## Form **990-EZ**

# , Short Form Return of Organization Exempt From Income Tax

2008

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other org- anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

Open to Public Inspection

Form 990-EZ (2008)

Α	For t	he 2008 calendar year, or tax year beginning , 2008, a	ind ending			,
В		ıf applicable C		D Em	ployer	dentification number
	1	is change   Please   AMERICAN HOLISTIC NURSES ASSOCIATION		7	4-21	64825
F		change   label or   222 N CAN EDANCTECO ET ETT 201			ephone (	
	Initial			l	•	
	Termir			9	28-5	26-2196
	Amen	ded return Instructions.		F Gr	oup Ex	emption
	Applic	ation pending		Nu	<u>mber</u>	
		Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts	G Accounting		d	Cash X Accrual
		must attach a completed Schedule A (Form 990 or 990-EZ).	Other (spec			
		LEEL ALINA ODG	H Check ►			janization is not
ı		site: • WWW.AHNA.ORG	— I 000 E7			dule B (Form 990,
<u>J</u>			JL1			
K	Chec	k ► ∐If the organization is not a section 509(a)(3) supporting organization <b>an</b> 200. A return is not required, but if the organization chooses to file a return, be s				not more than
				- retuin	<u>'</u>	
L		lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more ad of Form 990-EZ	e, file Form 990		► Ś	986,357.
Pa	rt I	Revenue, Expenses, and Changes in Net Assets or Fund Ba	lances (See the	ınstrı		
تـــــــــــــــــــــــــــــــــــــ	1	Contributions, gifts, grants, and similar amounts received		1	1	23,770.
	2	Program service revenue including government fees and contracts		Ì	2	441,788.
	3	Membership dues and assessments		ľ	3	400,081.
	4	Investment income		ľ	4	2,111.
	5a	1	5 a	Ì		
	1	Less cost or other basis and sales expenses	5b			
Ŗ	c	Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)			5 c	
Ā	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gamin	ng, check here	$\Box$		
REVENU	a	Gross revenue (not including \$ 10,092. of contributions		_		
E		reported on line 1)	6a 3,3	364.		
	l b	Less direct expenses other than fundraising expenses	6b			
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)			6c	3,364.
	7 a	Gross sales of inventory, less returns and allowances	7a 18,3	386.		
	b	Less cost of goods sold	7b 2	226.		
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		ļ	7c	18,160.
	8	Other revenue (describe ► SEE STATEMENT 1		_)	8	96,857.
	9	<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)		•	9	986,131.
	10	Grants and similar amounts paid (attach schedule)	E STATEMENT 2		10	4,200.
F	11	Benefits paid to or for members	-00050		11	
χ̈́P	12		EIVED O.	ļ	12	338,606.
E	13	Professional fees and other payments to independent contractors	6 2009 8	ļ	13	11,683.
S	14	(Mo) I	6 2009   \$	ļ	14	31,700.
S	15	Printing, publications, postage, and shipping	<u> </u>	, ,	15	143,166.
	16	Other expenses (describe SEE STATEMENT 3	MUT	) ]	16	461,974.
	17	Total expenses (add lines 10 through 16)	SIGNATURE TO SERVICE T	•	17	991,329.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	_		18	
Mâ	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (miles)	ust agree with end-of-	year		262 565
1		figure reported on prior year's return)			19	360,565.
2	20	Other changes in net assets or fund balances (attach explanation)		▶	20	255 267
	<u> </u>	Net assets or fund balances at end of year Combine lines 18 through 20	(I- E 000			355, 367.
냽	20 21 rt II Cas Lar Oth	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 c				
	L Co.	(See the instructions for Part II ) sh, savings, and investments	(A) Beginning	827		(B) End of year 274,875.
(E)	l lar	on, savings, and investments and and buildings	209,	021	23	413,013.
24	Oth	ner assets (describe > SEE STATEMENT 4 )	78	581.		83,265.
025	To	tal assets		408		358,140.
26	To	tal liabilities (describe SEE STATEMENT 5		843		2,773.
2		t assets or fund balances (line 27 of column (B) must agree with line 21)		565		355,367.

