SCANNED MAR 3 0 2010

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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For	the 200)8 ca	alen	dar year,	or tax	year be	ginnin	9				an	d ending								
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ш	17	Other e	expe	ense	s (Part IX	ζ, coluπ	nn (A), li	nes 11	a-11d, 1	11f-24f)						,80				, 36	
- 1	18	Total e	xpen	nses	s. Add lin	es 13·1	7 (must	equal	Part IX,	, colum	nn (A), li	ne 25)				198					, 35	
	19	Reveni	ue le	<u> </u>	expenses	. Subtr	act line	18 from	n line 12	2	, ,.	·		.,		<u><5</u>	,86	7.≥	·	18	,91	<u>2.</u>
Net Assets or Fund Balances														<u> </u>	Begin	ning of			E	nd of Y		
age age	20	Total a	ssets	ts (P	Part X, line	16)					· · · · · · · · · · · · · · · · · · ·						<u>,90</u>				, 32	
	21	Total lis	abiliti	ties ((Part X, li	ne 26)										106					,78	
	22	Net ass	sets	or fu	fund balaı	nces. S	ubtract	line 21	from lir	ne 20	<u></u>					<93	<u>, 36 </u>	<u>7.Þ</u>		<u> <74</u>	, 45	<u>5.</u> >
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May the IRS discuss this return with the preparer shown above? (see instruc LHA For Privacy Act and Paperwork Reduction Act Noti 832001 12-18-08 SEE SCHEDULE O FOR ORGANIZATION MI

NATIONAL LEAGUE OF FAMILIES OF AMERICAN

	m 990 (2008) PRISONERS AND MISSING IN SOUTHEAST ASIA 23-70/1242 Page
P	art III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission:
	TO OBTAIN THE RELEASE OF ALL PRISONERS, THE FULLEST POSSIBLE
	ACCOUNTING FOR THE MISSING AND REPATRIATION OF ALL RECOVERABLE REMAINS
	OF THOSE WHO DIED SERVING OUR NATION DURING THE VIETNAM WAR IN
	SOUTHEAST ASIA.
2	Did the organization undertake any significant program services during the year which were not listed on
-	
	the prior Form 990 or 990-EZ?
_	
3	
	If "Yes", describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 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.
4a	(Code:) (Expenses \$ 174,194. including grants of \$) (Revenue \$
	COLLECTION AND DISEMINATION OF INFORMATION CONCERNING THE ACCOUNTING
	FOR SERVICEMEN MISSING OR UNACCOUNTED FOR IN SOUTHEAST ASIA.
	THE LEAGUE UTILIZES THE SERVICES OF UNPAID VOLUNTEERS WHO DONATE THEIR
	TIME TO FURTHER THE LEAGUE'S MISSION. THE ESTIMATED VALUE OF THE TIME
	VOLUNREERED FOR PROGRAM SERVICES IS \$400,123
	VOHONREERED FOR PROGRAM SERVICES 15 \$400,123
	·
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	_
	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	·
	·
	<u></u>
	· · · · · · · · · · · · · · · · · · ·
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ Including grants of \$) (Revenue \$)
4e	Total program service expenses ▶\$ 174,194. (Must equal Part IX, Line 25, column (B).)
<u> </u>	Form 990 (2008)

23-7071242

			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	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	 		
·	Out and the D. Dr. A.M.	8		X
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	 -		
8		ا م ا	l	X
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	1		
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, business,		ŀ	
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	Incated outside the United States? If "Yes," complete Schedule F, Part III	18	ļ	X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	\neg	X
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		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20		20	- +	X
	• • • • • • • • • • • • • • • • • • • •	21		$\frac{\ddot{x}}{x}$
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II			$\frac{x}{x}$
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	+	X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		İ	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			37
	ff "No", go to question 25	248		<u>X</u>
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	- [ĺ	
	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		<u> </u>
b	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		$-\uparrow$	
-•	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial		\dashv	
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
			90 (2	

		•	Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	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		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	ı	X
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	l	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	\Box		
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	- 1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	- 1	X

Form **990** (2008)

