Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 Open to Public Inspection

A	For the 2	007 calendar year, or tax year beginning and en	ding		
В	Check if	Please C Name of organization	D Employer ide	ntification number	
,	applicable	use IRS ASSOCIATION FOR BETTER LIVING &			
	Address	print or EDUCATION INTERNATIONAL	95-41	88814	
	Name change	type See Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone ni	ımber
	Initial return	Specific 7065 HOLLYWOOD BLVD.		(323)	960-3530
	Termin- ation	tions City or town, state or country, and ZIP + 4		F Accounting metho	d Cash X Accrual
	Amende return	LOS ANGELES, CA 90028		Other (specify)	<u> </u>
	Applica pending	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts	H and I are not apple	cable to section	on 527 organizations
		must attach a completed Schedule A (Form 990 or 990-EZ).	H(a) Is this a group re	turn for affiliate	s? Yes X No
G_	Website:	▶WWW.ABLE.ORG	H(b) If "Yes," enter nur	mber of affiliate:	s N/A
J	Organiza	tion type (check only one) \searrow 501(c) (3) \triangleleft (insert no) 4947(a)(1) or 527	H(c) Are all affiliates in		/A Yes No
K	Check he	re In the organization is not a 509(a)(3) supporting organization and its gross	(If "No," attach a I H(d) Is this a separate		an or-
ı	receipts a	re normally not more than \$25,000. A return is not required, but if the organization	ganization covere		
	chooses	o file a return, be sure to file a complete return.	I Group Exemption	Number ►	N/A
			Mr Check ▶ 🔲 ii	the organization	in is not required to attach
<u>L</u>		eipts: Add lines 6b, 8b, 9b, and 10b to line 12 4, 012, 923.	Sch. B (Form 990), 990-EZ, or 99	90-PF).
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Bala	nces		
	1	Contributions, gifts, grants, and similar amounts received:	•		
	a	Contributions to donor advised funds 1a			
	Ь	Direct public support (not included on line 1a)	357,80	07.	
	С	Indirect public support (not included on line 1a)			
<u>ب</u>	d	Government contributions (grants) (not included on line 1a) 1d			
SCANNED	е	Total (add lines 1a through 1d) (cash \$ 357 , 807 . noncash \$). <u>1e</u>	<u>357,807.</u>
2	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	2,713,748.
	3	Membership dues and assessments		_3	
Ö	4	Interest on savings and temporary cash investments		4	<u>295,926.</u>
⇒	5	Dividends and interest from securities		5	
שבי	6 a	Gross rents . <u>6a</u>			
19	b	Less: rental expenses <u>6b</u>			
≕⊽ ō	C	Net rental income or (loss). Subtract line 6b from line 6a		_6c	
8000 ⊪ Revenue	7	Other investment income (describe		7	
ુક્	8 a	Gross amount from sales of assets other (A) Securities	(B) Other		
		than inventory 8a		_	
	b	Less: cost or other basis and sales expenses 8b	· · · · · · · · · · · · · · · · · · ·	[
	С	Gain or (loss) (attach schedule) 8c			
	1 -	Net gain or (loss). Combine line 8c, columns (A) and (B)		8d	
	9	Special events and activities (attach schedule). If any amount is from gaming, check here		1 [
	a .	Gross revenue (not including \$ of contributions reported on line 1b) 9a			
	D	Less: direct expenses other than fundraising expenses 9b		 . .	
	C	Net income or (loss) from special events. Subtract line 9b from line 9a	600 0	90	
	10 a	Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold 10b	600,04 232,15		
	b	Less: cost of goods sold Cross profit or (local from soles of investory (attach schedule). Subtract line 10th			367,899.
	1 C	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 18 but	ו. ע		45,393.
	11		S	11	3,780,773.
_	13	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 10 Program services (from line 44, column (B)) ALOV 2, 1, 20	<u> </u>	12	2,083,274.
es	14	Program services (from line 44, column (B)) Management and general (from line 44, column (C)) Management and general (from line 44, column (C))	108	14	306,280.
ens	15	Fundamental (from less 44 calcing (D))		15	31,647.
Expenses	16	Payments to affiliates (attach schedule) OGDEN. 1	UTI	16	<u> </u>
ш	17	Total expenses. Add lines 16 and 44, column (A)	-	17	2,421,201.
	18	Excess or (deficit) for the year. Subtract line 17 from line 12	·	18	1,359,572.
ats	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	7,949,203.
Net Assets	20	Other changes in net assets or fund balances (attach explanation)		20	0.
٦	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20		21	9,308,775.
7230 12-2	01 7-07	HA For Privacy Act and Paperwork Reduction Act Notice, see the separate instruction	s.		Form 990 (2007)

Form 990 (2007)

(iii) the amount allocated to Management and general \$

723011 12-27-07

Form 990 (2007) 95-4188814 EDUCATION INTERNATIONAL Page 2 Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) Functional Expenses and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (B) Program (C) Management Do not include amounts reported on line (A) Total (D) Fundraising services and general 6b, 8b, 9b, 10b, or 16 of Part I. 22a Grants paid from donor advised funds (attach schedule) 0 . noncash \$ If this amount includes foreign grants, check here STATEMENT 4 22b Other grants and allocations (attach schedule) (cash \$194,000 · noncash \$ If this amount includes foreign grants, check here 194,000. 194,000. 23 Specific assistance to individuals (attach schedule) 23 24 Benefits paid to or for members (attach schedule) 24 25a Compensation of current officers, directors, key 4,093. 15,894. 11,801. 0. employees, etc. listed in Part V-A 25a **b** Compensation of former officers, directors, key 0. 0 0. 0. employees, etc. listed in Part V-B 25b c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 26 Salanes and wages of employees not 108,354. 90,490. 15,038. 2,826. 26 included on lines 25a, b, and c 27 Pension plan contributions not included on lines 25a, b, and c 27 28 Employee benefits not included on lines 176,415. 146,119. 26,368. 3,928. 28 25a - 27 1,506. 9,643. 7,927. 210. 29 29 Payroll taxes 30 30 Professional fundraising fees 56,799 56,799. 31 Accounting fees 31 49,872. 5,115 54. 32 55,041 32 Legal fees 72.270. 56,494. 13,620. 2.156. 33 Supplies 33 83,202. 68,801. 12,385. 2,016. Telephone 65,935 <u>57,382</u>, 8,165 388. 35 Postage and shipping 35 <u>20,0</u>91 Occupancy 36 135,001 112,407 2,503. Equipment rental and maintenance 37 20,406. 16,588. 3,494. 324. 37 55,304 52,627 2,565 112. Printing and publications 38 104,131. 97,197. 5,767. 167. 39 39 Travel 14,150 14,150. Conferences, conventions, and meetings 40 108,955. 88,624. 19,100. 1,231. 41 176,102. 143,497 30,450. 2,155. Depreciation, depletion, etc. (attach schedule) Other expenses not covered above (itemize): 43a 43b 43c 43d 43e 43f g SEE STATEMENT 3 875,298. 81,724. 12,577. 969,599. 43a 44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), 2,421,201. 2,083,274. 306,280. 31,647. carry these totals to lines 13-15) Joint Costs. Check ▶ ☐ if you are following SOP 98-2 ► Yes X No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A

N/A

; and (iv) the amount allocated to Fundraising \$

Form 990 (2007) EDUCATION INTERNATIONAL

95-4188814 Part III Statement of Program Service Accomplishments (See the instructions.)

