

Form **990**

Return of Organization Exempt From Income Tax Under section 601(c), 627, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

25/01/2011

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Activities											••				****		••• ••	•	"" F	_				
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Revenue		Program e			-	-		-							····	2.	55	4.	220	12		2,3		
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	13	Grants an	nd at	miler.	amoun	its pai	id (Per	rt IX, c	colume	ı (A), İ	lines 1	3)					26	8,	386	5.		1:	15,3	94.
	14	14 Benefits paid to or for members (Part IX, column (A), line 4)												Т			-							
_		Salaries, d															26	7.	308	3.		2!	59.8	43.
8		Profession																		1				
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A		Total fund											44	, 3	04. 🎮			**************************************			<u> </u>	•		77
_	17	Other exp	XON 9	300 (P)	art IX,	COLUT	10 (A),	ines :	11 a- 11	ld, 11	11-241)	*******			· _				164					77.
	18	Total exp	enac	18. Ar	td Unes	ı 13·1	7 (mur	at equ	ud Per	t IX, c	nmulos	(A), line	25)		<u>L</u>	2,			858					14.
	19	Revenue	loca	eXD1	nses. I	Subtr	act lin	• 18 f	irom ilr	10 12				**	.		89)7,	169).		72	28,4	67.
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ASSOCIATION FOR BETTER LIVING & EDUCATION INTERNATIONAL

Form	990 (2009) EDUCATION INTERNATIONAL	95-4188814	Page 2
	Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:		
·	TO RID THE WORLD OF DRUG ABUSE, CRIME, ILLITERACY & IM	MORALITY	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ7	Yes	X No
	If "Yes," describe these new services on Schedule O.	_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	96? Yes	X No
	ff "Yes," describe these changes on Schedule O.		
4	Describe the exampt purpose achievements for each of the organization's three largest program services by	-	
	Section 501(c)(3) and 501(o)(4) organizations and section 4947(a)(1) trusts are required to report the amount	of grants and	
	eflocations to others, the total expenses, and revenue, if any, for each program service reported.	- 4 - 4	
	SEE SCHEDULE O FOR CONTINUATION		011
4a			RII.)
	ASSISTANCE TO SOCIAL BETTERMENT CORPORATIONS: ABLE IN		
	CARRIES OUT ITS MISSION TO REVERSE THE SOCIAL DECAY THE		OUR
	SOCIETY BY PROMOTING AND ASSISTING THE FOLLOWING SOCIA		
	PROGRAMS OF FOUR AFFILIATED TAX-EXEMPT CHARITABLE AND	EDUCATIONAL	
	ORGANIZATIONS:		
	- LITERACY & EDUCATION, CONDUCTED BY APPLIED SCHOLASTI		
	- MORALITY & VALUES, CONDUCTED BY THE WAY TO HAPPINESS		NT'L
	- DRUG REHAB & DRUG ABUSE PREVENTION, CONDUCTED BY NAF		
	- CRIMINAL REHABILITATION, CONDUCTED BY CRIMINON INT'I		
	ABLE ASSISTS THESE ORGANIZATIONS BY HELPING THEM DEVEL		
	AND EXPAND EXISTING PROGRAMS; PREPARE, PUBLISH AND DIS	SEMINATE THEI	R
	(CONTINUED ON SCHEDULE O)		
45)
	MATERIALS COMPILATIONS AND PUBLICATIONS: ABLE INTERNAL		
	MATERIALS FOR BROAD DISTRIBUTION BOOKS AND OTHER MATER		
	TO HAPPINESS TEEN INTERVENTION PROGRAM WORKBOOK AND THE		WAI
	HAPPINESS CHILDREN'S VERSION AS WELL AS THE COMPILATION		TDC .
	HAPPINESS INFORMATION KITS.	IAW OF THE WAI	10
	MAPPINESS INFORMATION KIIS.		
	ABLE ASSISTED APPLIED SCHOLASTICS IN ITS PUBLICATION O	OF 5 NEW	
	EDUCATIONAL TITLES AND IN THE TRANSLATION 10 TITLES IN		OF
	THE FOLLOWING LANGUAGES: URDU, FRENCH, INDONESIAN, ARI		<u>Or</u>
	INDONESIAN AND VIETNAMESE; PUBLISHED THREE TITLES FOR		
	(CONTINUED ON SCHEDULE O)	***************************************	
40		(Revenue \$	
	PUBLIC INFORMATION ON THE SOLUTION TO SOCIETAL ILLS) \$ m railes \$	•
	ABLE INTERNATIONAL ASSISTED THE WAY TO HAPPINESS FOUND	DATION	
	INTERNATIONAL TO DISTRIBUTE 21,600 COPIES OF THE WAY		_
	INFORMATION KIT IN RESPONSE REQUESTS OFF ITS WEBSITE A		HER
	VENUES AND IN DISTRIBUTING THE THE WAY TO HAPPINESS PU		
	ANNOUNCEMENTS TO 224 TELEVISION STATIONS ACROSS THE UN		ND
	INTERNATIONALLY WITH A TOTAL VIEWERSHIP OF 852 MILLION		
	ABLE ASSISTED CRIMINON INTERNATIONAL IN ESTABLISHING A		
	CRIMINON INTERNATIONAL; AND IN PROMOTING THE CRIMINON		
	OUTCOME STUDIES OF ITS ON-SITE CRIMINAL REHABILITATION		
	PRISONS RESULTING IN CRIMINON PROGRAMS BEING PROVIDED		
_	(CONTINUED ON SCHEDULE O)		
4d	Other program services. (Describe in Scheduts O.)		
	(Expenses \$ Including grants of \$) (Revenue \$	l	
40	Total program service expenses ▶\$ 1,937,577.		
		Form 9	90 (2009)

	990 2009) EDUCATION INTERNATIONAL 95-418	<u>8814</u>	<u> </u>	ege 3
illian.	Checklist of Required Schedules			
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u>L</u>
2	la the organization required to complete Schedule S, Schedule of Contributors?	2	X.	
3	Did the organization engage in direct or incirect political compaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	l	X
4	Section 501(c)(2) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C. Part II	4		X
5	Section 501(a)(4), 501(a)(5), and 501(a)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	If the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to oxide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II the organization receive or hold a conservation essement, including essements to preserve open space, environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. If the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete shedule D, Part III. If the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide add counseling, dabt management, cradit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. If the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? Yes," complete Schedule D, Part V. The organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, IX, or X applicable. If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, or IV. If the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total sets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			1
6	d the organization engage in direct or indirect political campaign autivities on behalf of or in opposition to candidates for bible office? If "Yes," complete Schedule C, Part I Inciden 601(c)[3] organizations. Did the organizations engage in lobbying activities? If "Yes," complete Schedule C, Part II lottion 601(c)[4], 601(c)[5], and 601(c)[6] organizations is the organization subject to the section 6033(e) notice and conting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
	ovide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I di the organization receive or hold a conservation essement, including essements to preserve open space, a environment, historio land areas, or historio structures? If "Yes," complete Schedule D, Part II			X
7		6		
-	id the organization receive or hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? If "Yee," complete Schedule D, Part II			X
8	• • • • • • • • • • • • • • • • • • • •	7	1	
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•	•		4)	
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		\$1. #	
	assets reported in Part X, line 187 // "Yes," complete Schedule D, Part VIII.	0,000		
•	Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments - program related in Part X, line 13 that is 6% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 16 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		2	
	Part X, line 167 If "Yes, " complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 26? If "Yee," complete Schedule D, Part X.	2.3	1.46	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's fiability for uncertain tax positions under FIN 487 if "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent suclited financial statements for the tax year? If "Yes," complete		e Chine	
	Schedule D, Parte XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?		eri terreggere Kalandariya	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	. 13	Ī	X
14=	Did the organization maintain an office, employees, or agents outside of the United States?	140	X	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		1	
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	145	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			1
-	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	·	1	
••	located outside the United States? If "Yes," complete Schedule F, Part III	. 18	1	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralising services on Part IX,	· 💾	1	†
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		1	X
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on Part VIII, lines	· 17	+	+~
	10 and 8e? If "Yes," complete Schedule G, Part II	18	1	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"	10	+	┿
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20 Did the organization operate one or more hospitale? If "Yes," complete Schedule H