23-7071242 PRISONERS AND MISSING IN SOUTHEAST ASIA

			Yes	No
18	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	,		1.
	U.S. Information Returns. Enter -0 if not applicable	0		
b	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 gaming		4	4 .
	(gambling) winnings to prize winners?	10		X
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1	1 000	6.5
	filed for the calendar year ending with or within the year covered by this return	1 3	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2.4	\.	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	. 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		ļ	ļ
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a		X
þ	If "Yes," enter the name of the foreign country: ▶	. Ž		20 g
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and	+4g	7.	2
	Financial Accounts.	ع ا		;
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			ŀ
	Tax Shelter Transaction?		<u> </u>	
	Did the organization solicit any contributions that were not tax deductible?	6a		<u>X</u>
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	_6b	72072	
7	Organizations that may receive deductible contributions under section 170(c).			X
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required]		X
	to file Form 8282? !f "Yes," indicate the number of Forms 8292 filed during the year 7d	7c		
		e 2, 53.	مس نيد الدونية	\$2 <u>.</u>
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7e	.C.V.)}	X
f	benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	1		$\frac{x}{x}$
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		X
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	7.50	1 max	-1-
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have	13.50	, april	
	excess business holdings at any time during the year?	8		
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	10 - 50 J	, ž	· ~-
	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations, Enter: N/A	322	. ,,	v ,
	Initiation fees and capital contributions included on Part VIII, line 12	1 Post	، د ،	3 e (
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a		1	7-2 to 21	
a b				
a b 11 :	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
a b 11 :	Gross receipts, included on Form 990, Part VIII, fine 12, for public use of club facilities			
a b 11 : a : b :	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	一番でった		
a b 11 : a : b :	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			

23-7071242

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

Se	ction A. Governing Body and Management			,
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,	2 kg, - 27	-1T-	. ^
	processes, or changes in Schedule O. See instructions.	775%	To Fan	
18	Enter the number of voting members of the governing body 1a		3	, Š
b		华	3	₹
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	62		-
_	officer, director, trustee, or key employee?	2	 	X
3	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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	l _ i		v
	governing body?	7a		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	**************************************	100	·
	by the following:	£ E		.1.,
8	The governing body?	8a	X	
Ь	Each committee with authority to act on behalf of the governing body?	8b	X	77
9 a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	1	Į	
	and branches to ensure their operations are consistent with those of the organization?	<u>8b</u>		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	1 1		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	} }	- 1	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
Sec	tion B. Policies			
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	X
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	1	l	
	to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		}	
	in Schedule O how this is done	12c		47
	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	10 m C	X
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:	, April 2	"And	P()
	The organization's CEO, Executive Director, or top management official?	15a		- X -
þ	Other officers or key employees of the organization?	15b	-56°1	X
	Describe the process in Schedule O. (see instructions)			<u>-</u> 7
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	â	, 	ليَ
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		73.	. }
	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	, , <u>, , , , , , , , , , , , , , , , , , </u>	-#. (
	exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL, AZ, AR, CA, CT, FL, GA, IL, KS		ĿА,	MID
18	Section 6104 requires an organization to make its Forms 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 Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion: ►		
	ANN MILLS GRIFFITHS - 703-465-7432			
	1005 NORTH GLEBE ROAD STE 170 ARLINGTON, VA 22201			
32006 2-18-0	SEE SCHEDULE O FOR FULL LIST OF STATES	Form 9	90 (2	008)

Form 990 (2008)

PRISONERS AND MISSING IN SOUTHEAST ASIA

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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), 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours	(с		Pos k all			oly)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Kay emplayee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
PAM CAIN DIRECTOR		X						0.	0.	0.
DAVID GRAY JR DIRECTOR		X						0.	0.	0.
GAIL INNES DIRECTOR		X						0.	0.	0.
KAREN MCCMANUS TRESURER/DIRECTOR	<u> </u>	X	_	χ.	<u> </u>	 		Û.	Ũ.	Û.
SUE SCOTT DIRECTOR		X			L			0.	0.	0.
ANN MILLS GRIFFITHS EXECUTIVE DIRECTOR MARK STEPHENSEN	40.00	x	<u> </u>	х	X			88,722.	0.	0.
DIRECTOR JO ANNE SHIRLEY		x			_			0.	0.	0.
CHAIRMAN OF THE BOARD		х		X.				0.	0.	0.
				Ш						
										Form 990 (2008)