MA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Form 990-EZ (2008) AMERICAN HOLIST					64825 Page 2
Part III Statement of Program Ser		<del></del>	ons.) *	_	Expenses
What is the organization's primary exempt purpose? HC	LISTIC HEALTH EDUC	ATION		(Re	quired for 501(c)(3)
Describe what was achieved in carrying out the describe the services provided, the number of	e organization's exempt purp	oses. In a clear and cor	ncise manner,	and	(4) organizations and
describe the services provided, the number of	persons benefited, or other r	elevant information for	each	494	7(a)(1) trusts, optional others)
program title		100 00070100 m		101	others)
28 THE JOURNAL, NEWSLETTER A				- 1	
MEMBERS AND INTERESTED PA	RTIES INFORMED ON	NEW DEVELOPMENT	CS_AND		
NEWSWORTHY EVENTS WITHIN	THE ASSOCIATION AN	D THE PROFESSION	)N.	7	
		<b></b>		28	a 115,111.
	is amount includes foreign gr			1 20	a 115,111.
29 CONFERENCES, ANNUAL CONVE					
BRING MEMBERS, COMMUNITY	LEADERS AND SCHOLA	RS TOGETHER TO	EDUCATE		1
AND UPDATE THEM ON HOLIST	TC NURSING			7	1
		ants shock here		29	220,160.
	is amount includes foreign gr		- L	25	220,100.
30 ACTIVITIES DIRECTLY RELAT	ED TO SUPPORT EDUC	ATION AND PROMO	DITION OF _	- 4	
HOLISTIC NURSING.					
				77	
(Grants \$ ) If th	is amount includes foreign gr	ants, check here		30	a 480,110.
31 Other program services (attach schedule					
		anto abant bara	▶ [	_ا <sub>21</sub> .	
	is amount includes foreign gr	ants, check here		31 2	
32 Total program service expenses (add in		<del></del>		▶ 32	815,381.
Part IV List of Officers, Directors	, Trustees, and Key Em		ne even if not c	omper	
·	(b) Title and average hours	(c) Compensation (If	(d) Contribution	ons to	(e) Expense account
(a) Name and address	per week devoted	not paid, enter -0)	employee benefit p	olans and	and other allowances
	to position		deferred comper		
CARLA MARIANO	ELDER	0.		0.	.  0.
4 WASHINGTON SQ. VLG. #5T	l o				
NEW YORK, NY 10012	1				
	DDECTDENT	0.	<u> </u>	0	. 0.
LUCIA THORNTON	PRESIDENT	υ.		U.	.  0.
12592 VALLEY VISTA LANE	] 0				
FRESNO, CA 93720					
ROTHLYN P ZAHOUREK	RESEARCH COORD	0.		0.	. 0.
	implimen coord	•		•	.
23 LAKE DR	Į				
BELCHERTOWN, MA 01007					
ELLIE SLETTE	FINANCIAL COORD	0.		0.	.  0.
1837 LAUREL AVENUE	1 0				
SAINT PAUL, MN 55104	i				
	TRUCKETON GOODS				+
LINDA CHIOFAR	EDUCATION COORD	0.		0 .	.  0.
1430 FORDHAM AVENUE	] 0				
MODESTO, CA 95350					
MARY ENZMAN HAGEDORN	PRESIDENT ELECT	0.		0.	. 0.
	THESTDENT BEECT	0.		0.	.  "
1250 OAK HILLS DRIVE	Į				
COLORADO SPRINGS, CO 80919					<u> </u>
MARY ANN HANLEY	ED. COORDINATOR	0.		0.	
4902 12TH ST	i n				
	ľ				
LUBBOCK, TX 79416					<del> </del>
CINDY BULTENA	NETWORK COORD	0.		0.	.  0.
1925 WOODWINDS DR	0				
WOODBURY, MN 55125					1
	FINANCIAL COORD	0.		0	. 0.
JOYCE MURPHY	FINANCIAL COORD	0.		υ.	.
PO_BOX_18	] 0				
STRONG, ME 04983					1
<del></del>				-	
					ļ
	1				
	1				
			<u> </u>		<del> </del>
	1				
	İ				1