	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	1 1		
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
Z	Did the organization enswer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a texrescental bond issue with an outstanding principal amount of more than \$100,000 as of the			
	lest day of the year, that was lesued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
Þ	Did the organization invest any proceeds of tex-exampt bonds beyond a temporary period exception?	24b	<u>'</u>	
C	Did the organization maintain an secrow account other than a refunding secrow at any time during the year to defease			
	any terrestampt bonds?	24c		Щ
đ	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25e	Section 601 (c)(3) and 501 (c)(4) organizations. Dic the organization engage in an excess benefit transaction with a	1		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ь	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		j
	Schedule L. Pert I	25b		X
25	Was a losn to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			i
	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, substantial		1	ŀ
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	İ	1	
	Schedule L, Pert III	27	*****	X
26	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	1000		
	Instructions for applicable filing thresholds, conditions, and exceptions):	04.4.5		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
0	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			l
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yee," complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of crt, historical tressures, or other similar assets, or qualified conservation	1	[
	contributions? If "Yes," complete Schedule M ,	30		X
31	Did the organization liquidate, terminate, or dissolve and ocean operations?		•	l
	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		1	l
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		l	1
	sections 301.7701-2 and 301.7701-37 // "Yes," complete Schedule R, Part I	33	╙	X
34	Was the organization related to any tax-exempt or taxable entity?		ĺ	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?		l	
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(5) organizations. Did the organization make any transfers to an exampt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, Ene 2	36	Щ.	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	—	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197	l		
	Minte, All Form 990 files are required to complete Scherbile O	38	l X	1

Form	EDUCATION INTERNATIONAL		95-4	<u> 18881</u>	<u> </u>	aga 5
			* = .		Yes	No
10	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1				
	U.S. Information Returns, Enter O if not applicable	1a		21		
ь	Enter the number of Forms W-2G included in line 1s. Enter -0- if not applicable	1b		0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	bie gaming	200	in the second	
•	(gambling) winnings to prize winners?			10		
9a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	l Ì			រុំសារ	
	filed for the calendar year ending with or within the year covered by this return	2a		29	El mil	
	If at least one is reported on line 2s, did the organization file all required federal employment tax retu	ma?	<u> </u>	2h	X	
•	Note. If the sum of lines 1e and 2e is greater than 250, you may be required to e-file this return. (see		otions)			
94	Did the organization have unrelated business gross income of \$1,000 or more during the year covere		•	30	*********	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	,, o, v	ing rocuiti	. 3b	 	<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other	outhor			†	1
	financial account in a foreign country (such as a bank account, securities account, or other financial		•	. 48	x	
	If "Yes," enter the name of the foreign country: DCANADA, DENMARK, UNITED I					
•	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign			—		
	Francial Accounts.	Dentity 4	H.O.			
-	Was the organization a party to a prohibited tax shalter transaction at any time during the tax year?			Se.		X
	Was the organization a party to a promoned tax animits transaction at any time during the tax year. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			Sb	1	X
	If "Yes," to line 5e or 5b, did the organization that it was or a a party was promoted tax another trans-		***************************************	1 20	 -	+~
0	Yes Shalles Tonorestand	mond	PHONEOTEO			ł
-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	····		<u> </u>	+	┼─
68	many many filtred from the strong many from the strong from the filtred	_				x
	any contributions that were not tax deductible?			<u>8</u>	+	 ^
D		HOUSE C	er ginus	۰	ŀ	
_	were not tex deductible?	•• ••		. 61		\$ 00000 m200
	Organizations that may receive deductible contributions under section 170(c).			000000	i i i i i i i i i i i i i i i i i i i	320, 4, 500
•	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	Goods	i and services	١		x
_	provided to the payor?	••• •••		· - <u>7-</u>		<u> </u>
	If "Yee," did the organization notify the donor of the value of the goods or services provided?			<u>71</u>	+	┼
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was the first series.	ves rec	hited		1	l x
	to file Form 82827	1	<i>i</i>	7c		A Water
		7d				
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	berson	val			
_	benefit contract?		**** *******	74		X
1	Did the organization, during the year, pay premiume, directly or indirectly, on a personal benefit conf			77	_	
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		• • • • • • • • • • • • • • • • • • • •	. <u>. 79</u>	_	┼—
h	For contributions of care, boats, similance, and other vehicles, did the organization file a Form 1098-			. 71:	00 (0.00,000)) 28. assat
8	Sponsoring organizations maintaining donor advised funds and section 500(a)(3) supporting or	_		333		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc	3838 pr	usiness holdin	- [
_	at any time during the year?			8	eccusional disc	5 000 00 000 O
9	Sponsoring organizations maintaining donor advised funds.					
•	Did the organization make any taxable distributions under section 49667		•••		Ц	↓
ь	Old the organization make a distribution to a donor, donor advisor, or related person?	*****	••	01) ::::::::::::::::::::::::::::::::::::	a 200/0000000
10	Section 501(c)(7) organizations. Enter:	1				
•	Initiation fees and capital contributions included on Part VIII, line 12	10a	 			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1			
11	Section 501(c)(12) organizations. Enter:		i	<u> </u>		
	Grose income from members or shareholders	11a		<u>``</u>		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1.		4 3 3	11	and the
	amounts due or received from them.)	111	<u> </u>			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fleu of Form		l .	12	CAL SECOND OF	
b	If "Yes," enter the amount of two-exempt interest received or ecorued during the year	125	<u> </u>	0,440		ii
				For	m 99 0	(2009)

ASSOCIATION FOR BETTER LIVING &

EDUCATION INTERNATIONAL

95-4188814 Page 6

Form 990 (2009) EDUCATION INTERNATIONAL 95-4188814 Page
Governance, Management, and Disclosure For each "Yee" response to fines 2 through 7b below, and for a "No" response to fine 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See Instructions.