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Pa	rt VII Section A. Officers, Directors, Tru	ustees, Key E	mpl	oye	es, a	nd l	High	est	Compensated Employ	ees (continued)		
	(A)	(B)				C)			(D)	(E)	· (F)		
	Name and title	Average			Pos				Reportable	Reportabl		Estimated	
		hours	(c	hecl	k all	that	app	ly)	compensation	compensat		amount of	
		per week	į]					from the	from relate organizatio		other compensation	
		Week	i i				Di i		organization	(W-2/1099-M		from the	
			35 86	뚩			pensa		(W-2/1099-MISC)	(,	organization	
		1	토	igno jag	l	gby e	5 2	1				and related	
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	orme				organizations	
	·		ــــــــــــــــــــــــــــــــــــــ	_	Ľ	<u> </u>	Ξ.	ч					
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1b	Total		<i>ـــا</i>					,	88,722.		0.	0.	
2	Total number of individuals (including those	in 1a) who re	ceive	ed n	ore	tha	n \$1	00,0					
	compensation from the organization .	·						٠.	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u> </u>	() Yes No	
3	Did the organization list any former officer,	director or true	ctoo	kev	, em	nlov	/BB	or h	nighest compensated en	nnlovee on	ſ		
•	line 1a? If "Yes," complete Schedule J for si			,	10	ر ۲۰۰۰	, 00,	•	ng toot oo tiporioatoa on	p.0,00 0	ļ	3 X	
4	For any individual listed on line 1a, is the su			ompe	"· ensa	ition	and	oti	her compensation from t	the organization			
	and related organizations greater than \$150											4 X	
5	Did any person listed on line 1a receive or a									ces rendered to	, '		
	the organization? If "Yes," complete Schede					<u> </u>	_					5 X	
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest countries organization.	mpensated inc	depe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of cor	npensa	ation from	
	(A)								(B)			(C)	
	Name and business	address						İ	Description of s	ervices	C	ompensation	
								+					
								\perp					
								7				- 	
								+					
	Total number of independent contractors (ii	noludina thesa	ur 4	ام د ۱	10.55	2000	rod :	700	e than \$100 000 in com	nensation	- 7.5.		
	from the organization	0	, ,,, 1	, wr	.O 16	COIN	eu l	1101		porisauori	; ;	990 (2008)	

205,268

0.

Form 990 (2008)

832009 02-02-09 All other revenue _____ L
Total. Add lines 11a-11d ______

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

Part IX Statement of Functional Expenses

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

	All other organizations must comp				
Do 7b	o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	and and another the government and				
	organizations in the U.S. See Part IV, line 21	<u> </u>			
2					
	the U.S. See Part IV, line 22				F-11 - 17
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.			1	
	See Part IV, lines 15 and 16				20E014
4	Benefits paid to or for members		ļ	\$-0-20 Miles 12	北美國家學的
5	Compensation of current officers, directors,	00 700	05 172	2 540	
_	trustees, and key employees	88,722.	85,173.	3,549.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	2 600	3 550	140	
7	Other salaries and wages	3,698.	3,550.	148.	
8	Pension plan contributions (include section 401(k)	A 0.21	3,860.	161.	
_	and section 403(b) employer contributions)	4,021. 7,555.	3,860. 7,253.	302.	
9	Other employee benefits	1,555.	1,455.	302.	
10 11	Payroll taxes				
_	Fees for services (non-employees):				
8	Management				
b	Legal	1,000.		1,000.	
d	Accounting			1,000.	
u	Lobbying Professional fundraising services. See Part IV, line 17			*** * * * * * * * * * * * * * * * * *	
f	Investment management fees		-734	2,80	
-					
g 12	OtherAdvertising and promotion				
13		9,225.	8,858.	367.	
14	Office expenses Information technology	5,223.		307.	
15					
16	Royalties	29,318.	28,145.	1,173.	·
17	Occupancy	29,510.	20,143.	<u> </u>	
18	Travel				
	for any federal, state, or local public officials		į		
19	Conferences, conventions, and meetings	31,142.	28,028.	1,557.	1,557.
20	4-44	32,2220			
21	Payments to affiliates	·			
22	Depreciation, depletion, and amortization	333.		333.	
23	Insurance				
	Other expenses. Itemize expenses not covered		· · · · · · · · · · · · · · · · · · ·		
	above. (Expenses grouped together and labeled	, b	7.5 5.	7 - 7 2 4	
	miscellaneous may not exceed 5% of total expenses shown on line 25 below.)			4	
a	PROGRAM EXPENSE	3,021.	3,021.		
	STORAGE	2,353.	2,259.	94.	
c	LIABILITY INSURANCE	2,245.	2,155.	90.	
d	STATE REGISTRATION FEES	1,545.			1,545.
	PUBLIC AWARENESS	337.	334.		3.
	All other expenses	1,841.	1,558.	283.	
25	Total functional expenses. Add lines 1 through 24f	186,356.	174,194.	9,057.	3,105.
	Joint Costs. Check here if following				
	SOP 98-2. Complete this line only if the organization	j	ļ	J	
	reported in column (B) joint costs from a combined		ł		
	educational campaign and fundraising solicitation .				
	sassanonai wimpayin ana iununaomy somonaudit .				Form QQQ (2008)

