance	Sheet

			(A)			3)
ı	1	Cash—non-interest-bearing	Beginning of year	1	Enao	fyear
	2	Savings and temporary cash investments	98,610	2		133,001
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	15,602	4		17,420
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>	,	5		
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
90	9	Prepaid expenses and deferred charges		9		
ĕ	10a					
Assets		Land, buildings, and equipment cost basis 10a				
	Ь	Less accumulated depreciation Complete Part VI of Schedule D		10c		
	11	Investments—publicly traded securities	2,379,835	11		2,204,905
	12	Investments—other securities See Part IV, line 11 Complete Part VII of Schedule D		12		<u>, , , , , , , , , , , , , , , , , , , </u>
	13	Investments—program-related See Part IV, line 11 Complete Part VIII of Schedule D .		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D		15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,494,047	16		2,355,326
	17	Accounts payable and accrued expenses .	, ,	17		
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
နှု	21	Escrow account liability Complete Part IV of Schedule D		21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
굨		persons Complete Part II of Schedule L		22		
_	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable		24		
	25	Other liabilities Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25	0	26		0
√		Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.				
au	27	Unrestricted net assets	20,400	27		-45,506
Balance	28	Temporarily restricted net assets	1,237,861	28		1,140,417
필	29	Permanently restricted net assets	1,235,786	29		1,260,415
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.				
Š	30	Capital stock or trust principal, or current funds		30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31		
Ş.	32	Retained earnings, endowment, accumulated income, or other funds		32		
Net	33	Total net assets or fund balances	2,494,047	33		2,355,326
Ż	34	Total liabilities and net assets/fund balances	2,494,047	34		2,355,326
			L			

Dart YT	Einancial	Statements a	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
ь	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 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	Yes	
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?	3a		No
ь	If "Yes," did the organization undergo the required audit or audits?	3b		

DLN: 93493119012520

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		ne organizat i ATION INC	on				Employer identif	fication	number	
"\!\L	1001101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					23-7325472			
Pa	rt I	Reason	for Public C	harity Status (to be con	mpleted by all or			s)		
he	organi			ation because it is (Please				•		
1	Γ	A church, c	onvention of ch	nurches, or association of ch	urches described in	Section 170(b)(1)(A)(i).			
2	Γ	A school de	escribed in Sect	t ion 170(b)(1)(A)(ii). (Attac	ch Schedule E)					
3	Γ	A hospital	or a cooperative	e hospital service organizati	on described in Sec	tion 170(b)(1)(A)(iii). (Attach S	chedule	H)	
4	Γ	A medical i	esearch organı	zation operated in conjuncti	on with a hospital de	escribed in Sect i c	on 170(b)(1)(A)	(iii). En	ter the	
		hospital's r	name, city, and	state						
5	Γ	An organiza	ation operated f	or the benefit of a college or	university owned o	r operated by a g	overnmental uni	t descri	bed ın	
		Section 170)(b)(1)(A)(iv).	(Complete Part II)						
6	Γ	A federal, s	tate, or local go	overnment or governmental	unit described in Se	ection 170(b)(1)(A)(v).			
7	Γ	An organiza	ation that norma	ally receives a substantial p	art of its support fro	om a governmenta	al unit or from th	e gener	al public	:
		described i	n Section 170(b	o)(1)(A)(vi) (Complete Par	tII)					
8	Γ	A communi	ty trust describ	oed in Section 170(b)(1)(A)	(vi) (Complete Par	tII)				
9	Γ	An organiza	ation that norma	ally receives (1) more than	331/3% of its supp	ort from contribut	ions, membersh	ıp fees,	and gro	ss
		receipts fro	m activities rel	lated to its exempt functions	s—subject to certain	n exceptions, and	(2) no more tha	n 331/3	% of	
		ıts support	from gross inve	estment income and unrelate	ed business taxable	ıncome (less sec	ction 511 tax) fr	om busi	nesses	
		acquired by	the organization	on after June 30, 1975 See	Section 509(a)(2).	(Complete Part I	II)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for public safe	ty See Section 5	09(a)(4). (See ii	nstructi	ons)	
11	<u>~</u>	•	•	and operated exclusively fo			•	•		
				orted organizations describe				tion 50	9(a)(3).	. Check
			t describes the ype I b	type of supporting organiza	tion and complete li Type III - Function		_	- Type I	TT - O+	her
e	г			rtify that the organization is			•	, ,		
	'			agers and other than one or						
		section 50		-		-				·
f				d a written determination fro	m the IRS that it is	a Type I, Type I	I or Type III su _l	pporting	organız	ation,
g		check this		as the organization accepted	d any dift or contrib	ution from any of	the			1
9		following pe		as the organization acceptos	a a, g o. oo	ac.o o a, o.				
		(i) a perso	n who directly o	r indirectly controls, either a	alone or together wi	th persons descr	bed ın (ıı)		Yes	No
		and (111) bel	ow, the governi	ng body of the the supported	d organization?			11g(i)	Νo
		(ii) a famıly	member of a p	erson described in (i) above	?			11g(ii)	Νo
		(iii) a 35%	controlled enti	ty of a person described in (ı) or (ıı) above?			11g(ii	i)	No
h		Provide the	following inform	mation about the organizatio	ns the organization	supports				
				T		T	. 1			
		ame of oorted	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the organization in	(v) Did you noti the organizatio		I .	vii) Am supp	nount of
	Supp			described off filles 1- 9	organization in	ine organizatio			supp	OIL.