Par	TV   Other Information (Note the statement requirement in General instruction V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T,	- "		
	attach a statement explaining your reason for not reporting the income on Form 990-T.			
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35 a	X	
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b	Х	↓
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		х
	Enter amount of political expenditures, direct or indirect, as described in the instructions  - 37a  0.			
	Did the organization file Form 1120-POL for this year?	37b	<u> </u>	X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a		X
t	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	501(c)(7) organizations Enter	1		
	Initiation fees and capital contributions included on line 9  Gross receipts, included on line 9, for public use of club facilities  39b  N/A			
	Gross receipts, included on line 9, for public use of club facilities  1501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under	1		
	section 4911 ► 0., section 4912 ► 0.; section 4955 ► 0.	<u> </u>		<u> </u>
t	5501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If 'Yes,' complete Schedule L, Part I	40 b	<del> </del>	X
(	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
c	Enter amount of tax on line 40c reimbursed by the organization			
6	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed AZ	400		1_21_
<b>42</b> a	Telephone no. ► 928-5: Located at ► 323 N. SAN FRANCISCO ST, STE 201 FLAGSTAFF AZ ZIP + 4 ► 86001	<u>26-2</u>	<u>196</u>	
t	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	-	Yes	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country	42 b		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.		_	
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42 c		Χ
	If 'Yes,' enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	1	▶ □	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead			
	of Form 990-EZ	44	<u> </u>	X
45 	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45		Х
BAA	TEEA0812L 01/14/09 For	m <b>990</b>	-EZ	(2008)

Form 990- Part VI	EZ (2008) AMERICAN HOLISTIC N  Section 501(c)(3) organization	s only. All section			uestions 46-	
	and complete the tables for lin	es 50 and 51.		SEE ST	<u> PATEMENT 6</u>	
<b>46</b> Did t	the organization engage in direct or indire	ct political campaign ac	tivities on behalf o	f or in opposition to candidate	s Yes	
•	ublic office? If 'Yes,' complete Schedule				46	X
	the organization engage in lobbying activi				47	X
	e organization operating a school as desc			•	48	X
	the organization make any transfers to an	•	related organizatio	on?	49 a	X
	es,' was the related organization(s) a sect	-				ــــــــــــــــــــــــــــــــــــــ
50 Com	plete this table for the five highest compe ived more than \$100,000 of compensation	nsated employees (other from the organization	er than officers, dire If there is none, ei	ectors, trustees and key emplo nter 'None '	oyees) who ea	ch 
(a	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowanc	i
NONE_		-				
					<del></del>	
			<del></del>			
		<u></u>				
<b>-</b>		-				
Total number	r of other employees paid over \$100,000					
51 Com from	plete this table for the five highest compe the organization off there is none, enter	ensated independent cor None '	ntractors who each	received more than \$100,000	of compensati	ion
	(a) Name and address of each independent cont	ractor paid more than \$100,000		(b) Type of service	(c) Compensate	ion
NONE _						
						-
Total num	ber of other independent contractors rece	lying over \$100,000	<b>•</b>		<del> </del>	
Total Harri	Under penalties of perjury, I declare that I have exam	nined this return, including ac				
	true, correct, and complete Declaration of preparer	other than officer) is based of				
Sign	Jacobson Con	\				
Here	Signature of officer	1				
	Y JEANNE CRAWFORD	D EXEC. I				
	Type or print name and title					
Paid	Preparer's M ().	1 0				
Pre-	signature Avy	muy				
parer's	very facile	OCIATES PC				
Use	employed), 150 W DALE AVE					
Only	ZIP + 4 FLAGSTAFF, AZ 8	P00T				