Page 3

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

	at is the organization's primary exempt purpose? ► Note: The world of drug abuse, crime, illiteracy & immorality	Program Service Expenses
All d	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ints served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	ASSISTANCE TO SOCIAL BETTERMENT CORPORATIONS SEE STATEMENT 17	
b	(Grants and allocations \$ 185,575.) If this amount includes foreign grants, check here ► X MATERIALS COMPILATION AND PUBLICATIONS SEE STATEMENT 18	948,011.
С	(Grants and allocations \$ 7,225.) If this amount includes foreign grants, check here ▶ □ PUBLIC INFORMATION ON THE SOLUTIONS TO SOCIETAL ILLS SEE STATEMENT 19	523,319.
d	(Grants and allocations \$ 1,200.) If this amount includes foreign grants, check here ▶ □	611,944.
e	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,083,274.
		Form 990 (2007)

Page 4

Part IV Balance Sheets (See the instructions) (A) Beginning of year Note: Where required, attached schedules and amounts within the description column (B) End of year should be for end-of-year amounts only. 1,083,769. 1,435,124. 45 45 Cash - non-interest-bearing 2,013,501. 2,902,600. 46 46 Savings and temporary cash investments 238,717 47 a Accounts receivable 47a 192,385. 238,717. 47b 47c b Less. allowance for doubtful accounts 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48b 48c 49 Grants receivable 50 a Receivables from current and former officers, directors, trustees, and 50a key employees b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 50b 51a 6,925. 51 a Other notes and loans receivable 12,921 6,925. b Less: allowance for doubtful accounts 51b 108,662. 178,938. 52 52 Inventories for sale or use 2,353. 9,963. 53 53 Prepaid expenses and deferred charges FMV 54 a Investments - publicly-traded securities Cost 54a FMV b Investments - other securities 54b 55 a Investments - land, buildings, and 55a equipment: basis b Less: accumulated depreciation 55b 55c 3,570,000. 3,729,000. SEE STATEMENT 5 56 Investments - other 4,524,379 57a 57 a Land, buildings, and equipment. basis 1,901,966. 2,772,311. 57c 2,622,413. b Less accumulated depreciation STMT 57b Other assets, including program-related investments 58 SEE STATEMENT 7 160,190 174,605. 58 (describe 9,916,092 298,285. Total assets (must equal line 74) Add lines 45 through 58 59 59 131,739. 185,509. 60 Accounts payable and accrued expenses 60 61 61 Grants payable 16,166. 19,978. Deferred revenue ... 62 62 iabilities. 63 Loans from officers, directors, trustees, and key employees 63 64a 64 a Tax-exempt bond liabilities 1,807,511 64b 773,890. b Mortgages and other notes payable 7,661 SEE STATEMENT 8 <u>13,945.</u> 65 65 Other liabilities (describe 1,966,889. 1,989,510. 66 Total liabilities. Add lines 60 through 65 Organizations that follow SFAS 117, check here

X and complete lines 67 through 69 and lines 73 and 74. Net Assets or Fund Balances 7,720,688. 9,<u>131,5</u>85. 67 67 Unrestricted <u>177</u>,190. 228,515. 68 68 Temporarily restricted 69 Permanently restricted 69 Organizations that do not follow SFAS 117, check here

and complete lines 70 through 74 70 70 Capital stock, trust principal, or current funds 71 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 72 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. 73 7,949,203 9,308,775. 73 (Column (A) must equal line 19 and column (B) must equal line 21) 9,916,092. 298,285. Total liabilities and net assets/fund balances. Add lines 66 and 73 74

For	m 990 (2007) EDUCATION INTERNATION	AL		95-41	1888	14	Page 5
Pa	art IV-A Reconciliation of Revenue per Audited Fina	ncial Statements V	Vith Revenue p	er Retu	rn (Se	e the	
	instructions)						
a	Total revenue, gains, and other support per audited financial stateme	nts		а	4,	012,	<u>923.</u>
b	Amounts included on line a but not on Part I, line 12	1	1 1	ļ	1		
1	Net unrealized gains on investments		b1				
2	Donated services and use of facilities		b2		-		
3	Recoveries of prior year grants		b3	<u>- </u>	}		
4	Other (specify): SEE STATEMENT 9		b4 232,1	50.			
	Add lines b1 through b4			<u>_b</u>	 _		<u>150.</u>
C	Subtract line b from line a		•	C	13,	<u>780,</u>	<u>773.</u>
d	Amounts included on Part I, line 12, but not on line a:	1	1 1				
1	Investment expenses not included on Part I, line 6b		d1		1		
2	Other (specify)		d2				_
	Add lines d1 and d2			<u> d</u>	┼		<u> </u>
e	Total revenue (Part I, line 12) Add lines c and d	maial Ctatamanta	With Evennes	e e	3,	<u>780,</u>	<u>773.</u>
Pa	rt IV-B Reconciliation of Expenses per Audited Fina	anciai Statements	with Expenses	 -			
a	Total expenses and losses per audited financial statements			a	<u> 2,</u>	<u>653,</u>	<u>351.</u>
b	Amounts included on line a but not on Part I, line 17:	1	1 1				
1	Donated services and use of facilities		b1				
2	Prior year adjustments reported on Part I, line 20		b2				
3	Losses reported on Part I, line 20		b3				
4	Other (specify): SEE STATEMENT 10		b4 232,1	.50			
	Add lines b1 through b4			b	-	232,	
C	Subtract line b from line a			<u> c</u>	<u> 2,</u>	421,	<u> 201.</u>
d	Amounts included on Part I, line 17, but not on line a:	,					
1	Investment expenses not included on Part I, line 6b		d1				
2	Other (specify)		d2		1		
	Add lines d1 and d2			d	<u> </u>		0.
	Total expenses (Part I, line 17) Add lines c and d			<u> </u>		<u>421,</u>	
Pa	or key employee at any time during the year even if they we				er, dire	ctor, trus	itee,
		(B) Title and average hours			utions to	(E) E)	oense
	(A) Name and address	per week devoted to	(If not paid, enter	(D) Contribi employee plans & d compensati	benefit eferred	àccol other al	opense ont and owances
		<u> </u>	<u> </u>	compensati	OII PIAIIS	0	
SE	E STATEMENT 11		_15,894.		0.		0.
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	n 990 (200		IAL		<u>95-4188</u>			age 6
<u>P</u> a	rt V-A	Current Officers, Directors, Trustees, and Ke	ey Employees (continu	ed)			Yes	No
75 a	Enter th	e total number of officers, directors, and trustees permitted	to vote on organization bus	siness at board	_			
	meeting	s	**	. ▶	3		i	ł
b		officers, directors, trustees, or key employees listed in Form						
		Schedule A, Part I, or highest compensated professional an						
		or II-B, related to each other through family or business rela iduals and explains the relationship(s)		EE STATEM		75b	Х	
				•		750	^	
C		officers, directors, trustees, or key employees listed in Form						ĺ
		Schedule A, Part I, or highest compensated professional an or II-B, receive compensation from any other organizations,						ĺ
		ation? See the instructions for the definition of "related organ		able, that are relat	ed to the	75c	•	х
	_	attach a statement that includes the information described	•					
d	-	e organization have a written conflict of interest policy?				75d	x	
Pa	rt V-B							
		Benefits (If any former officer, director, trustee, or key er						
		the year, list that person below and enter the amount of co	mpensation or other benef	(C) Compensation				
		(A) Name and address	(B) Loans and Advances	(if not paid,	employee benefi	t 🔐	E) Expe ccount	
	_	NONE	-	enter -0-)	compensation pla		er allow	rances
	-							
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Pa	rt VI	Other Information (See the instructions.)	<u> </u>				Yes	No
76		organization make a change in its activities or methods of co	onducting activities? If "Yes	s," attach a detaile	d			
		ent of each change				76		x
77	Were ar	y changes made in the organizing or governing documents	but not reported to the IRS	S? .		77		X
		attach a conformed copy of the changes.						
		organization have unrelated business gross income of \$1,00	0 or more during the year	covered by this ret		78a		X
		has it filed a tax return on Form 990-T for this year?			. N/A	78b		-
79		ere a liquidation, dissolution, termination, or substantial conti				79		X
80 a		ganization related (other than by association with a statewic			on			
_		rship, governing bodies, trustees, officers, etc., to any other	exempt or nonexempt orga	anization?		80a		<u> X</u>
b	It "Yes,	enter the name of the organization N/A			7			1
Q1 -	Enter d	rest and indirect political evacaditures. (Cas line 04 jestiment	_ and check whether it is L	lexemptor	nonexempt [_ 0 •			l
		rect and indirect political expenditures. (See line 81 instruction organization file Form 1120-POL for this year?	una j	81a		81b		x
0	טוט נוופ	organization life Form Tizo-Pot for tills year?					990	