(i) Name of Supported Organization	(ii) EIN	(iii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (See Instructions))		(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		s the ation in organized US?	(vii) A mount of support?	
			Yes	No	Yes	No	Yes	No		
THE AMERICAN RADIO RELAY LEAGUE INC	066000004	12	Yes		Yes		Yes		0	
Total										

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

Additional Data

Software ID: Software Version:

EIN: 23-7325472

Name: ARRL FOUNDATION INC

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The purposes for which the foundation is formed are the following: the promotion of interest in Amateur Radio communication and experimentation; the establishment of Amateur Radio networks to provide electronic communications in the event of disasters or other emergencies; the furtherance of public welfare; the advancement of the radio art; the fostering and promotion of non-commercial intercommunication by electronic means throughout the world; the fostering of education in the field of electronic communication; the promotion and conduct of research and development to further the development of electronic communication; the dissemination of technical, educational and scientific information relating to electronic communication; and the printing and publishing of documents, books, magazines, newspapers and pamphlets necessary or incidental to any of the above purposes.

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2008

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **Employer identification number** ARRL FOUNDATION INC 23-7325472

Pa	rt I	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99		ınds or Accounts	s. Complet	e if the	
		organization answered les to form 33	(a) Donor advised funds	(b) Funds and	other accour	nts	
1	Total	number at end of year		. ,			
2	Aggre	gate Contributions to (during year)					
3		gate Grants from (during year)					
4	Aggre	gate value at end of year					
5		ne organization inform all donors and donor advis are the organization's property, subject to the o	5	or advised	☐ Yes	Г№	
6	used	ne organization inform all grantees, donors, and only for charitable purposes and not for the benimissible private benefit?		may be	┌ Yes	┌ No	
Par	t II	Conservation Easements. Complete	ıf the organızatıon answered "Yes" to	o Form 990, Part I'	V, line 7.		
1	☐ P	rese(s) of conservation easements held by the or reservation of land for public use (e g , recreation rotection of natural habitat reservation of open space	on or pleasure) Preservation of an Preservation of cei	historically importan	ure	1	
2		olete lines 2a-2d if the organization held a quali e last day of the tax year	fied conservation contribution in the form		t the End of t	the Year	
а	Tota	I number of conservation easements		2a			
b		I acreage restricted by conservation easements	e	2b			
С		ber of conservation easements on a certified his		2c			
d			• •	2d			
3	Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during						
,		ixable year 🕨	rreu, released, extiliguished, or terminate	u by the organization	during		
4	Numb	er of states where property subject to conserva	ation easement is located ►				
5		the organization have a written policy regarding cement of the conservation easements it holds?		itions, and	☐ Yes	┌ No	
6	Staff	or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►			
7	A mou	int of expenses incurred in monitoring, inspectir	ng, and enforcing easements during the ye	ar ► \$			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?						
9	balan	rt XIV, describe how the organization reports co ce sheet, and include, if applicable, the text of t ganization's accounting for conservation easem	he footnote to the organization's financial nents	statements that des	crıbes		
Par	t III	Organizations Maintaining Collectio Complete If the organization answered "		or Other Similar	Assets.		
1a	art, h	organization elected, as permitted under SFAS istorical treasures, or other similar assets held de, in Part XIV, the text of the footnote to its fin	for public exhibition, education or researc	h in furtherance of pi		,	
b	hıstoı	organization elected, as permitted under SFAS rical treasures, or other similar assets held for p de the following amounts relating to these items	public exhibition, education, or research ir				
	(i) _{Re}	evenues included in Form 990, Part VIII, line 1		- \$			
	(ii) _A	ssets included in Form 990, Part X		► \$			
2		organization received or held works of art, historing amounts required to be reported under SFAS		r financial gain, provi	de the		
а	Revei	nues included in Form 990, Part VIII, line 1		► \$			