May the IRS discuss this return with the preparer shown above? See inst

BAA

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

2000

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name o	of the	e organization							Employe	r identifica	tion number		
AME:	RI	CAN HOLISTIC	NURSES ASSOCI	ATION					74-2	16482	5		
Part	:1	Reason for Pu	blic Charity Statu	s (All organizations	must o	comple	ete this	part.)	(see	instruct	tions)		
The o	rga	inization is not a priv	vate foundation becau	se it is (Please check of	nly <b>one</b>	organiz	ation)						
1	Ť	A church, convention	on of churches or ass	ociation of churches desc	cribed in	section	n 170(b)	(1)(A)(i)	).				
2	H	1		A)(ii). (Attach Schedule I			, ,		,				
3	H	1		e organization described		ion 170 <i>(</i>	<b>ΙΥΊΥΔ</b> Υ	(iii) (Al	tach Scl	hedule H	1)		
4	H	•		d in conjunction with a h								al'e	
-	L	,	• ,	a in conjunction with a n	ospitai t	16301106	u III <b>36</b> 0		O(D)(T)	-Діпу. Сі	iter the hospita	ai 5	
5		name, city, and sta An organization op 170(b)(1)(A)(iv). (C	erated for the benefit	of a college or university	owned	or opera	ated by	a gover	nmental	unit des	cribed in sec	tion	
6		A federal, state, or	local government or	governmental unit descri	bed in s	section 1	170(b)(1	(A)(v).					
7			at normally receives a <b>((A)(vi).</b> (Complete P	substantial part of its su art II)	ipport fr	om a go	vernmer	ntal uni	t or from	the gen	eral public des	scribed	
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )												
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.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)												
10	L	An organization org	ganized and operated	exclusively to test for pu	blic safe	ety See	section	1 509(a)	<b>(4).</b> (se	e instruc	tions)		
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See <b>section 509(a)(3)</b> . Check the box that describes the type of supporting organization and complete lines 11e through 11h.												
	_	<b>a</b> Type I	<b>b</b> ∐Type Ⅱ	c Type II	l — Fund	ctionally	integra	ted		d []	Type III – Otl	ner	
е		By checking this both than foundation ma 509(a)(2)	ox, I certify that the or anagers and other tha	ganization is not controll n one or more publicly su	ed direc upportec	tly or in	directly l zations o	by one describe	or more ed in sec	disqualition 509	fied persons of (a)(1) or section	ther on	
f		If the organization check this box	received a written det	ermination from the IRS	that is a	Type I,	Type II	or Type	e III supt	oorting o	rganization,		
g		Since August 17, 2	006, has the organiza	tion accepted any gift or	r contrib	ution fro	om any o	of the fo	llowing	persons	?		
											Ye	s No	
		(i) a person who	directly or indirectly	controls, either alone or t upported organization?	together	with pe	rsons de	escribed	l ın (ıı) a	ınd (ııı)	11 g (i)		
			ber of a person desc	-							11g (ii)		
		• •	•									<del>-  </del> -	
		` '	, ,	described in (i) or (ii) at							11g (iii)		
<u>h</u>	_		T	he organizations the orga	1		Ι .		1 .	I			
	(	i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) lister	Is the tion in col d in your erning ment?	the organ	ou notify nization in (i) of upport?	organizat	zed in the l	(vii) Amount of	Support	
					Yes	No	Yes	No	Yes	No			
									<u></u>				
								-					
					ļ	1		İ					
	_				<u>.                                    </u>		<u> </u>		<u> </u>	_		_	
										_			
							ļ	ļ	<u> </u>	<del>   </del>			
Total													

	(Complete only if you check	ed the box on line	e 5, 7, or 8 of Par	tl)				·
Sec	tion A. Public Support		<del></del>	<del></del> -	<del> </del>			
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	3	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
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						ļ	
4	Total. Add lines 1-3				<u></u>			
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)							
	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support			T	r ·		<u> </u>	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	3	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income form unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	ities, etc (see ins	structions)				12	
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 50	1(c)(	3) ▶ □
	tion C. Computation of Pul					<del></del>		· · · · · · · · · · · · · · · · · · ·
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •			-	14	<u>%</u>
15	Public support percentage for 20	u/ Schedule A, P	art IV-A, line ∠bt			L	15	%_
16 a	a 33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pul	I not check the bo blicly supported o	ox on line 13, and organization	the line 14 is 33	-1/3 % or moi	e, ch	leck this box ►
t	33-1/3 support test — 2007. If the and stop here. The organization	e organization did qualifies as a put	I not check a box olicly supported o	on line 13, or 16a rganization	i, and line 15 is 3	3-1/3% or mo	re, cl	heck this box
17 a	a 10%-facts-and-circumstances te or more, and if the organization in the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop he	re. Explaın ın	Part	IV how
t	o 10%-facts-and-circumstances te or more, and if the organization in organization meets the 'facts-and	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop he	re. Explain in	Part	
18 BAA	Private foundation. If the organiz	zation did not che	eck a box on line,	13, 16a, 16b, 17a				structions ► ☐ 90 or 990-EZ) 2008

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

(Complete only if you checked the box on line 9 of Part I.)