Sec.	tion A. Governing Body and Management						
			•			Yes	No
18	Enter the number of voting members of the governing body	10		3			
Ь	Enter the number of voting members that are independent	115		2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p wii	h eny other				
	officer, director, trustee, or key employee?				2	X	
3	Did the organization delegate control over management duties customerily performed by or under the	te dir	ect supervisio	ın İ		1	
	of officers, directors or invateos, or key employees to a management company or other person?				3		X
4	Did the organization make any aignificant changes to its organizational documents since the prior Fo	S 1111C	90 was filed?	****	4		X
8	Did the organization become aware during the year of a material diversion of the organization's ease	ts?			6		X
6	Does the organization have members or stockholders?	•••			6		X
70	Does the organization have members, stockholders, or other parsons who may elect one or more m	embe	ers of the				
	governing body?				78_	X	
b	Are any decisions of the governing body subject to approval by mambers, stockholders, or other pe	reon!	s?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durt	ng the year				
	by the following:						
	The governing body?				8a	X	
Þ	Each committee with authority to act on behalf of the governing body?			••	8b	X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ache	d at the				
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	******	**********		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the internal F) a vav	tue Code.)				
						Yee	No
	Does the organization have local chapters, branches, or affiliates?		*****	***** **	10e	X	
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such	oha	pters, affiliate:	B.,			
	and branches to ensure their operations are consistent with those of the organization?	**			10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before	illing	the form?	***	11	X.	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
1 2 a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
Ь	Are officers, directors or trustage, and key employees required to disclose annually interests that co	uld g	ive rise				
	to conflicts?				12b	X	
0	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes	," describe				
	In Schedule O how this is done				120	X	
13	Does the organization have a written whistleblower policy?			••••	13	X	<u> </u>
14	Does the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approv	ral by	independent			0.4	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision						
	The organization's CEO, Executive Director, or top management official			*******	15a	X	
Þ	Other officers or key employees of the organization				16b	X	
	If "Yes" to line 15e, or 15b, describe the process in Schedule O. (See instructions.)						
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	HILBIT	t with a				
	taxable entity during the year?		***** ***** ****		16e	*******	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to ever			ilon			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org						
	exampl status with respect to such amandements?		131111111111111111		16b		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶CA						
18		T (50	1(c)(3)a only)	evalistie	for		
	public inspection. Indicate how you make these available. Check all that apply.						
45	Own website Another's website X Upon request	_					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	confi	ict of interest	policy, 🖴	nd fine	ncial	
	statements available to the public.			_	~		
20	GWENDA BYRNE - 323 960-3530	end n	ecords of the	organiza	tion: P	_	
_	7065 HOLLYWOOD BLVD., LOS ANGRLES, CA 90028				_		

Page 7

Form 990 (2009) Earth Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

- to Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's text year. Use Schedule J2 if additional apace to needed.
- List all of the organization's current officers, directors, trustees (whather individuals or organizations), regardless of amount of compensation. Enter O in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current law employees. See instructions for definition of "lay employee."
- List the organization's five correct highest compensated employees (other than an officer, director, trustes, 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.

Check this box if the organization did not or (A) Nume and Title	(B) Average hours	(C) Position (check all that app						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated emount of
	per week	ACHIEN BURNE OF CREEK	bufteleni trabe	- T- T- T- T- T- T- T- T- T- T- T- T- T-	lity entities	Hotest componented employee	Rome	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
CATHERINE SHEA WHITTLE TRUSTEE/DIR	40.00	x						4,392.	0.	0.
RICHARD FEAR DIRECTOR	0.00	Г						0.	0.	0.
GREG HUGHES DIRECTOR	0.00	X		_	L		_	0.	0.	0.
LAURIE ZURN DIRECTOR DON CUNNINGHAM	40.00	X		_	_	L		3,445.	0.	0.
TRUSTEE DEBORAH HUGHES	0.00	x	L	_	L	_		0.	0.	0.
TRUSTEE PAUL NOLAN	0.00	X		L	-	L		0.	0.	0.
TRUSTEE SCOTT WALDROFF	0.00	x		L	L	L	_	3,394.	0.	0.
TRUSTEE TINA NOESKE	0.00	X		├	┡	┡	\vdash	0.	0.	0.
DIRECTOR JIM MORROW	0.00	X	┡		╀	┝	\vdash	0.	0.	0.
DIRECTOR RENA WEINBERG	0.00	X	-	-	├	┝	_	0.	0.	_0.
PRESIDENT GWENDA BYRNE	40.00	_	-	X	┝	┢		3,428.	0.	0.
SECRETARY JOAN TOPIL	40.00	┞	\vdash	X	\vdash	┝	┞	4,102.	0.	0.
TREASURER BOB ADAMS	40.00		\vdash	<u>x</u>	Т	┢	-	4,354.	0.	0.
VICE PRES RUBINA QURESHI VICE PRES	0.00	_	┢	X	Г	十	-	0.	<u> </u>	0.
VICE FREE	0.00			Ā		T		3,916.	0.	0.

ASSOCIATION FOR BETTER LIVING & EDUCATION INTERNATIONAL

	890 (2009) EDUCATION									95-41	1888	14 Page 8
	Section A. Officers, Directors, Tru		nple	704			ligh	est				
	(A)	(B)			7) Pos	3) 			(D) Reportable	(E) Reportable		(F) Estimated
	Name and title	Average hours	 (c)		ros (all i			M	compensation	compensatio		emount of
		per	<u> </u>				1	Ϊ	from the	from related		other compensation
		wook	nchitastasse of Cress				1		organization	(W-2/1099-MIS	-	from the
					ĺ	ı			(W-2/1099-MISC)			organization
		İ		1		ł	ijį	1				and related organizations
			E	E	8	ľ	51	P		<u></u> _		
			<u> </u>	┝	├-	-	├	┡	 			
											-	
					Γ			Г				
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<u>1þ</u>	Total					•••	▶		27,031.		0.	0
2	Total number of individuals (including but r	roi limited to t	hose	list	ed a	pov	e) w	ho r	received more than \$10	0,000 in reportab	ie	
	compensation from the organization				_	_						Yes No
3	Did the organization list any former officer	director or tru	Jate	e, ke	ıy az	nok	7700	or l	highest compensated e	mployee on		
	line 1a? If "Yes," complete Schedule J for a			•	•	•	•				[3 X
4	For any inclvidual listed on line 1a, is the s											
	and related organizations greater than \$15										🌡	4 X
5	Did any person listed on line 1a receive or the organization? If "Yes," complete Sched											5 X
800	tion B. Independent Contractors				7,11	*1111)	шщ		***************************************			
1	Complete this table for your five highest or	empensated in	qeb	end	ent (cont	ract	ore	that received more than	\$100,000 of con	npense	tion from
	the organization. NONE							_				
	(A) Name and business	addres							(B) Description of	services	O:	(C) empensation
_									- <u> </u>			
		· · · · · ·			_							
												
_											—	
2	Total number of Independent contractors	including but	not l	init	ed to			lste	d above) who received i	more than		
	\$100,000 in compensation from the organ	bretton 🕨					0				Shirt date	

ASSOCIATION FOR BETTER LIVING & 95-4188814 Page 9 EDUCATION INTERNATIONAL Statement of Revenue (D)
Revenue
excluded from
tex under
sections 512,
513, or 514 (A) (B) (C) Unrelated Total revenue Related or exampt function businees revenue revenue 1 a Federated campaigns 1b b Membership dues e Fundralsing events 10 14 d Related organizations ... Government grants (contributions) 10 f All other combinations, gifts, grants, and 150,836. simitar amounts not included above Noncent contributions included in times 16-12 \$ 150,836. h Total. Add lines 1e-11. Business Code 900099 2,318,712.2,318,712. 2. PROGRAM SERVICES FEES f All other program service revenue \triangleright 2,318,712. o Total. Add (Ines 2x-2) investment income (including dividencia, interest, and 249,534 249,534. Income from investment of tax-exampt bond proceeds Royalties (i) Real 6 a Gross Rents b Less: rental expenses o Rental Income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other exects other than inventory b Less: cost or other basis and sales expenses ... a Gain or (loss) d Net gain or (lose) 8 a Gross Income from fundralising events (not including \$ __ __ __ of contributions reported on line 1c). Bee Part IV, fine 18 b Less: direct expenses a Nat income or (loss) from fundralising events 9 a Gross income from gaming activities. See b Less: direct expenses e Net income or (loss) from garning activities 10 a Gross sales of inventory, less returns and alignmences ь201,776. b Less: cost of goods sold 185,585. Net income or does from sales of inventory 185,585. Business Code 900099 Miscellaneous Revenue 1B,132. 11 . CURRENCY EXCHANGE GAIN 18,132. 900099 9,382. 9,382. b REFERRAL FEES 27,514. \triangleright 2,932,181.2,531,811.