Cat No 52283D

b Assets included in Form 990, Part X

cli	311 Organizations Maintaining Collections of Art	t, His	tori	<u>cal Treasur</u>	es, or Other	· Similar	Asse	ts (co	ntınued,
3	Using the organization's accession and other records, check an items (check all that apply)	ny of th	ne foll	owing that are	a sıgnıfıcant us	e of its co	llection		
а	Public exhibition	d	Γ	Loan or excha	nge programs				
b	Scholarly research	e	Γ	Other					
С	Preservation for future generations								
4	Provide a description of the organization's collections and explanation and explanation.	ain hov	w they	further the org	ganization's exc	empt purp	ose in		
5	During the year, did the organization solicit or receive donation assets to be sold to raise funds rather than to be maintained as					ılar	┌ \	í es	┌ No
Par	t IV Trust, Escrow and Custodial Arrangements.				ızatıon answe	ered "Yes	" to Fo	rm 9º	90,
	Part IV, line 9, or reported an amount on Form 9	•							
1a	Is the organization an agent, trustee, custodian or other interm included on Form 990, Part X?		for c	ontributions or	other assets n	ot	Γ,	í es	Г No
b	If "Yes," explain why in Part XIV and complete the following tab	ole							
							A mou	<u>ıt</u>	
C	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				
a	Did the organization include an amount on Form 990, Part X, lin	ne 21?					Γ,	/es	┌ No
	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete if the organization								
	(a)Current Year)Prior	rear (c)Two	Years Back (d)T	hree Years E	Back (e)	Four Ye	ears Back
a	Beginning of year balance 1,434,558	_							
b	Contributions	_							
C	Investment earnings or losses31,081	_							
d	Grants or scholarships) –							
e	Other expenditures for facilities and programs								
f	Administrative expenses	-							
g	End of year balance	- 7							
9	Provide the estimated percentage of the year end balance held	- as							
а	Board designated or quasi-endowment ▶								
_									
b	remanent endowment F								
с 	Term endowment								
a	Are there endowment funds not in the possession of the organiz organization by	ation	tnat a	re neid and adi	ministered for t	ne	Г	Yes	No
	(i) unrelated organizations						3a(i)		No
	(ii) related organizations						3a(ii)		Νo
b	If "Yes" to 3a(II), are the related organizations listed as require	d on S	ched	ule R?			3Ь		
	Describe in Part XIV the intended uses of the organization's en								
ar	t VI Investments—Land, Buildings, and Equipme	ent. S	ee F	orm 990, Par	t X, line 10.				
	Description of investment			a) Cost or other sis (investment)	(b) Cost or other basis (other)	(c) Depre	eciation	(d) B	ook value
a	Land								
b	Buildings	•							
c	Leasehold improvements								
d	Equipment								
e	Other								