Fo	rm	990 (2007) EDUCATION INTERNATIONAL 95-4188	814		age 7
P	ar	t VI Other Information (continued)		Yes	No
82	а	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially			
		iess than fair rental value?	82a		X
	b	If "Yes," you may indicate the value of these items here. Do not include this			
		amount as revenue in Part I or as an expense in Part II.			
		(See instructions in Part III)			
83	a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	<u> </u>
	b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Х	
84	а	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
	b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not			
		tax deductible? . N/A .	84b		
85	a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? . N/A	<u>85a</u>		L
	þ	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		<u> </u>
		If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a			
		waiver for proxy tax owed for the prior year.	}		
	C	Dues, assessments, and similar amounts from members . 85c N/A			
	d	Section 162(e) lobbying and political expenditures			
	е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A	1		ĺ
	f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
	g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		
	h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			1
		to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the		·	
		following tax year?	85h		<u> </u>
86		501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			
		line 12		}	
	b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87		501(c)(12) organizations. Enter a Gross income from members or shareholders . 87a N/A	ļ		
	b	Gross income from other sources (Do not net amounts due or paid to other sources			
		against amounts due or received from them.)	-		
88	а	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,			ĺ
		or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3?			
		If "Yes," complete Part IX	88a		X
	b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of	001		
		section 512(b)(13)? If "Yes," complete Part XI	88b	_	X
89	а	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under:			
		section 4911 ▶ 0 · ; section 4912 ▶ 0 · ; section 4955 ▶ 0 ·			
	D	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	l		1
		transaction during the year or did it become aware of an excess benefit transaction from a prior year?	006		v
	_	If "Yes," attach a statement explaining each transaction	89b	-	X
	C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	,,	sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.			1
	U	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		x
	c f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
	•	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,	031		
	g	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		х
QΛ	2	List the states with which a copy of this return is filed CA	708		
50		Number of employees employed in the pay period that includes March 12, 2007 90b			37
91		The books are in care of ► GWENDA BYRNE Telephone no. ► 323 96	0-3	530	
J 1	a	Located at 7065 HOLLYWOOD BL. LA, CA ZIP+4 9 ZIP+4 9			
	h	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	<u> </u>		No
		a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	Х	
		If "Yes," enter the name of the foreign country SEE STATEMENT 13	• • •		
		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			ĺ
		and Financial Accounts	!		
			Eorm	990	(2007)

Form 990 (2007) EDUCATION I	<u>NTERNAT</u>	IONAL		95-4	188814 Page 8
Part VI Other Information (continued)					Yes No
c At any time during the calendar year, did the organization				ed States?	91c X
If "Yes," enter the name of the foreign country					
92 Section 4947(a)(1) nonexempt charitable trusts fil	_		Check here		. ▶ ∟
and enter the amount of tax-exempt interest received Part VII Analysis of Income-Producing				▶ 92	N/A
		ted business income	Excluded	by section 512, 513, or 514	
Note: Enter gross amounts unless otherwise indicated.	(A)	(B)	(C)	(D)	(E)
	Business	Amount	Exclu- sion	Amount	Related or exempt function income
93 Program service revenue.	code		code		
a PAYMENTS FROM AFFILIATES					2,489,226.
b LICENSING FEES			+		224,373.
c FUNDRAISING FEES					149.
d					
6	 		+		
f Medicare/Medicaid payments			 		
g Fees and contracts from government agencies			+		
94 Membership dues and assessments			14	205 026	
95 Interest on savings and temporary cash investments			14	295,926.	
96 Dividends and interest from securities			+		
97 Net rental income or (loss) from real estate.			 		
a debt-financed property			 		
b not debt-financed property			 		
98 Net rental income or (loss) from personal property			+-+		
99 Other investment income	 		+-+-		_
100 Gain or (loss) from sales of assets					
other than inventory			+-+		
101 Net income or (loss) from special events	—		+ +-		267 000
102 Gross profit or (loss) from sales of inventory	<u> </u>		- 		367,899.
103 Other revenue:					0 501
a REFERRAL FEES			 - -		9,581.
b BOOK SALES COMMISSIONS			+		35,812.
<u> </u>			+		
d			+		
404 Cubatal (add advance (D) (D) and (D)	 	0	+-+	295,926.	3,127,040.
104 Subtotal (add columns (B), (D), and (E))	L		•	293,920.	3,422,966.
105 Total (add line 104, columns (B), (D), and (E)) Note: Line 105 plus line 1e, Part I, should equal the am	ount on line 1	2 Part I	•	. P -	3,444,300.
Part VIII Relationship of Activities to the			nt Durne	SOC (Con the instruction	no 1
Explain how each activity for which income is rejected exempt purposes (other than by providing funds			ea importani	lly to the accomplishment of	the organization s
	Tor Such purpe				
SEE STATEMENT 14				· · · · · · · · · · · · · · · · · · ·	
					
Part IX Information Regarding Taxable	Subsidia	ries and Disregar	ded Enti	ies (See the instruction	<u> </u>
(A) (B)	Cabolala	(C)		(D)	(E)
Name, address, and EIN of corporation, partnership, or disregarded entity ownership inter	f	Nature of activities		Total income	End-of-year assets
partitership, or disregarded entity ownership inter	%				assets
N/A	%				
N/A	%				
	%				
Part X Information Regarding Transfe		ted with Persons	al Benefi	t Contracts (See the	instructions)
(a) Did the organization, during the year, receive any funds					Yes X No
(a) Did the organization, during the year, receive any lurios (b) Did the organization, during the year, pay premiums, di				GONGHE GUNUAGE!	Yes X No
Note: If "Yes" to (b), file Form 8870 and Form 4720 (s	=	• •	บบแสนไ		LAL NO
140to. II 165 to (b), ille i olili ooro alla i olili 4720 (s	ico manucion				Form 990 (2007)

5-4188814	
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	EDUCATION INTERNATIONAL			OOOI4 rayes
Pa	rt XI Information Regarding Transfers To and From C		S. Complete only if the organ	nization is a
	controlling organization as defined in section 512(b)(13).	N/A		
			7400 \/40\	Yes No
106	Did the reporting organization make any transfers to a controlled entity as complete the schedule below for each controlled entity.	s defined in section :	512(b)(13) of the Code? If "Ye	s,-
Т		(B)	(0)	
İ	(A) Name, address, of each	Employer	(C) Description of	(D) Amount of
į	controlled entity	Identification Number	transfer	transfer
_				
a		ļ		
_				
ь				
			_	
- 1				
С				
				
	Totals			
		•••••		Yes No
107	Did the reporting organization receive any transfers from a controlled ent	tity as defined in sec	tion 512(b)(13) of the Code? I	
	complete the schedule below for each controlled entity	<u> </u>		
	(A)	_ (B)	(C)	(D)
	Name, address, of each	Employer Identification	Description of	Amount of
	controlled entity	Number_	transfer	transfer
ŀ				
a				İ
				