OF 10

0. 249,534.

Form **990** (2009)

EDUCATION INTERNATIONAL

Part X Statement of Functional Expenses

Section 501(c)(2) and 501(c)(4) organizations must complete all columns. te column (A) but are not required to complete columns (E), (C), and (D).

Do (7Ь,	not include amounts reported on fines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	115,394.	115,394.		
2	Grants and other essistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other essistance to governments.				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for maniform [
5	Compensation of current officers, directors,				
	trustees, and key employees	27,031.	21,180.	5,146.	705
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	•			
	persons described in section 4958(c)(3)(B)				w
7	Other salaries and wages	97,479.	84,657.	11,991.	831
8	Pension pian contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	126,365.	107,615.	17,346.	1,404
0	Payroll taxes	B,968.	7,616.	1,258.	94
1	Fees for services (non-employees):				
	Management				
Ь	Legal	48,416.	44,429.	3,931.	56
c	Accounting	51,692.	9,475.	42,217.	
d					
•	Professional fundraising services. See Part IV, line 17				· -
f	Investment management fees				
9	Other				
12	Advertising and promotion	241,208.	236,565.	4,354.	289
3	Office expenses	238,618.	185,019.	40,714.	12,885
14	Information technology				
15	Royalties	66,286.	66,286.		
16	Occupancy	259,363.	215,288.	41,547.	2,528
17	Travel	156,848.	148,482.	6,901.	1,465
18	Payments of travel or entertainment expenses		•		-
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	87,490.	87,490.		•
22	Depreciation, depiction, and amortization	116,096.	95,600.	19,408.	1,088
23	Insurance	14,754.	12,489.	2,105.	160
24	Other expenses, familia expenses not covered above. (Expenses promed together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
-	STAFF TRAINING	326,402.	278,688.	44,235.	3,479
Ŀ	PROGRAM DELIVERY COSTS	221,304.	221,304.		0/31.
-	· 				****
-			-		
•	All other expenses		· · · · · · · · · · · · · · · · · · ·	 	
1 25	Total functional expenses. Add tines 1 through 241	2,203,714.	1,937,577.	241,153.	24,984
_	Joint casts. Check here I I following	LILVJIII4.	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	241,1334	_ 27;30
26					
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined]	
	educational campaign and fundralsing solicitation .		l		Form 990 (20)

R.		Balance Sheet			
			(A) Beginning of year		(E) End of year
	1	Cash - non-interest-bearing	4,318,283.	1	4,300,701.
	2	Savings and temporary cash investments ,		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	374,880.	4	343,799.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	8	Receivables from other disqualified persons (as defined under section		W	
į		4958(f)(1)) and persons described in section 4968(c)(3)(B). Complete			
		Part II of Schedule L		6	
8	7	Notes and loans receivable, net	6,925.	7	5,510
	8	Inventories for sale or use	159,876.	8	158,699
₹		Prepaid expenses and deferred charges	192,135.		196,195
	100	Land, buildings, and equipment: cost or other	***************************************		
		basis. Complete Part VI of Schedule D 10a 4,565,936.			
	Ь	Less: accumulated depreciation 10s 2,130,373.	2,544,004.	10a	2,435,563
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	4,419,000.	12	5,282,000.
	13	Investments - program-related. See Part IV, fine 11		13	
	14	Intangible assets	6.		
	16	Other essets, See Part IV. Ine 11		15	
	16	Total essets. Add lines 1 through 16 (must equal line 34)	12,015,109.		12,722,467
	17	Accounts psyable and accrued expenses	64,932.		80,365
	18	Grants payable		18	
	19	Deferred revenue	6,449.		13,282
	20	Tex-exempt bond (labilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schadule D		21	
	22	Payables to current and former officers, directors, trustees, key employees,			
7	_	highest compensated employees, and disqualified persons. Complete Part II			
3		of Schedule L	20100100000000000000000000000000000000	22	
	23	Secured mortgages and notes psyable to unrelated third parties	1,733,756.		1,691,370
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other (labilities, Complete Part X of Schedule D	4,028.	25	3,039.
	26	Total Babilities. Add lines 17 through 25	1,809,165.		1,788,056
		Organizations that follow SFAS 117, check here			
		lines 27 through 29, and lines 33 and 34.			
8	27	Unrestricted net assets	10,125,831.	97	10,893,937
Ą	28	Temporarily restricted net assets	80,113.		40,474
ő P	29	Permanently restricted net assets		29	1
5		Organizations that do not follow 8FAS 117, check here			
×	l	complete lines 30 through 34.			
Net Assets or Fund Bets	30	Cupital stock or trust principal, or current funds		30	
ž	31	Peld in or capital surplus, or fand, building, or equipment fund		31	
₹	32	Detelored combon and comment accommissed to a comment of the standard to a		32	
Ĭ		Retained earnings, endowment, accumulated income, or other funds	10,205,944.		10,934,411.
	33	Total net assets or fund belences	12,015,109.		
	34	Total liabilities and net assets/fund balances	1 12,015,109.	34	12,722,467.

ASSOCIATION FOR BETTER LIVING & EDUCATION INTERNATIONAL

	95-4 PRODUCTION INTERNATIONAL 95-4	1188814	Pa	ge 12
8.81	Financial Statements and Reporting			
1	Accounting method used to prepare the Form 990: Cash X Accrust Cher		Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," expisin in Schedule O.	_	100	
24	Were the organization's financial statements compiled or reviewed by an independent accountant?	28		X
	Were the organization's financial statements audited by an independent accountant?	2 b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	20	X	
	If the organization changed either its oversight process or selection process during the tex year, explain in Schedule O.			
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: X Separate basis			
3 e	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	t 3a		X
	if "Yes," did the organization undergo the required audit or sudits? If the organization did not undergo the required audit or sudits, stolatin why in Schedule O and describe any steps taken to undergo such audits.			
		Form	990 (2009)

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(e)(1) of the internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047 Open to Public Inspection