_		•					
	tion A. Public Support		<del></del>		<del></del>		<del></del>
	idar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	<b>(c)</b> 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	273,571.	329,475.	353,317.	379,913.	423,851.	1,760,127.
	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	240,437.	308,900.	370,269.	365,871.	441,788.	1,727,265.
3	Gross receipts from activities that are not an unrelated trade or business under section 513		·				0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1-5	514,008.	638,375.	723,586.	745,784.	865,639.	3,487,392.
7a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 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	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	į	0.1	0.	0.		-0.	<u> </u>
۰	Public support (Subtract line						2 407 202
<u>C</u>	7c from line 6)	<u> </u>	<u> </u>				3,487,392.
	tion B. Total Support	4-> 0004	42.0005	4-> 0006	(4) 0007	4.2.0000	40 T 1 1
Cale	ndar year (or fiscal yr beginning in) 🟲 📗	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
		F14 000 I	C20 275				
9	Amounts from line 6	514,008.	638,375.	723,586.	745,784.	865,639.	3,487,392.
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources		·				
9 10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	787.	41,148.	70,890.	8,563.	2,111.	123,499. 0.
9 10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses		·				
9 10 a b	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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	787.	41,148.	70,890.	8,563.	2,111.	123,499. 0.
9 10 a b	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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	787.	41,148.	70,890.	8,563.	2,111.	123,499. 0. 123,499.
9 10 a b c 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add lns 9, 10c, 11, and 12)  First five years. If the Form 990	787. 787. 5,005.	41,148.	70,890. 70,890. 2,808.	8,563. 8,563. 10,039.	2,111. 2,111. 18,160.	123,499.  0. 123,499.  0. 40,072. 3,650,963.
9 10 a b c 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and	787. 787. 5,005.	41,148. 41,148. 4,060. tion's first, second	70,890. 70,890. 2,808.	8,563. 8,563. 10,039.	2,111. 2,111. 18,160.	123,499.  0.  123,499.  0.  40,072.  3,650,963.
9 10 a b c 11 12 13 14 Sect	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Put	787. 787. 5,005. Is for the organiza stop here	41,148. 41,148. 4,060. tion's first, second	70,890. 70,890. 2,808.	8,563. 8,563. 10,039.	2,111. 2,111. 18,160. a section 501(c)(	123,499. 0. 123,499. 0. 40,072. 3,650,963. 3) ► □
9 10 a b c 11 12 13 14 Sect	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20	787.  787.  5,005.  Is for the organiza stop here olic Support Per 08 (line 8, column	41,148.  41,148.  4,060.  tion's first, second	70,890.  70,890.  2,808.  1, third, fourth, o	8,563. 8,563. 10,039.	2,111. 2,111. 18,160. a section 501(c)(	123,499. 0. 123,499. 0. 40,072. 3,650,963. 3) ► □
9 10 a b c 11 12 13 14 Sect 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage from 20	787.  787.  5,005.  Is for the organiza stop here  blic Support Period (Inc. 8, column 2007 Schedule A, for the stop of the st	41,148.  41,148.  41,148.  4,060.  tion's first, second ercentage (f) divided by line Part IV-A, line 27g	70,890.  70,890.  2,808.  1, third, fourth, o	8,563. 8,563. 10,039.	2,111. 2,111. 18,160. a section 501(c)(	123,499. 0. 123,499. 0. 40,072. 3,650,963. 3) ► □