		ĺ		
b				
\dashv				
c				
	Totals	. <u> </u>		
				Yes No
108	Did the organization have a binding written contract in effect on August 1	7, 2006, covering the	e interest, rents, royalties, and	1
	annurties described in question 107 above? Under penalties of perjury, I declare that I have examined this return, including accompanying and complete Declaration of preparer (other than officer) is based on all information of which	ng schedules and statemen	ts, and to the best of my knowledge an	d belief, it is true, correct,
	and complete Declaration of preparer (other than officer) is based on all information of whice	h preparer has any knowled	dge / /	, , ,
Plea	ise X		× 17/11/0) S
Sigr	b digitative of officer //		Date	
Here	JOAN TOFIL, TREASURER			
	Type or print name and title	I Doto	Observed I -	
Paid	Preparer's	1	self-	SN or PTIN (See Gen Inst X)
	arer's signature	(17108	employed >	
Use (Only yours if	FT.OOR	EIN ►	

BEVERLY HILLS, CA 90212-2907

Form **990** (2007)

Phone no. ► (310)273-2501

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

name or the org	anization ASSOCIATION FOR BETTE		ING &		Employer identif	
D-41	EDUCATION INTERNATION		O41 Th	O#: D:	<u>95 41888</u>	
Part I	Compensation of the Five Highest Pai (See page 1 of the instructions. List each one. If there are			Officers, Direc	ctors, and I	rustees
(1)	a) Name and address of each employee paid more than \$50,000		b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and othe allowances
NONE						
						
			 			-
Total number of	other employees paid		-			
over \$50,000	outer employees paid	. ▶	0			
Part II-A	Compensation of the Five Highest Pai (See page 2 of the instructions. List each one (whether in				ional Servic	es
	(a) Name and address of each independent contractor paid			(b) Type of s	service	(c) Compensation
NSBN LL	<u> </u>			(6) (3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) compensation
	LSHIRE BLVD, BEVERLY HILLS	, CA	90212 7	ACCOUNTING		59,743.
-						
						
				· -		
	others receiving over					
\$50,000 for prof	fessional services Compensation of the Five Highest Pai	d Indon	endent Contracto	re for Other S	project	
Part II-D	(List each contractor who performed services other than	professiona	al services, whether individ		ci vices	
	firms. If there are none, enter "None." See page 2 of the in					
	(a) Name and address of each independent contractor paid	more than	\$50,000	(b) Type of s	service	(c) Compensation
NONE					-	
-						
				· · · · · · · · · · · · · · · · · · ·		
						
Total number of \$50,000 for other	other contractors receiving over er services		0			

S	chedule A (Form 990 or 990-EZ) 2007 EDUCATION INTERNATIONAL	95-4188	<u> 381</u>	4 F	age 2
	Part III Statements About Activities (See page 2 of the instructions.)			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$				
	line i of Part VI-B.)]	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations				
	checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.				
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributes, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which a person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is affiliated statement explaining the transactions)	ny such			
	a Sale, exchange, or leasing of property?		2a	_	_X_
	b Lending of money or other extension of credit?		2b_		<u>X</u>
	c Furnishing of goods, services, or facilities?	ļ	2c		<u>X</u>
	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, F	ORM 990	2d_	X	
	e Transfer of any part of its income or assets?	Ļ	2e_		X
3	a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how	Í	ſ		ĺ
	the organization determines that recipients qualify to receive payments.)		3a		X
	b Did the organization have a section 403(b) annuity plan for its employees?	[3b		X
	c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space,				
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	. [3c		<u> </u>
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	ļ	3đ		_X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f				
	and 4g	. [4a_		_X
	b Did the organization make any taxable distributions under section 4966?	N/A	4b		
	c Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	4c_		
	d Enter the total number of donor advised funds owned at the end of the tax year	▶ _		N/	<u>A</u>
	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	▶]		N/	A
	f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on				
	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	▶ .			0.
	g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	>			0.

Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 EDUCATION INTERNATIONAL

95-4188814 Page 3

Par	t IV	Reason for Non-Private Foundation	n Status (See pages 4 t	nrough 8 of the instructio	ns.)			
5 6 7 8 9	ty that th	e organization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state						
10 11a		An organization operated for the benefit of a college (Also complete the Support Schedule in Part IV-A. An organization that normally receives a substantia)				ıv).	
11b 12		Section 170(b)(1)(A)(vi). (Also complete the Support A community trust. Section 170(b)(1)(A)(vi). (Also An organization that normally receives: (1) more that receipts from activities related to its charitable, etc., its support from gross investment income and unreby the organization after June 30, 1975. See section	ort Schedule in Part IV-A.) complete the Support Sche an 33 1/3% of its support fro functions - subject to certai elated business taxable incor	dule in Part IV-A.) om contributions, membe n exceptions, and (2) no i ne (less section 511 tax)	rship fees, a more than 33 from busines	nd gross 3 1/3% of		
13		An organization that is not controlled by any disqua 509(a)(3). Check the box that describes the type of Type I	supporting organization:	undation managers) and o	otherwise me	eets the requir		
		Provide the following information	about the supported organ	nizations. (See page 8 of	the instruction	ons.)		
		(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support	
<u> </u>					Yes	No		
	_							
			1	Ī	I	r I		
<u>Total</u>								

Page 4

Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 EDUCATION INTERNATIONAL 95-4188814 Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Part IV-A Calendar year (or fiscal year beginning in) (a) 2006 (b) 2005 (c) 2004 (e) Total Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 1,238,070. 1,092,424.12,110,103. Membership fees received 16 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 2,939,684. 2,392,049. 2,025,933. charitable, etc., purpose 3,156,318. 10,513,984. Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 133,216 81,905. 353,962. 789,023. 219,940 19 Net income from unrelated business activities not included in line 18 Tax revenues levied for the 20 organization's benefit and either paid to it or expended on its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income. Attach a schedule. SEE STATEMENT 16 Do not include gain or (loss) from sale of capital assets 6,000. 6,532 35,086. 47,774. 95,392. 3,601,464.14,537,772. 26,520,635. Total of lines 15 through 22 4,063,897. 4,317,502. 24 Line 23 minus line 17 1,377,818. 1,209,415,12,511,839. 16,006,651. 907,579. 25 Enter 1% of line 23 43,175. 36,015. 145,378. 40,639. 320,133. Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 **▶** 26a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 129,517. 26b 16,006,651. Total support for section 509(a)(1) test: Enter line 24, column (e) 26c 18 <u>789,023</u> Add: Amounts from column (e) for lines: 95,392. 26d ,013,932. 26e 4,992,719. e Public support (line 26c minus line 26d total) Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 93<u>.6</u>65<u>6%</u> Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your 27 records to show the name of, and total amounts received in each year from, each "disgualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2004)(2003)(2006)(2005)b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2004)(2003)Add: Amounts from column (e) for lines: 16 15 27c N/A 20 d Add: Line 27a total and line 27h total \triangleright 27d N/A e Public support (line 27c total minus line 27d total) 27e N/A N/ATotal support for section 509(a)(2) test: Enter amount on line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) % 27g 27h N/A % h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to

show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your

NONE

return Do not include these grants in line 15.

723131 12-27-07

Schedule A (Form 990 or 990-EZ) 2007 EDUCATION INTERNATIONAL

Private School Questionnaire (See page 9 of the instructions.)