A F	er the	2008 ca	lendar year, or tax year beginning	and end	ing							
В	Check If	Please	C Name of organization			D Employer identific	ation nu	mber				
-	pp!lcsbfs:	use IAS	ASSOCIATION FOR BETTER LIVING &									
	Address change	, betheir or	EDUCATION INTERNATIONAL		1							
⊨		print or type.	Doing Business As			95-43	18881	4				
⊨	Tinital			neal Door	m/surte	E Telephone number						
느	irstum Termin-	See Specific	Number and street (or P.O. box it mail is not delivered to street address.	ezzi Lvooi	IIVSUILO							
느		Instruc-	1002 HOLLIMOOD BRAD.			(323)960-3530 G Gross receipts \$ 3,464,350.						
<u> </u>	Amende return		City or town, state or country, and ZIP + 4			G Gross receipts \$		464,	350.			
Ĺ	Acptics tion		LOS ANGELES, CA 90028			H(a) is this a group re	tum		_			
	pending	FNar	me and address of principal officer: JOAN TOFIL			for affiliates?	Ĺ.,	Yes 🖸	No			
			ME AS C ABOVE			H(b) Are all affiliates incl	uded? 🗀]Yes [No			
7	Tav.eve		us: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or	527		ff "No," attach a			ns:\			
			W.ABLE.ORG			H(c) Group exemption	•		,			
			nn: X Corporation Trust Association Other		1 Vaar	of formation: 1989 M			Her CA			
					L toal	DI IOCHIAGOIL E 2021 RE	SIZE UI S	cuai donne.	uc, Car			
	art	Summ	lary	A DYN	M111	WORLD OR D	OTTO 3	DITGE				
Я			scribe the organization's mission or most significant activities: \mathbf{T}^{\prime}	O KID	TME	MOKTO OF D	KUG A	BUSB,				
Ĕ	_	CRIME										
Ē	2 (Check thi	is box 🕨 🔛 if the organization discontinued its operations or	disposed	of more	than 25% of its asset	3		_			
ž	3 1	Number o	of voting members of the governing body (Part VI, line 1a)			3			3			
9	4 1	Number o	of independent voting members of the governing body (Part VI, line	e 1b)		4			2			
9			nber of employees (Part V, line 2a)			5			34			
≱	_		nber of volunteers (estimate if necessary)			6			500			
Activities & Governance			ss unrelated business revenue from Part VIII, line 12, column (C)			78			0.			
₹			lated business taxable income from Form 990-T, line 34			76			0.			
_	b	AOT OTTO	sted business taxable income from 500 1, and 54			Prior Year	~	rrent Yea				
	١.,		dinana di anno		⊢	357,807.	<u> </u>	157				
Revenue	8 (tions and grants (Part VIII, line 1h)		-	2,713,748.	- 5	554				
	9 (-	service revenue (Part VIII, line 2g)									
돑	10 (ent income (Part VIII, column (A), lines 3, 4, and 7d)	•	<u> </u>	295,926.		267,				
_	111 (venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		⊢	413,292.		260,				
	12	Total rev	enue - add lines 8 through 11 (must equal Part VIII, column (A), line	e 12)		3,780,773.	3,	240,				
	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)			194,000.		268,	<u> 386.</u>			
	14 (Benefits	paid to or for members (Part IX, column (A), line 4)									
ø	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines	124,248.		267,	308.					
Expenses	16a l	Professio	enal fundraising fees (Part IX, column (A), line 11e)									
ă	ь			4,568	. $ abla$							
ā	17		penses (Part IX, column (A), lines 11a-11d, 11f 24f)	-	_	2,102,953.	1.	807.	164.			
			penses. Add lines 13-17 (must equal Part IX, column (A), line 25)			2,421,201.	2	342,	858.			
		•	less expenses. Subtract line 18 from line 12	•	- -	1,359,572.		897,				
ъ			A COMPANY COMPANY OF THE PARTY		_	Beginning of Year	E-	nd of Yes				
2	20	Tatal and	nata (Cart V. Ilaa 16)		\vdash	11,298,285.		015,				
Assets	图2.		sats (Part X, line 16)		-	1,989,510.		809,				
5	웹 - '		pilities (Part X, line 26)		-	9,308,775.		205,				
	-1 -4		ets or fund balances. Subtract line 21 from line 20 atture. Block			3,300,113.		205,	344.			
Ľ	ert II			ert des sort et	olemente.	and to the heat of the bourlet	as and balis	d it is to a				
		and comb	naties of perjury, I declare that I have examined this return, including accompanying achi late. Declaration of preparer (other than officer) is based on all information of which prepare	arer has any k	nowledge							
	Į.	١.	1111			1 1/1/1/	100)				
Si	gn	D 157	May Jour				109	<u>'</u>				
He	ere	l' ::	gnation of officer			Date						
			OAN TOFIL, TREASURER					÷				
_		₩ iy	pe or print name and title	No.	174	and if						
Pa	id	Preparer	3	Date	58	(see in	er's identify structions)	and establish				
	eparer's	signatur			en	rployed ▶j						
	e Only	Form's ner yours if				EIN -						
		acti-cripti address, i										
_		ZP + 4	<i>T</i>			Phone no. 🕨						
M	sy the li	RS discu	ss this return with the preparer shown above? (see instructions)					Yes	No			

140	1.II., Statement of Program Service Accomplishments (see assuccions)
1	Briefly describe the organization's mission: TO RID THE WORLD OF DRUG ABUSE, CRIME, ILLITERACY & IMMORALITY
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	the prior Form 990 or 990-EZ? If "Yes", describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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.
	SEE SCHEDULE O FOR CONTINUATION(S)
48	ASSISTANCE TO SOCIAL BETTERMENT CORPORATIONS:
	ABLE INTERNATIONAL CARRIES OUT ITS MISSION TO REVERSE THE SOCIAL DECAY
	THAT THREATENS OUR SOCIETY BY PROMOTING AND ASSISTING THE FOLLOWING SOCIAL BETTERMENT PROGRAMS OF FOUR AFFILIATED TAX-EXEMPT CHARITABLE AND
	EDUCATIONAL ORGANIZATIONS:
	-LITERACY & EDUCATION, CONDUCTED BY APPLIED SCHOLASTICS INTERNATIONAL
	-MORALITY & VALUES, CONDUCTED BY THE WAY TO HAPPINESS FOUNDATION
	INTERNATIONAL
	-DRUG REHABILITATION & DRUG ABUSE PREVENTION, CONDUCTED BY NARCONON
	INTERNATIONAL
	-CRIMINAL REHABILITATION, CONDUCTED BY CRIMINON INTERNATIONAL
	ABLE ASSISTS THESE ORGANIZATIONS BY HELPING THEM DEVELOP NEW PROGRAMS
4b	(Code.) (Expenses \$ 441,763. including grants of \$ 7,133.) (Revenue \$ 243,694. MATERIALS COMPILATIONS AND PUBLICATIONS
	ABLE PUBLISHED MATERIALS FOR BROAD DISTRIBUTION AND BOOKS AND OTHER
	MATERIALS FOR USE BY ITS AFFILIATED SOCIAL BETTERMENT ORGANIZATIONS.
	THESE INCLUDED THE REPRINTING OF THE TEN BOOKS COMPRISING THE NARCONON
	DRUG REHABILITATION PROGRAM FOR THE PEOPLE STARTING THE PROGRAM IN THE
	57 NARCONON DRUG REHAB CENTERS; APPLIED SCHOLASTICS ADVANCED COMMUNICATION SKILLS COURSE AND THE BASIC COURSE INSTRUCTOR COURSE FOR
	COMMUNICATION SKILLS COURSE AND THE BASIC COURSE INSTRUCTOR COURSE FOR USE IN TRAINING TEACHERS AND OTHER EDUCATORS; MATERIALS FOR THE HOW TO
	LIVE AND WORK WITH CHILDREN COURSE; THE TRANSLATION OF THE WAY TO
	HAPPINESS COMMON SENSE GUIDE TO BETTER LIVING IN 19 LANGUAGES: HAUSA,
	BURMESE, YORUBA, KHMER, BELARUSIAN, THAI, KORBAN, URDU, SINHALESE,
	NEPALESE, GUJARATI, KYRGYZ, SERBIAN, (SEE SCHEDULE O FOR CONTINUATION),
4c	(Code.) (Expenses \$ 569, 512 · including grants of \$ 0 ·) (Revenue \$ 0 ·
	PUBLIC INFORMATION ON THE SOLUTION TO SOCIETAL ILLS
	ABLE INTERNATIONAL ASSISTED THE WAY TO HAPPINESS FOUNDATION INTERNATIONAL TO DISTRIBUTE 40,000 COPIES OF THE WAY TO HAPPINESS
	INFORMATION KIT IN RESPONSE REQUESTS OFF ITS WEBSITE AND THROUGH OTHER
	VENUES AND IN DISTRIBUTING THE WAY TO HAPPINESS PUBLIC SERVICE
	ANNOUNCEMENTS TO 246 TELEVISION STATIONS ACROSS THE UNITED STATES AND
	INTERNATIONALLY WITH A TOTAL VIEWERSHIP OF 531 MILLION.
	ABLE ASSISTED CRIMINON INTERNATIONAL ESTABLISHING A WEBSITE FOR
	CRIMINON INTERNATIONAL; AND IN PROMOTING THE CRIMINON INTERNATIONAL
	OUTCOME STUDIES OF ITS ON-SITE CRIMINAL REHABILITATION PROGRAMS TO NEW
	PRISONS RESULTING IN CRIMINON PROGRAMS BEING PROVIDED TO MORE THAN 14.000 INMATES IN OVER 2000 PRISONS IN 34 COUNTRIES.
Art	Other program services. (Describe in Schedule O)
70	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ \$ 2,089,706. (Must equal Part IX, Line 25, column (B))