832010 12-18-08

	P	art X	Balance Sheet						
2 Savings and temporary costs investments								End of year	
2 Savings and tamporary cash investments 2 3 Pidigas and grants receivable, net 922 4 3,632 4 Accounts receivable, net 922 4 3,632 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties, Complete Part I of Schedule L 5 6 Receivables from current can dispusified persons (as defined unter section 4958(f)(1)) and persons described in section 4958(c)(3)(6). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 7 8 Prepated expenses and deferred charges 9 Prepated expenses and deferred charges 9 Prepated expenses and deferred charges 9 Prepated expenses and deferred charges 10s 9,7549 10s 11 Prestremstra- publicly traded securities 10s 9,549 11 Prestremstra- publicly traded securities 10s 9,549 11 Prestremstra- publicly traded securities 11 11 11 12 13 11 Prestremstra- publicly traded securities 11 11 11 12 13 11 11 11		1	Cash - non-interest-bearing			11,062.	í	20,1	12.
Prepare of Sender of Send		2					2		
4 Accounts neckwholes from current and former officers, directors, trustees, key employees, or other related parties, Complete Part I of Schedule L 6 Receivables from orther disqualified persons (as defined under section 4958(I(1)) and persons described in section 4958(I(1)) and persons described in section 4958(I(1)) and persons described in section 4958(I(1)). Complete Part II of Schedule L 7 Notes and loans receivable, net 10 Inventional or section 4958(I(1)). Complete Part II of Schedule D 10 Prepated deparesses and deferred charges 10 Prepated deparesses and deferred charges 10 Prepated expenses and deferred charges 10 Prepated in Part V of Schedule D 11 Investments - publicly traded securities 11 Investments - program-related. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Infragible assets 15 Other assets. See Part IV, line 11 16 Total seasets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 106, 275 . 17 107 , 781. 18 Grants payable 19 Deferred reverue 20 Tax exempt bond liabilities 20 Deferred reverue 21 Exerce vaccount liability. Complete Part IV of Schedule D 22 Exerce vaccount liability. Complete Part IV of Schedule D 23 Total liabilities and notes payable to unrelated thrut parties 24 Unrestricted net assets 25 Unrestricted net assets 26 Unrestricted net assets 27 Total liabilities. Add lines 17 through 25 28 Total liabilities and notes payable to unrelated thrut parties 29 Permanently restricted not assets 20 Organizations that do not follow SFAS 117, check here Variety V		3							
Figure 2 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Compiler Part II of Schedule L Figure 3 Receivables from other disqualified persons (as defined under section 4858(c)(3)(6), Compiete Part II of Schedule L Rottes and loans receivable, nat Prepaid expenses and deferred charges Person of the compiler of the comp		4					4	3,6	32.
8 Receivables from other disqualified porsons (as defined under section 4958(c)(3)(8), Complete Part II of Schedule 1. 7 Notes and leasn receivable, not 7 Notes and leasn receivable, not 7 Notes and leasn receivable, not 8 Notes and leasn receivable, not 9 Prepald expenses and deferred charges 9 Note 10e Land, buildings, and equipment: cost basis 10e 1. 97, 549 10e Land, buildings, and equipment: cost basis 10e 1. 97, 549 11 Investments - publicly traded securities Part VI of Schedule D 0. 10b 8, 958. 924. 10c 591. 11 Investments - publicly traded securities Part VI of Schedule D 1. 11 12 Investments - publicly traded securities Part VI of Schedule D 1. 11 13 Investments - proprietied See Part IV, line 11 14 Intrangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 3d) 12, 908. 18 13 33, 326. 17 Accounts payable and accrued expenses 106, 275. 17 107, 781. 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Tax-exempt bond liabilities 20 22 Payables to current and former officers, dischorts, rustless, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schodule D 22 Payables to current and former officers, dischorts, rustless, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schodule D 22 Payables to current and former officers, dischorts, rustless, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schodule D 22 Payables to current and former officers, dischorts, rustless, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schodule D 22 Payables to current and seed to prepare the Form 990:		5							
### ### ### ### ### ### ### ### ### ##			employees, or other related parties. Complete I	Part II o	of Schedule L		5		
4958(B)(1) and persons described in section 4958(c)(S)(B). Complete Part It of Schedule I Part It of Schedule		6	Receivables from other disqualified persons (as	define	ed under section		,	- 1	400
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Inventories for sale or use 8 8 8 9.91.	13	7	Notes and loans receivable, net				7	,	
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b If "Yes," did the organization undergo the required audit or audits?		Act an	nd OMB Circular A-133?					3a	<u>X</u>
	Ь	If "Yes						3b	