9 10 a b c 11 12 13 14 Sect 15 16 Sect	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage from 20 tion D. Computation of Invettors	787. 787. 5,005. Is for the organiza stop here Diic Support Pe 08 (line 8, column 2007 Schedule A, I estment Incom	41,148.  41,148.  41,148.  41,060.  tion's first, second ercentage (f) divided by line Part IV-A, line 27ge e Percentage	70,890.  70,890.  2,808.  1, third, fourth, o	8,563. 8,563. 10,039. r fifth tax year as	2,111.  2,111.  18,160. a section 501(c)(c)	123,499. 0. 123,499. 0. 40,072. 3,650,963. 3) ► □ 95.5% 94.7%
9 10 a b c 11 12 13 14 Sect 17	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and the computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for	787. 787. 5,005. Is for the organiza stop here Diic Support Pe 08 (line 8, column 2007 Schedule A, restment Incomer 2008 (line 10c, restment 2008)	41,148.  41,148.  41,148.  41,148.  41,060.  tion's first, second ercentage (f) divided by line Part IV-A, line 27ge e Percentage column (f) divided	70,890.  70,890.  2,808.  4, third, fourth, out the control of the	8,563. 8,563. 10,039. r fifth tax year as	2,111.  2,111.  18,160.  a section 501(c)(c)  15  16	123,499. 0. 123,499. 0. 40,072. 3,650,963. 3) ► □ 95.5% 94.7% 3.4%
9 10 a b c 11 12 13 14 Sect 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and thom C. Computation of Put Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2008. If the computation in the computation of the computation of processing the computation of Investment income percentage from 33-1/3 support tests — 2008. If the computation is considered to the computation of the computation of the computation of Investment income percentage from 33-1/3 support tests — 2008. If the computation is considered to the computation of the com	787. 787. 5,005. Is for the organiza stop here Diic Support Pe 08 (line 8, column 2007 Schedule A, I estment Incom 2007 Schedule	41,148.  41,148.  41,148.  41,148.  41,148.  41,060.  tion's first, second ercentage (f) divided by line Part IV-A, line 27g the Percentage column (f) divided to A, Part IV-A, line check the box on line	70,890.  70,890.  2,808.  4, third, fourth, out the control of the	8,563.  8,563.  10,039.  r fifth tax year as	2,111.  2,111.  18,160.  a section 501(c)(c)  15 16  17 18 %, and line 17 is no	123,499.  0.  123,499.  0.  40,072.  3,650,963.  3)  ▶ □  95.5%  94.7%  3.4%  4.7%
9 10 a b c 11 12 13 14 Sect 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  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  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV  Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and the computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income Investmen	787.  787.  787.  5,005.  Is for the organiza stop here  Olic Support Period (Inc.)  007 Schedule A. Restment Income 2007 Schedule (Inc.)  or 2008 (Inc.) 10c, or 2007 Schedule (Inc.) 2007 Schedule (	41,148.  41,148.  41,148.  41,148.  41,148.  41,060.  tion's first, second ercentage (f) divided by line Part IV-A, line 27g the Percentage column (f) divided by A, Part IV-A, line check the box on line the organization	70,890.  70,890.  2,808.  4, third, fourth, out the control of the	8,563.  8,563.  10,039.  r fifth tax year as  nn (f)) s more than 33-1/30 blicly supported of	2,111.  2,111.  18,160.  a section 501(c)(c)  15  16  17  18 %, and line 17 is no rganization	123,499.  0.  123,499.  0.  40,072. 3,650,963.  3)  ▶ □  95.5% 94.7%  4.7%  ★  X