0

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	199,777
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	139,569
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	60,208
4	Net unrealized gains (losses) on investments	4	-198,929
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-198,929
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-138,721
	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	<u> </u>
1	Total revenue, gains, and other support per audited financial		199,777
	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	199,777
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	199,777
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	139,569
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	1	
b	Prior year adjustments		
С	Losses reported on Form 990, Part IX, line 25 2c	_	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	139,569
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
	Add lilles 4d allu 4b		_

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Ret urn Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The Foundation has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets
		FIN 48 DISCLOSURE The Foundation has elected to defer the provisions of FASB Interpretation No 48 ("FIN 48"), "Accounting for Uncertainty in Income Taxes, an Interpretation of SFAS No 109", under the provisions of FASB Staff Position FIN 48-3 until its required effective date of July 1, 2009 The Foundation currently uses a SFAS No 5, "Loss Contingencies" approach for evaluating uncertain tax positions and continually evaluates expiring statutes of limitations, audits, proposed settlements, changes in tax law and new authoritative rulings

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DLN: 93493119012520 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

ARRL FOUNDATION INC

Schedule I

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Grants and Other Assistance to Organizations,

Governments and Individuals in the U.S.

Open to Public Inspect ion Employer identification number

						23-7325472	
Part I General Infor 1 Does the organization mathe selection criteria use 2 Describe in Part IV the organization	aintain records to sed to award the gra	nts or assistance?	t of the grants or assista				Г Yes
Part II Grants and Ot Form 990, Part Part IV and Sch	ther Assistance IV, line 21 for ai ledule I-1 if addi	e to Governments	and Organizations erved more than \$5,0	in the United Sta	tes. Complete if the of the office of the of		
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of seconganizations					-	<u> </u>	
Some Paperwork Reduction Act Not			<u> </u>				edule I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPs	54	96,728			
Grants	7	15,626			

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493119012520

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

Open to Public Inspection

Name of the organization ARRL FOUNDATION INC					E	mploy	er ide	nt if icat	tion n	umber	
ARRE FOODMION INC					2:	3-732	5472	2			
Part I Excess Benefit Transact To be completed by organization	•				. , .				, Part	V , line	40b
1 (a) Name of disqualifie					on of transa					c) Corr	
1 (a) Name of alsquame			(b) Desi	СПРП	OII OI LIAIIS	CLIOII				Yes	No
									-+		
2 Enter the amount of tax imposed on							nder				
section 4958								\$ ——			
3 Enter the amount of tax, If any, on line Part II Loans to and/or From			ne organization .	•		• •	<u> </u>	\$			
Part II Loans to and/or From To be completed by organiza			on Form 990, Part	IV, lı	ne 26, or Fo	orm 9	90-E	Z, Part	V , lın	e 38a	
	(b) Loan to or		,		,			(f)		
(a) Name of interested person and	from the	(c)	Original principal	(d)B	alance due	(e) defa					rıtten ment?
purpose	organization?		amount	(d)Balance due		uciu	uit.	commi		1 -	
	To From					Yes	No	Yes	No	Yes	No
otal											
Part III Grants or Assistance B To be completed by organ				90, F	Part IV, lır	ne 27					
(a) Name of Interested person	(b)Relations	hıp betw	veen interested pe					at or tv	ne of:	assista	nce
(a) Name of interested person	aı	nd the o	rganization		(6)//////		- grai		pc 01 1		
Part IV Business Transactions	Tavalvina Inter	ostod	Porcons								
To be completed by organ	nizations that ansv	wered '	"Yes" on Form 9	90, F	Part IV, lır	ne 28	a, 28	b, or 2	28c.		
	(b) Relations				•		•	<u> </u>		(e) Sha	rıng of
(a) Name of interested person	between intere		(c) A mount of transaction		(d) Descr	ıptıon	of tra	nsacti	on l	organıza reveni	
	organizatio		transaction						F	Yes	No
ames McCobb	Tresurer of A RRL		5,6	640	Provided in	vestm	ent a	dvisory	,		Νο
	Foundation			:	services						
				$\overline{}$					-		