SCHEDULE A (Form 990 or 990-EZ)

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.

2008
Open to Public Inspection

Name of the organization

NATIONAL LEAGUE OF FAMILIES OF AMERICAN PRISONERS AND MISSING IN SOUTHEAST ASIA

Employer Identification number

		11(1001)	DIO INO MIDO					**		J / U / .		
Part I	Reasor	for Public Cha	arity Status (All organ	nizations m	ust compl	ete this pa	art.) (see in	structions	3)			
The orga	nization is not	t a private foundation	n because it is: (Please o	check only	one organ	ization.)						
1 🖳	A church, c	onvention of church	es, or association of chu	urches des	cribed in s	ection 17	O(b)(1)(A)((i).				
2	A school de	escribed in section 1	170(b)(1)(A)(II). (Attach S	Schedule E	.)							
3	A hospital o	or a cooperative hosp	pital service organizatior	n described	i in sectio	n 170 (b)(1) (A)(iii). (A	ttach Sch	edule H.)			
4	A medical r	esearch organization	n operated in conjunction	n with a ho	spital des	cribed in s	ection 17	O(b)(1)(A)	(iii). Enter 1	the hospita	ıl's nar	ne,
	city, and sta	ate:										
5	An organiza	tion operated for the	e benefit of a college or i	university o	wned or c	perated b	y a govern	rmental u	nit describ	ed in		
	section 17	0(b)(1)(A)(iv). (Comp	olete Part II.)									
6	A federal, st	ate, or local governr	ment or governmental ur	nit describe	ed in secti	on 170(b)	[1)(A)(v).					
7 X			ceives a substantial par					or from th	e general i	public des	cribed	in
	section 170	(b)(1)(A)(vi). (Compl	lete Part II.)	•	•	•						
8 🗔			section 170(b)(1)(A)(vi).	. (Complete	e Part II.)							
9 🗀			ceives: (1) more than 33			from cont	ributions, i	membersh	nip fees, ar	nd gross re	ceipts	from
		=	unctions - subject to cert		• •				-	-		
			taxable income (less sec	-		-						
		509(a)(2). (Complet			•		•					
10 🔲			perated exclusively to te	est for pub	lic safety.	See secti	on 509 (a)(4). (see in	structions))		
11 🔲		_	perated exclusively for t		-						of one	or
		=	ations described in sect		-				-			
	describes the type of supporting organization and complete lines 11e through 11h.											
	а 🔲 Туре		-	с 🔲 Тур	_		tegrated		d 🔲	Type III - 0	Other	
e 🗀	By checking	this box, I certify the	at the organization is no	t controlled	d directly o	r Indirecti	y by one o	r more dis	qualified p	persons oth	ner tha	ın
		-	than one or more public		-							
f		=	itten determination from	• • •	•						• • • •	
		organization, check t			•	• • • • • • • • • • • • • • • • • • • •						
9		-	organization accepted a						sons?			
	•		directly controls, either a			-					Yes	No
			supported organization?	_								
			n described in (1) above?									
			person described in (i)									
h			about the organizations							• [
				g								
(I) Name	of ourserted	(11) (11)	(iii) Type of	(iv) is the	organization	(v) Did vo	u notify the	(yi) is	the	(edl) Arm		
	of supported inization	(II) EIN	organization		sted in your		ion in col	l organizati	an in col. I	(vii) Am supi		
o. gc			(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S	.?	Jupi	,,,,,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