Schedule /	A (Form 9	90 or 9	90-EZ) 2	2008	AME	RICAN	HOL:	ISTIC	NURSI	ES A	SSO	CIATION		74-21	64825		Page 4
Part IV	Suppl	ement	al Info	rmati	ion. C	omple	te the	s part	to prov	ıde İ	the e	explanatio additional	n requi	red by	Part II,	line 10	);
	Part II	, line	17a or	1/0;	or Pa	art III,	ine i	2. Pro	vide an	y otr	ner a	additional	intorma	ition. (	see ins	truction	ns)
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2008

## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

<b>AMERICAN HOLISTIC</b>	: NURSES	ASSOCIATION
AMENICAN NOLISIN	, 11UNJEJ	AUUVIAIIVII

74-2164825

<b>PART III</b>	, LINE	12 - 0	<b>OTHER</b>	INCOME
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NATURE AND SOURCE 2008 2007 2006 2005 2004

PROFIT FROM SALE OF INVENTORY

TOTAL  $\frac{18,160.}{\$ 18,160.} \frac{10,039.}{\$ 10,039.} \frac{2,808.}{\$ 2,808.} \frac{4,060.}{\$ 4,060.} \frac{5,005.}{\$ 5,005.}$ 

2008	FEDERAL STATEMENTS	, <b>+</b>	PAGE 1
STATEMENT 1 FORM 990-EZ, PART I, LINE OTHER REVENUE ROYALTIES	AMERICAN HOLISTIC NURSES ASSOCIATION  8	TOTAL \$	96,857. 96,857.
STATEMENT 2 FORM 990-EZ, PART I, LINE GRANTS AND SIMILAR AMO	10 DUNTS PAID		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE:	RESEARCH RUTH MCCAFFREY 1605 CREST DR LAKE WORTH, FL 33461 NONE		
CASH AMOUNT GIVEN:  CLASS OF ACTIVITY:  DONEE'S NAME:  DONEE'S ADDRESS:	AWARD LORI SETTERSTEN 36981 SERENITY LANE OCONOMOWOC, WI 53066	\$	1,200.
RELATIONSHIP OF DONEE: CASH AMOUNT GIVEN:	NONE	\$	2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: CASH AMOUNT GIVEN:	SCHOLARSHIP KATHY ZIMMERMAN 611 W MEADE DR NASHVILLE, TN 37205 NONE	\$	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SCHOLARSHIP KATI BLOEDAU 1301 B ROSEDALE AVE DURHAM, NC 27707	*	300.
RELATIONSHIP OF DONEE: CASH AMOUNT GIVEN:	NONE	\$	500.
STATEMENT 3 FORM 990-EZ, PART I, LINE OTHER EXPENSES	16		
ADVERTISING AND PROMOTE BANK & CREDIT CARD FEEST COMPUTER EXPENSES CONFERENCES, CONVENTION DUES & SUBSCRIPTIONS EDUCATION INSURANCE JANITORIAL LEADERSHIP COUNCIL LOSS ON INVESTMENTS MEMBERSHIP EXPENSES OFFICE EXPENSES REPAIRS & MAINTENANCE	5	\$	32,880. 23,998. 49,811. 220,160. 819. 9,613. 9,672. 4,874. 3,600. 37,142. 17,099. 30,526. 13,612. 198.

2008	FEDERAL STA	TEMENTS	•	PAGE 2
	AMERICAN HOLISTIC NUF	RSES ASSOCIATION		74-2164825
STATEMENT 3 (CONTII FORM 990-EZ, PART I, OTHER EXPENSES	NUED) LINE 16			
SECURITY TAXES & LICENSES TELEPHONE TRAVEL			\$ TOTAL \$	300. 1,208. 5,428. 1,034. 461,974.
STATEMENT 4 FORM 990-EZ, PART II, OTHER ASSETS	LINE 24			
ACCOUNTS RECEIVABLE DEPOSITS FURNITURE AND FIXTE INVENTORIES	URES	<u>BF</u> \$	38,994. \$ 7,460. 0. 6,888.	ENDING 51,453. 521819. 6,871.
MACHINERY AND EQUI NOTES AND LOANS RE	PMENT CEIVABLE	TOTAL <u>\$</u>	2,739. 22,500. 78,581. \$	2,739. 22,500. 83,265.
STATEMENT 5 FORM 990-EZ, PART II, TOTAL LIABILITIES	LINE 26			
ACCOUNTS PAYABLE AND UNEARNED REVENUE	ND ACCRUED EXPENSES		7,843. \$ 0. 7,843. \$	2,673. 100. 2,773.

## REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR	
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	N
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR	
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	N
INDIRECTLI, ON A PERSONAL BENEFIT CONTRACT:	14

NO

NO