832003 12-18-08

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Form 990 (2008) EDUCATION INTERNATIONAL | Part IV | Checklist of Hequired Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	ls 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	Old 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,			
	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			
	Schedule D, Part III	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			
	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		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11_	X	<u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP1 if "Yes," complete Schedule D, Parts XI, XII, and XIII	12_	X	<u> </u>
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? // "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	148	X	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S ? If "Yes," complete Schedule F, Part I	14b	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		l	
	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			
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	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	<u> </u>	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	<u> </u>	X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	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	21_	X	L
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 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_	┝	X
240	• • • • • • • • • • • • • • • • • • • •			
	last day of the year, that was Issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			x
	If "No", go to question 25	240	⊢	<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	├-	-
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	├	
	- · · · · · · · · · · · · · · · · · · ·	24d	├	_
-98	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	26a		X
	Old the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	<u> </u>	┢	<u> </u>
9	pnor 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	لاتت ا	 	-
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	٣_	1	╁
_,	contributor, or to a person related to such an individual? If "Yes," complete Schedule L. Part III	27		x
			890	(2008)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee	5. 194	i . j	W. T
8	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an	透透	-7	學
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other	清楚		- 52-
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
ь	Have a family member who had a direct or indirect business relationship with the organization?			
	If *Yes, * complete Schedule L, Pert IV	28b		X
¢	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	1	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28		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	1	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		LX
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	_	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?		1 -	1
	If "Yes," complete Schedule R, Part V, line 2	35	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	38		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule B. Part VI	37	1	X

			Yes	No
18	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S Information Returns. Enter O if not applicable 1a 21			
	Enter the number of Forms W-2G included in line 1s. Enter 0- if not applicable 1b 0	٠.,	١.	-
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	10	X	
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,		
	filed for the calendar year ending with or within the year covered by this return 2a 34			
ь	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)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
40	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
Ð	If "Yes," enter the name of the foreign country > CANADA, DENMARK, UNITED KINGDOM		•	, ,
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and		, tz	_ `
	Financial Accounts.		,	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
	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 8888-T, Disclosure by Tax Exempt Entity Regarding Prohibited	_		
	Tax Shelter Transaction?	5c		X
	Did the organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		<u> </u> ♣
D	were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	6b		\vdash
-	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	_
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		 -
•	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	76	-	Α.
_	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
•	benefit contract?	7e	_	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	79	\vdash	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	<u> </u>	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8		
9	Section 601(c)(3) and other sponsoring organizations maintaining donor advised funds.	<u></u>	t	
a	Did the organization make any taxable distributions under section 4966?	98		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	Вb		
10	Section 501(c)(7) organizations. Enter N/A			
8	Initiation fees and capital contributions included on Part VIII, line 12	ļ ,		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ŀ		i
11	Section 601(c)(12) organizations. Enter: N/A			
8	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
		Form	990	COOR

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Form 990 (2008) EDUCATION INTERNATIONAL 95-4188814 Pa

[Party M.] Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion 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,		減	,
	processes, or changes in Schedule O See instructions	رئي رئي		3.11
1a	Enter the number of voting members of the governing body	2344	i . se l	
þ	Enter the number of voting members that are independent 1b	3 · a ·	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	<u> </u>	٠,٠	ţ1
	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 filled?	4		X
6	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		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	1		
	governing body?	7a	X	
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	172		
	by the following:		_	ш
0	The governing body?	8a	X	
þ	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9a	•	9a	X	<u> </u>
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		l	ŀ
	and branches to ensure their operations are consistent with those of the organization?	9b	X	<u> </u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		l	
	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			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
<u> 280</u>	tion B. Policies			
40-	Constitution to the second section of the section of the second section of the section of the second section of the section		Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	128	X	<u> </u>
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		x	l
_	to conflicts?	12b	_	⊢
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	١		
40	in Schedule O how this is done	12c	X	
13		13	X	<u> </u>
14		14	X	4 84
15	Did the process for determining compensation of the following persons include a review and approval by independent	20.00		ľ
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	7475		\vdash
	The organization's CEO, Executive Director, or top management official?	15a	X	
D	Other officers or key employees of the organization?	15b		Ь,
40.	Describe the process in Schedule O. (see instructions)	1.72	′ بيء	·
108	Old the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	3157	-	X
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	16a	7,48	 ^ ,
•	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	da.	3.3	-
	exempt status with respect to such arrangements?	<u> </u>	T.A	1.2
Sec	tion C. Disclosure	16b		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed CA			
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	- down		
	public inspection. Indicate how you make these available. Check all that apply,	. ICT		
	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,	and fin	nolai	
	statements available to the public.	מותו האה	a Kiri	
20		etion: B		
	GWENDA BYRNE - 323 960-3530		_	
	7065 HOLLYWOOD BLVD., LOS ANGELES, CA 90028			
83200 12-18		Forπ	990	(2008)

ASSOCIATION FOR BETTER LIVING &

EDUCATION INTERNATIONAL

95-4188814

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Form **990** (2008)