N/A

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
20	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
29	instrument, or in a resolution of its governing body?	29		<u> </u>
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,			
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31		ļ <u>.</u>
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	_		
		_ _ _		
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		<u> </u>
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student		1	
	admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	_		_
33	Does the organization discriminate by race in any way with respect to:	-	i	
а	Students' rights or privileges?	. <u>33a</u>		
b	Admissions policies? .	33b		
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	-	ļ
е	Educational policies?	33e		 -
f	Use of facilities?	33f		<u> </u>
g	Athletic programs?	33g	-	
h	Other extracurricular activities?	33h		1
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	_		
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	L	1

Schedule A (Form 990 or 990-EZ) 2007

ASSOCIATION FOR BETTER LIVING & Schedule A (Form 990 or 990-EZ) 2007 EDUCATION INTERNATIONAL 95-4188814 Part VI-A | Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768) if you checked "a" and "limited control" provisions apply if the organization belongs to an affiliated group. Check ► b (a) Limits on Lobbying Expenditures Affiliated group To be completed for all totals electing organizations (The term "expenditures" means amounts paid or incurred.) N/A 36 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) Other exempt purpose expenditures 39 Total exempt purpose expenditures (add lines 38 and 39) 40 41 Lobbying nontaxable amount. Enter the amount from the following table -If the amount on line 40 is -The lobbying nontaxable amount is -Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 41 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 42 Grassroots nontaxable amount (enter 25% of line 41) 42 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38. 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.) **Lobbying Expenditures During 4-Year Averaging Period** N/A Calendar year (or (b) (e) (a) (c) (d) 2007 2006 2005 2004 Total fiscal year beginning in) Þ 45 Lobbying nontaxable amount 46 Lobbying ceiling amount (150% of line 45(e)) 47 Total lobbying expenditures 48 Grassroots nontaxable amount 49 Grassroots ceiling amount (150% of line 48(e)) 50 Grassroots lobbying expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.) During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (Include compensation in expenses reported on lines c through h.)

- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Yes	No	Amount
	Х	
	X	
	Х	
	X	
	Х	
	X	
	X	
	Х	

ASSOCIATION FOR BETTER LIVING & Schedule A (Form 990 or 990-EZ) 2007 EDUCATION INTERNATIONAL 95-4188814 Page 7 Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.) Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting organization to a noncharitable exempt organization of: Yes No 51a(i) (i) Cash (ii) Other assets **b** Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization (ii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets b(iv) (iv) Reimbursement arrangements b(v) (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations b(vi) X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A (b) Amount involved (a) Line no. Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements 52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ີ Yes X No b If "Yes," complete the following schedule: N/A (c) Description of relationship (b) Name of organization Type of organization

ORM 95	990 PAGE 2						990							
Asset No	Description	Date Acquired M	Method	Life	C CINB	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
261	261 COMPUTERS (INT)	07/01/07	IS	2.00	HX16	17,196.	·			17,196.			1,720.	1,720.
262	FURNITURE & EQUIPMENT (INT)	07/01/07	SI 1	7.00	HX16	1,663.				1,663.			119.	119.
263	SOFTWARE (INT)	11/01/07 S	3	3.00	9 TAH	2,229.				2,229.			124.	124.
264	COMPUTERS (UK)	07/01/07	TS	5.00	HX11 6	123.				123.			12.	12.
265	FURNITURE & EQUIPMENT (WUS)	8 20/60/60	- IS	7.00	HX116	450.				450.	-		54.	54.
266	FURNITURE & EQUIPMENT (WUS)	11/02/07 8	SL	7.00	HX116	350.		-		350.			88	φ.
267		s /0/90/E0	SI.	3.00	HX1 6	1,000.				1,000.			278.	278.
278		07/01/07	SI.	3.00	HX16	1,595.				1,595.			266.	266.
289	EXCHANGE DIFFERENCE ADJUSTMENT	07/01/07 L	. 7		нх	<652.>				<652.>	<926.>		0	<926.>
7	BUILDING IMPROVEMENTS (INT)	08/01/00	SI	20.00 HY	HX1 6	815,515.		,		815,515.	261,646.		40,776.	302,422.
ω	BUILDING IMPROVEMENTS (INT)	01/25/01 8	SI.	20.00 HY	9 txH	10,505.				10,505.	3,106.	_	525.	3,631.
	* 990 PAGE 2 TOTAL -					849,974.		<u> </u>		849,974.	263,826.		43,882.	307,708.
_ ਜ	BUILDING - ABLE (INT)	08/01/00	SI 4	40.00	HX1 6	730,574.				730,574.	117,194.		18,264.	135,458.
	* 990 PAGE 2 TOTAL -			_		730,574.				730,574.	117,194.		18,264.	135,458.
11	COMPUTERS (INT)	01/01/00	- IS	5.00	HX16	452,409.				452,409.	452,409.		.0	452,409.
12	COMPUTERS (INT)	07/01/01 8	SI.	3.00	HX11 6	2,267.		<u></u> -		2,267.	2,267.		0	2,267.
13	COMPUTERS (INT)	09/23/01 8	SI.	3.00	HX11 6	912.				912.	912.		0	912.
14	14 COMPUTERS (ANZO)	08/29/01	SL	3.00	HY1 6	317.				317.	317.		0	317.
728111 08-23-07						(D) - Asset disposed	pesed		*	ITC, Salvage,	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	iercial Revital	ization Deduct	ion, GO Zone

FORM 95	FORM 990 PAGE 2	- - 	ł	Ì	ļ		990	j					,	
Asset	Description	Date Acquired	Method	Lıfe	00E>	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
15	COMPUTERS (CANADA)	07/01/00	SL	5.00	HY <u>1</u> 6	407.				407.	407.		0	407.
16	COMPUTERS (CANADA)	07/01/01	SI.	5.00	HX16	420.	<u> </u>			420.	420.		0	420.
18	COMPUTERS (UK)	02/01/01	SI.	3.00	9 ТАН	680.				680.	680.		0	680.
19	(D)COMPUTERS (WUS)	07/01/98	SI.	5.00	нх 1 6	413.				413.	413.		0	
20	(D)COMPUTERS (WUS)	07/01/99	SI	5.00	HY16	1,262.				1,262.	1,262.		0	
21	(D)COMPUTERS (WUS)	10/01/00	SI	5.00	нхц 6	2,410.				2,410.	2,410.			
22	(D)COMPUTERS (WUS)	11/15/01	SI	5.00	HY16	378.				378.	378.		0	
34	COMPUTERS (INT)	05/01/02	SL	5.00	HX1 6	4,431.				4,431.	4,135.		296.	4,430.
35	COMPUTERS (INT)	06/01/02	SI	3.00	HX16	330.				330.	330.		ö	330.
36	COMPUTERS (INT)	07/01/02	SI	3.00	HXI 6	210.				210.	210.		0.	210.
37	COMPUTERS (INT)	10/01/02	SL	3.00	9 TXH	157.		_	_	157.	157.			157.
38	COMPUTERS (INT)	11/01/02	SL	3.00	HX1 6	248.				248.	248.		0	248.
39	COMPUTERS (INT)	12/01/02	SL	3.00	9 ТХН	526.				526.	526.		0	526,
46	COMPUTERS (EU)	07/15/02	SL	5.00	HX1 6	2,432.				2,432.	2,187.		245.	2,430.
47	COMPUTERS (WUS)	06/10/02	TS	3.00	HY16	383.	_			383.	383.		.0	383.
48	COMPUTERS (WUS)	09/24/02	SL	3.00	нх1 6	450.				450.	450.		0	450.
64	COMPUTERS (INT)	07/01/03	TS.	5.00	HY1 6	9,854.				9,854.	6,898.		1,971.	8,869.
79	79 (D)COMPUTERS (WUS)	07/15/03	SL	3.00	HX16	593.				593.	593.		0.	
728111 08-23-07					=	(D) - Asset disposed	peso		•	ITC, Salvage,	Bonus, Comm	iercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone

FORM 9	FORM 990 PAGE 2		ŀ		ļ		990		ļ					
Asset	Description	Date Acquired	Method	Life	S S S	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
80	(D)COMPUTERS (WUS)	11/10/03	SL	3.00	9 TAH	297.				297.	297.		0	
81	(D)COMPUTERS (WUS)	12/24/03	ЗГ	3.00	9 ТАН	100.				100.	100.		0	
8	(D)COMPUTERS (ANZO)	07/01/03		5.00	9 TXH	526.				526.	368.		0	
83	COMPUTERS (EU)	07/01/03	SL	5.00	9ТАН	469.				469.	329.		94.	423.
84	COMPUTERS (UK)	07/01/03	ТS	5.00	9 ТАН	378.			-	378.	266.		.92	342.
85	COMPUTERS (INT)	07/01/04	TS.	5.00	ните	51,737.				51,737.	25,868.		10,347.	36,215.
98	(D)COMPUTERS (WUS)	05/24/04	SI	3.00	9 TXH	116.	·			116.	101.		0	
87	(D)COMPUTERS (WUS)	08/30/04	SL	3.00	9 TAH	175.				175.	135.		0.	
88	COMPUTERS (WUS)	12/26/04	SL	3.00	9 TXH	329.				329.	220.		109.	329.
83	COMPUTERS (EUS)	07/01/04	SL	5.00	9 Тхн	550.				550.	275.		110.	385.
06	COMPUTERS (EU)	07/01/04	SL	5.00	9 ТАН	2,102.				2,102.	1,050.		420.	1,470.
91	COMPUTERS (INT)	07/01/05	Ts	5.00	9Тхн	55,315.				55,315.	16,551.		11,063.	27,614.
92	COMPUTERS (CANADA)	07/01/05	7S	5.00	9 ТХН	497.				497.	149.		.66	248.
93	COMPUTERS (EU)	07/01/05	TS.	5.00	9Тхн	1,569.				1,569.	471.		314.	785.
94	COMPUTERS (UK)	07/01/05	SL	5.00	9 TAH	258.				258.	78.		52.	130.
95	COMPUTERS (WUS)	02/01/05	TS.	3.00	9ТХН	373.				373.	174.		124.	298.
96	COMPUTERS (WUS)	03/01/05	SL	3.00	HW1 6	265.				265.	120.		88.	208.
97	COMPUTERS (INT) 2005 ADJUSTMENT	07/01/05	SL	5.00	HY116								0.	
728111 08-23-07					Ŭ	(D) - Asset disposed	peso		*	ITC, Salvage,	Bonus, Comm	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone

FORM 9	990 PAGE 2						990							
Asset No	Description	Date Acquired	Method	Lıfe	ِيَّةِ Voc>	Unadjusted Cost Or Basis	Bus ss % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
86	COMPUTERS (INT)	07/01/06	SI	5.00	нхре	6 34,467	•			34,467.	3,447.		6,893.	10,340.
66		07/01/06	SL	5.00	HATE	944	•			344.	34.		.69	103.
200	(D)EXCHANGE DIFFEREN COMPUTERS	01/01/02		0000	HXT	6 122	•			122.	126.		0	
201	EXCHANGE DIFFERENCE COMPUTERS	01/01/02		000.	HXT	6 205				205.	142.		0	142.
202		01/01/02		000.	HX11 (6 118				118.	115.		0	115.
203	COMPUTERS	01/01/02		000.	HXH-		<u>.</u>		-				0	
239	COMPUTERS (WUS)	07/01/06	SI	3.00	HX I	6 1,667.				1,667.	299.		556.	855.
240		07/01/06	SL	3.00	H . 	6 1,774	•			1,774.	296.		591.	887.
241	EXCHANGE DIFFERENCE ADJUSTMENT	07/01/06	SL	3.00	- 	6 <578				<578.>			0.	
	* 990 PAGE 2 TOTAL -				· ·	634,667	•	_		634,667.	529,003.		33,517.	556,334.
23	FURNITURE & EQUIPMENT (INT)	07/01/00	SL	7.00	HAT	6 780,404	•			780,404.	724,659.		55,745.	780,402.
24	FURNITURE & E	07/01/01	SL	7.00	HXI (6 1,051				1,051.	825.		150.	975.
26	(D)FURNITURE (WUS)	07/01/98	SI	7.00	HATE	6 857				857.	857.		0.	
27	(D)FURNITURE (WUS)	07/01/99	SL	7.00	HXI	6 2,297				2,297.	2,297.		0.0	
28	(WUS)	09/30/00	SL	7.00	HXT (9 607				607.	544.		0	
40	FURNITURE & EQUIPMENT (INT)	03/01/02	1S I	7.00	- 	6 232				232.	160.		33.	193.
41	FURNITURE & EQUIPMENT (INT)	05/01/02	SL	7.00	нж	6 473				473.	317.		68•	385.
42	42 PURNITURE & EQUIPMENT (INT)	10/01/02	SL	7.00	HAT	6 897				897.	544.		128.	672.
728111 08-23-07						(D) - Asset disposed	pesodsij		•	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	Bonus, Comm	nercial Revital	ization Deduc	tion, GO Zone

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	471 5,481 195 247	HY16 HY16 HY16 HY16 HY16 HY16
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	195	HX16 HX16 HX16
	247	9 TAN 9 PAN
		HY116
	47,504	HX16
	925	
<u> </u>	<701	.000 HY16 <701
<u>.</u>	<25	.000 HYD 6
	088'890	7.00 HY16 68,880
	238	7.00 HY16 238
	4,005,	7.00 HY16 4,005
	1,078.	7.00 HY16 1,078
	957	7.00 HY16 957
	434.	7.00 HYL6 434.

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(D) - Asset disposed

FORM	990 PAGE 2			ſ			966							
Asset	Description	Date Acquired Me	Method	Lıfe	υος>	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 2 TOTAL -			·		918,488.			<u> </u>	918,488.	749,943.		74,767.	820,026.
	3 LAND - ABLE (INT)	07/01/00 L			HX	,315,032.				1,315,032.			0	
	* 990 PAGE 2 TOTAL -		-			,315,032.	-	- -		1,315,032.			ċ	.0
	5 LAND IMPROVEMENTS (INT)	01/01/00	ST	5.00	HX1 6	15,941.	-			15,941.	15,941.		0	15,941.
	* 990 PAGE 2 TOTAL -					15,941.				15,941.	15,941.		,0	15,941.
<u></u>	33 SOFTWARE (INT)	01/01/00	SI 3	3.00	HX1 6	1,287.				1,287.	1,287.		0	1,287.
4	44 SOFTWARE (INT)	07/01/02	Sr 3	3.00	HX1 6	495.				495.	495.			495.
4	45 SOFTWARE (INT)	11/01/02 s	SI.	3.00	HY1 6	1,200.				1,200.	1,200.		0	1,200.
	76 SOFTWARE (INT)	07/01/03	SI.	3.00	HX16	2,647.		-		2,647.	2,647.			2,647.
21	215 SOPTWARE (INT)	07/01/04 SL		3,00	HX1 6	5,005.		1		5,005.	4,170.		835.	5,004.
216	6 SOPTWARE (INT)	07/01/05	SI.	3.00	HY1 6	6,240.				6,240.	3,120.		2,080.	5,200.
24	248 SOFTWARE (INT)	01/01/06	SI.	3.00	нхи е	3,010.		•		3,010.	502.		1,003.	1,505.
	* 990 PAGE 2 TOTAL -					19,884.				19,884.	13,421.		3,918.	17,338.
<u> </u>	30 MOTOR VEHICLE - CIVIC	01/01/00 SE		3.00	HX1 6	14,920.				14,920.	14,920.		0	14,920.
m ⁻	31 MOTOR VEHICLE - CAMRY	01/01/00	SI.	3.00	HX16	19,537.				19,537.	19,537.		Ö	19,537.
22	227 MOTOR VEHICLE - WUS	03/07/04 8	Sr —	3.00	9 тан	8,500.	_			8,500.	8,027.		473.	8,499.
249	9 MOTOR VEHICLE - ACURA	03/07/04 S	SI.	3.00	HX1 6	5,900.			-	5,900.	4,917.		983.	5,900.
25	250 COMPUTERS (EUS)	07/01/07	SI 5	5.00	HY1 6	2,983.			-	2,983.			298.	298.
728111 08-23-07	7)	(D) · Asset disposed	peso		•	ITC, Salvage,	Bonus, Comm	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone

2007 DEPRECIATION AND AMORTIZATION REPORT

FORM	FORM 990 PAGE 2				-		990						}	
Asset	Description	Date Acquired	Method	Lıfe	Soc>	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 2 TOTAL -					51,840,				51,840.	47,401.		1,754.	49,154.
	238 ROUNDING ERRORS	01/01/05	SL	1.00	HX1 6					<1.>			0	_
						<1.				<1.>	.0		0	0
	* GRAND TOTAL 990 PAGE 2 DEPR					4,536,399.				4,536,399.	1,736,729.		176,102.	1,901,959.
							•							-
						_								
-			· · · · · · · · · · · · · · · · · · ·											
728111 08-23-07	11					(D) - Asset disposed	pesoc		*	ITC, Salvage,		ercial Revita	lization Deduct	tion, GO Zone

FOOTNOTES

STATEMENT 1

OFFICERS, DIRECTORS AND TRUSTEES WHO ARE ALSO EMPLOYEES ARE COMPENSATED ONLY FOR THEIR EMPLOYMENT DUTIES AND NOT FOR THEIR DUTIES AS OFFICERS, DIRECTORS AND TRUSTEES.

FORM 990	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 2
INCOME			
1. GROSS RECEIPTS		600,049	
2. RETURNS AND ALLOWANCE 3. LINE 1 LESS LINE 2.	ES		600,049
	LINE 13) LESS LINE 4)	232,150	367,899
COST OF GOODS SOLD			
40		108,662 302,426	
10. OTHER COSTS 11. ADD LINES 6 THROUGH	10		411,088
12. INVENTORY AT END OF 13. COST OF GOODS SOLD (178,938	232,150

KAPOLEI, HI

FORM 990	OTHE	REXPENSES		STATEMENT	
	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)	
DESCRIPTION	TOTAL	SERVICES	AND GENERAL	FUNDRAISI	NG
PROMOTION	270,851.	269,734.	757.		60
STAFF TRAINING	406,277.	335,955.	60,558.	9,7	
INSURANCE	63,876.	52,239.	10,372.	1,2	65 89
REFERRAL FEES ROYALTIES	166. 87,567.	77. 87,567.		•	07
DELIVERY COSTS	77,420.	77,420.			
TAXES, DUES & FEES	20,892.	17,283.	3,389.	2:	20
ADMINISTRATIVE COSTS	42,550.	35,023.	6,648.		79
TOTAL TO FM 990, LN 43	969,599.	875,298.	81,724.	12,5	77
FORM 990	CASH GRANTS AI	ND ALLOCATIONS HERS		STATEMENT	
CLASS OF ACTIVITY/DONEE COMMUNITY MORALITY THE WAY TO HAPPINESS IN		ORESS		AMOUNT 7,2	
201 E. BROADWAY GLENDALE, CA 91205 CRIMINAL REHABILITATION CRIMINON INTERNATIONAL 7060 HOLLYWOOD BLVD #22	PROGRAM			3,5	80
LOS ANGELES, CA 90028 DRUG REHABILITATION NARCONON CANADA MONTREAL, CANADA				7	03
SOCIAL BETTERMENT ABLE EUROPE FOUNDATION COPENHAGEN, DENMARK				34,7	38
DRUG EDUCATION NARCONON HAWAII 90-1011 LEXINGTON				19,4	00

ASSOCIATION FOR BETTER LIVING	& EDUCATIO		95-4188	814
DRUG EDUCATION NARCONON INTERNATIONAL 4652 HOLLYWOOD BLVD LOS ANGELES, CA			64,6	 25.
CRIMINAL REHABILITATION PROGRAM SECOND CHANCE PROGRAM INC 12157 W. LINEBAUGH AVE #356 TAMPA, FL			18,2	25.
EDUCATION PRESET CHARITABLE TRUST 201 HIGH STREET LONDON, ENGLAND			4	97.
EDUCATION APPLIED SCHOLASTICS EUROPE NORREGADE 26 COPENHAGEN, DENMARK			45,0	07.
TOTAL INCLUDED ON FORM 990, PART	II, LINE 22B		194,0	00.
FORM 990 OT	HER INVESTMENTS		STATEMENT	5
DESCRIPTION		VALUATION METHOD	AMOUNT	
CERTIFICATES OF DEPOSIT		COST	3,729,0	00.
TOTAL TO FORM 990, PART IV, LINE	56, COLUMN B		3,729,0	00.
FORM 990 DEPRECIATION OF AS	SETS NOT HELD FOR	RINVESTMENT	STATEMENT	6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALU	E
BUILDING - ABLE (INT) LAND - ABLE (INT) LAND IMPROVEMENTS (INT) BUILDING IMPROVEMENTS (INT) BUILDING IMPROVEMENTS (INT) COMPUTERS (INT) COMPUTERS (INT) COMPUTERS (INT)	730,574. 1,315,032. 15,941. 815,515. 10,505. 452,409. 2,267. 912.	135,458. 0. 15,941. 302,422. 3,631. 452,409. 2,267. 912.	595,1 1,315,0 513,0 6,8	32. 0. 93.
COMPUTERS (ANZO) COMPUTERS (CANADA)	317. 407.	317. 407.		0. 0.

ASSOCIATION FOR BETTER LIVING &	EDUCATIO		32-4100014
COMPUTERS (CANADA)	420.	420.	0.
COMPUTERS (UK)	680.	680.	0.
FURNITURE & EQUIPMENT (INT)	780,404.	780,404.	0.
FURNITURE & EQUIPMENT (INT)	1,051.	975.	76.
MOTOR VEHICLE - CIVIC	14,920.	14,920.	0.
MOTOR VEHICLE - CAMRY	19,537.	19,537.	0.
SOFTWARE (INT)	1,287.	1,287.	0.
COMPUTERS (INT)	4,431.	4,431.	0.
COMPUTERS (INT)	330.	330.	0.
COMPUTERS (INT)	210.	210.	0.
COMPUTERS (INT)	157.	157.	0.
COMPUTERS (INT)	248.	248.	0.
COMPUTERS (INT)	526.	526.	0.
FURNITURE & EQUIPMENT (INT)	232.	193.	39.
FURNITURE & EQUIPMENT (INT)	473.	385.	88.
	897.	672.	225.
FURNITURE & EQUIPMENT (INT)	300.	219.	81.
FURNITURE & EQUIPMENT (INT)			0.
SOFTWARE (INT)	495.	495.	
SOFTWARE (INT)	1,200.	1,200.	0.
COMPUTERS (EU)	2,432.	2,432.	0.
COMPUTERS (WUS)	383.	383.	0.
COMPUTERS (WUS)	450.	450.	0.
COMPUTERS (INT)	9,854.	8,869.	985.
FURNITURE & EQUIPMENT (INT)	480.	310.	170.
SOFTWARE (INT)	2,647.	2,647.	0.
COMPUTERS (EU)	469.	423.	46.
COMPUTERS (UK)	378.	342.	36.
COMPUTERS (INT)	51,737.	36,215.	15,522.
COMPUTERS (WUS)	329.	329.	0.
COMPUTERS (EUS)	550.	385.	165.
COMPUTERS (EU)	2,102.	1,470.	632.
COMPUTERS (INT)	55,315.	27,614.	27,701.
COMPUTERS (CANADA)	497.	248.	249.
COMPUTERS (EU)	1,569.	785.	784.
COMPUTERS (UK)	258.	130.	128.
COMPUTERS (WUS)	373.	298.	75.
COMPUTERS (WUS)	265.	208.	57.
COMPUTERS (INT)	34,467.	10,340.	24,127.
COMPUTERS (UK)	344.	103.	241.
FURNITURE & EQUIPMENT (EU)	5,481.	2,741.	2,740.
FURNITURE & EQUIPMENT (UK)	247.	123.	124.
FURNITURE & EQUIPMENT (INT)	47,504.	16,965.	30,539.
FURNITURE & EQUIPMENT (EU)	925.	462.	463.
EXCHANGE DIFFERENCE CAN			
COMPUTERS	205.	142.	63.
EXCHANGE DIFFERENCE UK			
COMPUTERS	118.	115.	3.
EXCHANGE DIFFERENCE EU	1101		-
COMPUTERS	3.	0.	3.
EXCHANGE DIFFERENCE EU F&E	<701.>	223.	<924.>
EXCHANGE DIFFERENCE UK F&E	<25.>	0.	<25.>
SOFTWARE (INT)	5,005.	5,005.	0.
SOFTWARE (INT) SOFTWARE (INT)	6,240.	5,200.	1,040.
BOLIMARE (INT)	0,240.	3,200.	1,040.