Employer identification number

23-7325472

SCHEDULE 0

Name of the organization ARRL FOUNDATION INC

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public Inspection

Identifier Reference Explanation

Form 990, Part VI, Section A, line 10

The Form 990 is prepared with the assistance of the independent accountants and, before filing, is reconciled to the organizations books and records and reviewed and approved by both the Controller and Chief Financial Officer of the organization Also, prior to filing with the IRS, an electronic copy is provided to members of the Board of Directors

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		No less frequently than once a year, each Board Member shall promptly submit a statement to the Foundation President identifying all business and other affiliations in which the Board Member has a Financial Interest, as defined. A Board Member shall promptly disclose to the Foundation President any situation where a family member (spouse, child, grandchild, niece or nephew.) has applied for an ARRL Foundation Scholarship. If the Board Member serves on the scholarship committee, the Foundation President will advise the Chairman of the Scholarship. Committee and the Board member will recuse himself from the scholarship selection process for that year. Except in the instance of a continuing and pervasive conflict, no action shall be taken when Board Member fully discloses to the Board his or her financial interest and abstains from participation in the Boards consideration of the proposed transaction, contract, or arrangement could reasonably be considered to a financial benefit to such Board Member, as defined, whether or not the Board Member believes a conflict exists. After disclosure of the potential conflict of interest, the Foundation President and disinterested members of the ARRL Foundation Board shall determine whether a conflict of interest exists or continuing and pervasive conflict of interest exists. Neither the Board nor any Committee of the Board shall vote upon any proposed matter, transaction, contract, or arrangement in connection with which an actual or possible conflict of interest has been disclosed by a Board Member until such time as the Foundation President has addressed the actual or possible conflict of interest. Decisions regarding conflicts of interest will be reviewed by the Foundation President and disinterested Foundation Directors shall be limited to the materials submitted which are pertinent to the proposed conflict of interest. A majority of the Board of Directors is required to reverse any decision. Each Board Member shall annually sign a statement which affirms that such person

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The organization's By Laws, Articles of Association and financial statements are all posted on the ARRL Foundation wieb site. The conflict of interest policy is included in the By Laws.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ARRL FOUNDATION INC	Employer ident	Employer identification number					
				23-7325472			
Part I Identification of Disregarded Entities							
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizat	ions						
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity stat (if section 501(c)((F) Direct controlling 3)) entity		
The American Radio Relay League							
225 Main Street Newington, CT06111 06-6000004		СТ	501(C)(3)	9	No		
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	5Y		Schedule R (Form 990) 2008		

(A) Name, address, and EIN of related organization		(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

(5)

(6)

Part V	Transactions with	Related Organizations	

	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or r	more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b	Gift, grant, or capital contribution to other organization(s)			1b		No
c	Gift, grant, or capital contribution from other organization(s)			1c		No
d	Loans or loan guarantees to or for other organization(s)			1d		No
e	Loans or loan guarantees by other organization(s)			1e		No
	Sale of assets to other organization(s)			1f		No
	Purchase of assets from other organization(s)			1g		No
_				1h		No
	Exchange of assets			1i		No
•	Lease of facilities, equipment, or other assets to other organization(s)			- -		140
j	Lease of facilities, equipment, or other assets from other organization(s)			1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)			1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)			11		No
m	n Sharing of facilities, equipment, mailing lists, or other assets			1m		No
n	Sharing of paid employees			1n		No
0	Reimbursement paid to other organization for expenses			10	Yes	
P	Reimbursement paid by other organization for expenses			1р		No
_	Other transfer of cash or property to other organization(s)			1q		No
	Other transfer of cash or property to other organization(s)			1r		No
•	Other transfer of cash of property from other organization(s)					
2	If the answer to any of the above is "Yes," see the instructions for information on who must co	mplete this line, including covered relationships	and transaction thresholds			
	(A)	(B) Transaction	(C)			
	Name of other organization(s)	type(a-r)	Amount Involved			
(1)) The American Radio Relay League	0			13,30	L
(2)						
(3)						
(4)						

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

	T	ı	(5)		· -			1	1		
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?	or ng ?	
			Yes	No		Yes	No		Yes	No	
	1	1				ı		1			