Form 980 (2008) 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

832007 12-18-08

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)	ompensate any officer, director, truste (B) (C)							(D)	(E)	(F)	
Name and Title	Average hours							Reportable compensation	Reportable compensation	Estimated amount of	
	per week	mehidasi bushe or director	_	Officer		Hathers compensated		from the organization (W-2/1099-MISC)	from related organizations (W 2/1099-MISC)	other compensation from the organization and related organizations	
CATHERINE SHEA WHITTLE	40.00	F	_	F	<u> </u>		F	5 4 7 4			
TRUSTEE RICHARD FEAR	40.00	X	┡	L	<u> </u>	↓	<u> </u>	3,451.	0.	0.	
DIRECTOR	1	x			l		l	0.	о.	0.	
GREG HUGHES		₽	┢	┢	╫┈	╁	┢			U.	
DIRECTOR		x			ĺ			0.	0.	0.	
LAURIE ZURN	1	Г		Т		T		1			
DIRECTOR	40.00	X	ļ		L	_		2,864.	0.	0.	
DON CUNNINGHAM				1							
TRUSTEE DEBORAH HUGHES		X	1	┡	-		┞	0.	0.	0	
TRUSTEE		x	İ	1		1	1	0.	0.	0.	
RENA WEINBERG		Ĥ	├-	╁	-	╈	┪	· · · · · · ·		0.	
PRESIDENT	40.00	1	ł	x				4,156.	O.	0.	
GWENDA BYRNE			Î		Γ						
SECRETARY	40.00	L		X	L	<u> </u>	┖	4,190.	0.	0.	
JOAN TOFIL TREASURER	40.00			X		L		4,328.	0.	0	
			Γ				Γ				
		<u> </u>	1	Щ	L	<u>L.</u>	<u> L.</u>	<u> </u>		<u> </u>	

ASSOCIATION FOR BETTER LIVING & EDUCATION INTERNATIONAL

	TION INTER								95-43	1888	14 Page 8
Part VII Section A. Officers, Directo	ors, Trustees, Key E	mplo	yee	8, E	nd (High	est	Compensated Employ	rees (continued)		<u> </u>
(A) Name and title	* * * * * * * * * * * * * * * * * * * *						м	(D) Reportable compensation	(E) Reportable compensatio		(F) Estimated amount of
	per week	e e	tracterboral trustee	Confect		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	s SC)	aniount or other compensation from the organization and related organizations
		Ш		igspace	_	L	L			_	
		\sqcup		L	Ļ	igdash	L				
		\vdash	_	_	_	-	L			\dashv	
	<u> </u>	+		L	_	_	-			\dashv	
		$oxed{H}$	-	-	_	\perp	H			\dashv	<u> </u>
		H	\vdash	-	-	╁	\vdash			\dashv	
		H	_		-	╁	-			\dashv	
		H	-		╁╴	+					
		H	\vdash		┢	+	H	 		_	
1b Total .	<u>l</u>	اا	Щ.	Ь.	<u> </u>	┶	_	18,989.		0.	0.
2 Total number of individuals (including	ng those in 1a) who re	sceiv	ed r	nore	the		100				
compensation from the organization	n									<u> </u>	0
3 Did the organization list any former line 1a? If "Yes," complete Scheduk			, ke	y en	nplo	yes,	or	highest compensated e	mployee on	F	Yes No
4 For any individual fisted on line 1a, i and related organizations greater th	is the sum of reportat	bte co	-					•	the organization	_	4 X
Did any person listed on line 1a rec the organization? If "Yes," complete				tron	an	y un	rela	ted organization for sen	/Icas rendered to	<u> </u>	5 X
Section B. Independent Contractors 1 Complete this table for your five hig	hest compensated in	des				-	^~	that reaching many than	£100.000 et eee		ton form
the organization	(A)	——					U. 5	(B)		The is a	
Name and b	usiness address							Description of	services	Col	(C) mpensation
				_							
					_						
	······································			_	_						
						_					
2 Total number of independent contri from the organization	actors (including thos	se in '	1) w	no r	ece	ived	mo	re than \$100,000 in cor	npensation	The second	
				_	_		_			F	om 990 (2008)

ASSOCIATION FOR BETTER LIVING &

m 990			TION INT	ERNATION	<u>AL</u>		<u>95-4188</u>	814 Page
ert V	<u> </u>	Statement of Rever	une	- <u></u> -		/P1		<u>(D)</u>
				£ 4.	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>B</u> 1	8	Federated campaigns	1a		2 2 200		+	5.4
5	b	Membership dues	1b	13,541.		, y', '	٠ * * * * * * * * * * * * * * * * * * *	***
틹	C	Fundraising events	1c				~, -	ri-t-
	d	Related organizations	1d	21,766.	. ويوني 	* " - " - " - " - " - " - " - " - " - "	م مارسا المارسا	سنگر استان دری کاری
ì		Government grants (contribut	tions) 1e		2	·	* ***	***********
9		All other contributions, gifts, gran			4 1	- 4 - 4	1 7 7	,
		similar amounts not included abor		22,642.			મેં ક	, •
Sturbuig Brillig Build dus	9	Noncesh contributions included in lines				_ * , 4*	, ,	- "y
툆	-	Total. Add lines 1a-1f			157,949.	**		
7				Business Code	* ***	,	•	
2	9	LICENSING FEES	ĭ	541900	2,554,220.	2,554,220.		
Keyenue	ь							
튑	C							
2	ď							
9								
	f	All other program service reve	enue —					
1		Total. Add lines 2a 2f			2,554,220.		4.	142.
3	_	Investment income (including	dividends, intere					
-		other similar amounts)	,,	>	267,606.			267,606
4		Income from investment of ta	x-exempt band o	roceeds -	<u></u>	 -		
6		Royalties						
ľ		. toyenada	(i) Real	(ii) Personal				
۾ ا	a	Gross Rents	tij rioai	(u) ressoriai	1, .			7.
١٣	_	Less: rental expenses			1		*` ·	, a
1	c	Rental income or (loss)				*		Į į
1	d	Net rental income or (loss)					<u> </u>	
١,	a		(i) Securities	(ii) Other	The space of			
'	•	assets other than inventory	(I) Coccinios	(ii) Outer				7-2
	h	Less, cost or other basis			\$	l . · · · · · .	, , ,	et - per
1	•	and sales expenses		55.	رائ ناسي	P. C.	" " " " " " " " " " " " " " " " " " "	- july 1 1
1		•		-55.	1 5/4	· .		
1		Gain or (loss) Net gain or (loss)			-55.			-55
_ ا		Gross income from fundraising			-33.	 		- 55
۱°		Including \$	- :		7-7-7-1	<i>t</i> ~	, · · ·	
		· —	of		1 , ,	,	١.	4 2
۲ I		contributions reported on line	•		, ~	f.		``
	_	Part IV, line 18	8		4	~ ~	₩	•
5		Less direct expenses	b	L	 	<u> </u>		
] _		Net income or (loss) from fun			 	 	 	
°	7 4	Gross income from gaming &], .			1 . P
1		Part IV, line 19	a		1	1		- 2
1		Less, direct expenses	b)	<u> </u>		<u> </u>		
		Net income or (loss) from gar	-	<u>.</u> ▶			ļ <u> </u>	
10	, 8	Gross sales of inventory, less		467 000	7			`~
		and allowances	a	467,962.	{		, ',-	[~']
		Less cost of goods sold		224,268.	1 242 604	749 252	ļ	
 	C	Net income or (loss) from sale		D 100 0 10	243,694.	243,694.	 _	
-		Miscellaneous Revent	ue	Business Code			_	
11	18		MOD CETT	900099	12,585.	!		12,585
1	þ	CURRENCY EXCHAI	NGE GAIN	900099	4,028.	ļ	<u> </u>	4,028
1	C				 	ļ	<u> </u>	
ļ	d	All other revenue		L		L		
	e	Total. Add fines 11a-11d		•	16,613.	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		**;
12		Total Revenue, Add thes th, 29, 3,	A 5 64 74 64 6- 1		14 24D D27.	2,797,914.	0.	284,164

EDUCATION INTERNATIONAL

Form 990 (2008) EDUCATION INT.
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. niete column (A) but are not required to complete columns (B), (C), and (D).