NATIONAL LEAGUE OF FAMILIES OF AMERICAN

Schedule A (Form 990 or 990-EZ) 2008 PRISONERS AND MISSING IN SOUTHEAST ASIA 23-7071242 Page 2

Support Schedule for Organizations Described in Sections 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.) Section A. Public Support Calendar 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.") 183,541. 207,684. 192,837. 178,315 762,377. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 183.541 207,684. 192,837. 178.315 762,377. 4 Total. Add lines 1 - 3 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) 6 Public Support. Subtract line 5 from line 4 762,377. Section B. Total Support (f) Total 762,377. (c) 2006 (e) 2008 Calendar year (or fiscal year beginning in) (d) 2007 (a) 2004 (b) 2005 192,837. 178,315 183,541 207,684 7 Amounts 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 from the sale of capital 15,233 15,233. assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 ·李扬477至187 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 98.04 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 100.0015 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright [X]$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

						<u> </u>
Catendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and		T]			
membership fees received. (Do not				ľ		
include any "unusual grants.")		ł	ł	i i		
2 Gross receipts from admissions, 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 bus-					}	
4 Tax revenues levied for the organ-						
ization'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 Amounts included on lines 1, 2, and 3 received from disqualified persons						
D 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						
c Add lines 7a and 7b						
		14 T. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T. S. T.		774 25 256 7 3	PANT PER ANN	
ection B. Total Support						
alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Amounts from line 6						
Da 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 June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
Total support (Add lines 9, 10c, 11, and 12)	der, endringen der der Forest foreigne	mark Art on M	學"這一學三世學	GTAL 1984年上北京的14	端(这次外接	
First five years. If the Form 990 is for th						ion,
check this box and stop here			<u> </u>	<u></u>	<u></u>	▶∟_
Public support percentage for 2008 (line			olumn (f))	11	5	
Public support percentage from 2007 Sc		•		·	6	9
ection D. Computation of Investr			<u></u>			
Investment income percentage for 2008			e 13, column (f))	1	7	9
Investment income percentage from 200	-			· · · · · · · · · · · · · · · · · · ·		9
ia 33 1/3% support texts • 2LLB. It the or						
a 33 1/3% support tests - 2008. If the org			iae ae a nuhliciv si	innorted organizati	on	▶
more than 33 1/3%, check this box and b 33 1/3% support tests - 2007. If the org	stop here. The janization did n	organization qualif ot check a box on	line 14 or line 19a,	and line 16 is more	than 33 1/3%, and	P L
	stop here. The panization did n this box and st	organization qualif ot check a box on op here. The organ	line 14 or line 19a, nization qualifies as	and line 16 is more s a publicly support	than 33 1/3%, and ed organization	▶□ d ▶□

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.

2008
Open to Public

Name of the organization

NATIONAL LEAGUE OF FAMILIES OF AMERICAN PRISONERS AND MISSING IN SOUTHEAST ASIA

Employer Identification number 23-7071242

Pa	organizations Maintaining Donor Advise		is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or		
Pa	rt: Conservation Easements. Complete if the org		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or pl	' <u></u>	istorically important land area
	Protection of natural habitat	Preservation of certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conse	ervation contribution in the form of a co	nservation easement on the last day
	of the tax year.		
			Held at the End of the Year
a	a Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	c Number of conservation easements on a certified historic structure included in (a)		
d	Number of conservation easements included in (c) acquired a	2d	
3	Number of conservation easements modified, transferred, rela	eased, extinguished, or terminated by th	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, violations, a	and
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, an		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	tell Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line 8.	<u> </u>
1a	If the organization elected, as permitted under SFAS 116, not		
	treasures, or other similar assets held for public exhibition, edu		iblic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these ite		
b	If the organization elected, as permitted under SFAS 116, to re		
	or other similar assets held for public exhibition, education, or $% \left\{ 1,2,\ldots ,n\right\}$	research in furtherance of public service	e, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 110	6 relating to these items:	
	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		▶ \$

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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

NATIONAL LEAGUE OF FAMILIES OF AMERICAN PRISONERS AND MISSING IN SOUTHEAST ASIA 23-7071242 Page 2 Schedule D (Form 990) 2008 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included Yes ☐ No on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance d Additions during the year ______ 1d Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Part V. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (a) Current year (b) Prior year (e) Four years back **非现代公司** 1a Beginning of year balance **b** Contributions ar an ann an an an c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No by: [3a(i) (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds. Part VIII Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (b) Cost or other (c) Depreciation (d) Book value (a) Cost or other basis (investment) basis (other)

Schedule D (Form 990) 2008

 $\frac{591.}{591.}$

8,958.