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6b, Total expenses Program service Management and Fundrais									
7b, 8	3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and			F=1 - e = e =					
	organizations in the U.S. See Part IV, line 21	268,386.	268,386.	7 × ×					
2	Grants and other assistance to individuals in		<u>-</u>	**	~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	the U.S. See Part IV, line 22		. <u></u>	·	-2:04:				
3	Grants and other assistance to governments,								
	organizations, and individuals outside the U.S								
	See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	18,989.	14,179.	4,810.					
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and			1					
	persons described in section 4958(c)(3)(8)								
7	Other salaries and wages	104,013.	92,262.	10,170.	1,581.				
8	Pension plan contributions (include section 401(k)			T					
	and section 403(b) employer contributions)								
9	Other employee benefits	133,697.	115,746.		1,707.				
10	Payroll taxes	10,609.	9,186.	1,299.	124.				
11	Fees for services (non-employees)			\					
	Management								
ь	Legal	69,065.	67,622.		4.				
C	Accounting	54,325.		54,325.					
d	Lobbying								
0	Professional fundraising services. See Part IV, line 17			*,* *					
f	investment management fees								
9	Other								
12	Advertising and promotion	269,554.	268,723.		73.				
13	Office expenses	255,427.	215,830	37,143.	2,454.				
14	Information technology			<u> </u>					
15	Royalties	64,331.	64,331.						
16	Occupancy	257,830.	214,120.		2,655.				
17	Travel	112,071.	105,781	5,759.	531.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest								
21	Payments to affiliates		,						
22	Depreciation, depletion, and amortization	121,641.	100,747		1,174.				
23	Insurance .	11,395.	9,8 <u>57</u>	1,411.	127.				
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	•			, <u>-</u>				
a	STAFF TRAINING	372,866.	324,277	44,451.	4,138.				
b	PROGRAM PRI TURRY GOORG	218,569.	218,569						
-	REFERRAL FEES	78.	78						
d	AMORTIZATION OF TRADEMA	12.	12		· · · · · · · · · · · · · · · · · · ·				
6									
1	All other expenses								
25	Total functional expenses, Add lines 1 through 241	2,342,858.	2,089,706	. 238,584.	14,568				
26	Joint Costs, Check here Il following								
_	SOP 98-2. Complete this line only if the organization								
	reported in column (B) point costs from a combined			1					
	educational campaign and fundraising solicitation			1					

ASSOCIATION FOR BETTER LIVING & EDUCATION INTERNATIONAL

Form 980 (2008)
Part X. Balance Sheet

	21707		_		(A)	<u> </u>	(B)
	_				Beginning of year		End of year
	1	Cash non-interest-bearing		<u> </u>	1,435,124.	1	4,318,283.
	2	Savings and temporary cash investments			2,902,600.	2	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	238,717.	4	374,880.		
	5	Receivables from current and former officers, dis					
1		employees, or other related parties. Complete P	art II of	Schedule L		5	
	В	Receivables from other disqualified persons (as			こと 会 発生 しょ	7.73	Ser Service Comment
		4958(f)(1)) and persons described in section 495			Land Stranger Stranger Land	32.3	(A) (A) (A) (A) (A) (A) (A) (A) (A) (A)
		Part II of Schedule L		,	1 2 407 477	-`.ē	La companya de la com
19	7	Notes and loans receivable, net	•		6,925.	7	6,925.
Assets	8	Inventories for sale or use		•	178,938.	8	159,876.
¥	9	Prepaid expenses and deferred charges	•		9,963.	9	192,135.
	_	Land, buildings, and equipment, cost basis	10a	4,559,919.			a. + (1887)
		Less: accumulated depreciation. Complete			经验验 查	拟	微
		Part VI of Schedule D	105	2,015,915.	2,622,413.	10c	2,544,004.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities, See Part IV, line 1	11	•	3,729,000.		4,419,000.
	13	Investments - program-related See Part IV, line		•		13	-,,0000
	14	Intendible assets	••			14	6.
	15	Other assets See Part IV, line 11		•	174,605.		0.
	16	Total assets. Add lines 1 through 15 (must equ	ot fine 3	A)	11,298,285.	16	12,015,109.
	17	Accounts payable and accrued expenses	a. u. 16 O	<u> </u>	185,740.	17	64,932.
	18	Grants payable	•		1037740.	18	04,552.
	19	Deferred revenue			16,166.		6,449.
	20	Tax-exempt bond liabilities		,	10,100.	20	0,443.
_	21	Escrow account liability. Complete Part IV of Sc		21			
£	22	Payables to current and former officers, director			T. 1 3 24 4 7 72		
Inbilities	~~	highest compensated employees, and disqualifi	14.4 TE 2	-).pt -1.p			
를		of Schedule L	ec has	ons. Complete Pan II	Market a line		
	-	• • • • • • • • • • • • • • • • • • • •	الماد ادماد	ul — unites	1,773,890.	22	1,733,756.
	23	Secured mortgages and notes payable to unrela	1100 U III	d barnes .	1,773,030.		1,733,736.
	l - ·	Unsecured notes and loans payable			13,714.	24	4,028.
	25	Other liabilities. Complete Part X of Schedule D		•	1,989,510	25	1,809,165.
	26	Total flabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check he		X and complete	1,363,510.	26	
		•	ere 📂	aum courbsere	N. 1985年 / //		
ğ		lines 27 through 29, and lines 33 and 34. Unrestricted net assets			9,131,585	,	10,125,831.
<u>8</u>	27	•		•	177,190.	_	80,113.
8	28	Temporarily restricted net assets		•	1//,130.	+	00,113.
Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117, c	haele k		C St. 18	29	April 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		complete lines 30 through 34.	HOCK IN	ere 🕨 📖 and	医大型 等源。	, ,	
8	30	Capital stock or trust principal, or current funds			2 × 2 × 2 × 2 × 2 × 2 × 2 × 2 × 2 × 2		Bri wiek
Net Assets	Ι.	• • • •		· · ·		30	
₹	31	Paid-in or capital surplus, or tand, building, or ex				31	
₹	32	Retained earnings, endowment, accumulated in	COIRE, (outer lungs	9,308,775.	32	10 205 044
	33	Total net assets or fund balances			11,298,285	33	10,205,944.
Da	134 IT XI	Total liabilities and net assets/fund balances			11,430,403	34	12,015,109.
L'a		Financial Statements and Reporting	<u> </u>	 -		_	Yes No
	A	menting mother corner to proceed the East one.	_	sh 🛣 Accrual 🗆	7		169 100
1 20		cunting method used to prepare the Form 990:			_ Other		
2a h		e the organization's financial statements compiler			accountant,		2a X
		s the organization's financial statements audited (•	•	maihilitu far accominte -4 st		
G	_	es" to lines 2a or 2b, does the organization have a		-	•	e eud	· I I I
24		sw, or compilation of its financial statements and :		•			
38		result of a federal award, was the organization re and OMB Circular A-133?	rimita ,	on and an angue of the	תול פתז מו ושיטו זיפגי בים פוונא	îne VII	
_		es," did the organization undergo the required au	مم 116	rdien?			3a X
			un ut al	ALINO T			3b
11000	1 12-1	P-VP					Form 990 (2008)