9,549.

1a Land
b Buildings
c Leasehold improvements
d Equipment

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).

NATIONAL LEAGUE OF FAMILIES OF AMERICAN Schedule D (Form 990) 2008 PRISONERS AND MISSING IN SOUTHEAST ASIA 23-7071242 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives and other financial products ... Closely-held equity interests Other Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description Total. (Column (b) should equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25. (b) Amount (a) Description of liability Federal income taxes

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NATIONAL LEAGUE OF FAMILIES OF AMERICAN

	dule D (Form 990) 2008 PRISONERS AND MISSING IN SC					071242	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<u>Finar</u>	ncial Stat	temer	nts ,		244
1	Total revenue (Form 990, Part VIII, column (A), line 12)				·	.205,	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		186,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		18,	912
4	Net unrealized gains (losses) on investments			4			
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			0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10		18.	912.
	XII Reconciliation of Revenue per Audited Financial Statemen			1	er Return		
1	Total revenue, gains, and other support per audited financial statements	100 11		пао р	1 1	605,	391.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•••		•••			
	Alabama allegation de la companya de	2a			م کی ۔		
b	Described condess and conservations	2b	40	0,12	23 5		
		20 2c		0,11			
	Recoveries of prior year grants				- -17:31		
	Other (Describe in Part XIV)	2d			- 35	400,	1 2 2
	Add lines 2a through 2d				. 2e	205,	
	Subtract line 2e from line 1	••••			3	<u> </u>	400.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
	Investment expenses not included on Form 990, Part VIII, line 7b	4a_			 > √5,4		
	Other (Describe in Part XIV)	4b					•
							0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		 	<u></u>	. 5	205,2	<u> 268.</u>
	XIII Reconciliation of Expenses per Audited Financial Statemen				per Return		150
	Total expenses and losses per audited financial statements				1	586,4	1/9.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
	Donated services and use of facilities	2a	40	0,12	23.		
b	Prior year adjustments	2b					
C	Losses reported on Form 990, Part IX, line 25	2c					
ď	Other (Describe in Part XIV)	2d					
е .	Add lines 2a through 2d				2e	400,1	
3	Subtract line 2e from line 1				. 3	186,3	<u> 356.</u>
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				in in		
a I	nvestment 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.
5	otal expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)				5	186,3	56.
	XIV Supplemental Information						
-	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, I XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	ines 18	and 4; Par	TIV, IIn	es 10 and 20;	Part V, line 4,	
				_			
_							
		<u> </u>					-
_					Schedule	D (Form 990)	2008

SCHEDULE O (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

Name of the organization

NATIONAL LEAGUE OF FAMILIES OF AMERICAN PRISONERS AND MISSING IN SOUTHEAST ASIA

Employer identification number 23 – 7071242

PRISONERS AND MISSING IN SOUTHEAST ASIA 23-7071242
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
REPATRIATION OF ALL RECOVERABLE REMAINS OF THOSE WHO DIED SERVING OUR
NATION DURING THE VIETNAM WAR IN SOUTHEAST ASIA.
FORM 990, PART VI, SECTION A, LINE 10: THE TREASURER COMPARES THE FIGURES
TO THOSE ON THE ORGINIZATION'S INTERNAL STATEMENTS AND TO THE CERTIFIED
AUDITED STATEMENT.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AZ, AR, CT, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, NJ, NY, NC, OH, OK, PA, SC, VA, WA, WV, WI
FORM 990, PART VI, SECTION C, LINE 19: THE LEAGUE'S GOVERNING DOCUMENTS,
CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON
REQUEST TO THE LEAGUE OFFICE. IN ADDITION, FINANCIAL STATEMENTS ARE
AVAILABLE ON WEBSTIRES OF THOSE STATESIN WHICH THE LEAGUE IS REGISTERED TO
SOLICIT FUNDS AND ARE DISTRIBUTED BY MAIL - IN THE FORM OF AN ANNUAL REPORT
- TO ALL LEAGUE MEMBERS, AS WELL AS GIVEN TO ALL ATTENDEES OF THE LEAGUE'S
ANNUAL MEETING.
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FOOTNOTES

STATEMENT