ASSOCIATION FOR BETTER LIVING & EI	DUCATIO		95-4188814
MOTOR VEHICLE - WUS	8,500.	8,500.	0.
ROUNDING ERRORS	<1.>	0.	<1.>
COMPUTERS (WUS)	1,667.	855.	812.
COMPUTERS (CAN)	1,774.	887.	887.
EXCHANGE DIFFERENCE ADJUSTMENT	<578.>	0.	<578.
FURNITURE & EQUIPMENT (INT)	68,880.	14,760.	54,120.
FURNITURE & EQUIPMENT (WUS)	238.	62.	176.
FURNITURE & EQUIPMENT (WUS)	4,005.	715.	3,290.
FURNITURE & EQUIPMENT (WUS)	1,078.	180.	898.
FURNITURE & EQUIPMENT (CAN)	957.	205.	752.
EXCHANGE DIFFERENCE ADJUSTMENT	434.	434.	0.
SOFTWARE (INT)	3,010.	1,505.	1,505.
MOTOR VEHICLE - ACURA	5,900. 2,983.	5,900. 298.	0.
COMPUTERS (EUS)	17,196.		2,685.
COMPUTERS (INT) FURNITURE & EQUIPMENT (INT)	1,663.	1,720. 119.	15,476. 1,544.
SOFTWARE (INT)	2,229.	124.	2,105.
COMPUTERS (UK)	123.	12.	111.
FURNITURE & EQUIPMENT (WUS)	450.	54.	396.
FURNITURE & EQUIPMENT (WUS)	350.	8.	342.
COMPUTERS (WUS)	1,000.	278.	722.
EXCHANGE DIFFERENCE ADJUSTMENT	1,595.	266.	1,329.
EXCHANGE DIFFERENCE ADJUSTMENT	<652.>	<926.>	
FORM 990 OTH	HER ASSETS		STATEMENT 7
DESCRIPTION		BEGINNING OF YEAR	END OF YEAR
TRADEMARK COSTS, NET OF AMORTIZATION		29.	17.
DEPOSITS	_	160,161.	174,588.
TOTAL TO FORM 990, PART IV, LINE 58	=	160,190.	174,605.
FORM 990 OTHER I	LIABILITIES		STATEMENT 8
		DECTMITY	
DESCRIPTION	_	BEGINNING OF YEAR	END OF YEAR
SALES TAX PAYABLE	-	2,893.	362.
PAYROLL TAX PAYABLE		4,155.	0.
CONTRA		613.	231.
ROYALTIES PAYABLE		^	13,352.
		0.	13,332.
TOTAL TO FORM 990, PART IV, LINE 65	_	7,661.	13,945.

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STATEMENT

FORM 990

TORM 350 OTHER REVENUE N				EMENI 9
DESCRIPTION			A	MOUNT
PRODUCTION OF MATERIALS FOR RESALE	(COST OF GOODS	S SOLD)		232,150.
TOTAL TO FORM 990, PART IV-A				232,150.
FORM 990 OTHER EXPENSES	NOT INCLUDED ON	FORM 990	STATI	EMENT 10
DESCRIPTION			Al	MOUNT
PRODUCTION OF MATERIALS FOR RESALE	(COST OF GOODS	S SOLD)		232,150.
TOTAL TO FORM 990, PART IV-B			=	232,150.
FORM 990 PART V-A - LIST OF CU TRUSTEES A	RRENT OFFICERS,		STATI	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
CATHERINE SHEA WHITTLE (SEE STMT	TRUSTEE			
1) 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	40.00	3,587.	0.	0.
RICHARD FEAR 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	DIRECTOR 0.00	0.	0.	0.
GREG HUGHES 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	DIRECTOR 0.00	0.	0.	0.
RENA WEINBERG (SEE STMT() 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	PRESIDENT 40.00	2,658.	0.	0.
GWENDA BYRNE (SEE STMT 1) 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	SECRETARY 40.00	3,683.	0.	0.

OTHER REVENUE NOT INCLUDED ON FORM 990

ASSOCIATION FOR BETTER LIVING &	EDUCATIO		95-43	188814
JOAN TOFIL (SEE STMT 1) 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	TREASURER 40.00	3,752.	0.	0.
LAURIE ZURN (SEE STMT 1) 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	DIRECTOR 40.00	2,214.	0.	0.
DON CUNNINGHAM 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	TRUSTEE 0.00	0.	0.	0.
DEBORAH HUGHES 7065 HOLLYWOOD BLVD. LOS ANGELES, CALIF. 90028	TRUSTEE 0.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART	V-A	15,894.	0.	0.

FORM 990 EXPLANATION OF RELATIONSHIP STATEMENT 12 PART V-A, LINE 75B

INDIVIDUAL'S NAME

TITLE OR ROLE

GREG HUGHES

DIRECTOR

INDIVIDUAL'S NAME

TITLE OR ROLE

DEBORAH HUGHES

TRUSTEE

EXPLANATION OF RELATIONSHIP

DEBORAH AND GREG HUGHES ARE MARRIED.

FORM 990

NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST STATEMENT

13

NAME OF COUNTRY

CANADA DENMARK

UNITED KINGDOM

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 14

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93A PAYMENTS FROM APPLIED SCHOLASTICS INTERNATIONAL, AN AFFILIATED EXEMPT ORGANIZATION IN THE AMOUNT OF \$577,840 PAYMENTS FROM NARCONON INTERNATIONAL, AN AFFILIATED EXEMPT ORGANIZATION IN THE AMOUNT OF \$1,896,514 PAYMENTS FROM CRIMINON, AN AFFILIATED EXEMPT ORGANIZATION IN THE AMOUNT OF \$14,872

93B ABLE LICENSES ORGANIZATIONS TO USE ITS SOCIAL BETTERMENT TECHNOLOGIES.

FEES FOR RAISING FUNDS FOR PROGRAMS LICENSED BY ABLE. 93C

102 SALES OF EDUCATIONAL MATERIALS.

95-4188814

103A FEES FOR REFERRALS TO OTHER EXEMPT ORGANIZATIONS.

103B COMMISSIONS RECEIVED FROM SALE OF EDUCATIONAL MATERIALS.

FORM 990 NAME OF FOREIGN COUNTRY IN WHICH STATEMENT 15
ORGANIZATION HAS AN OFFICE

NAME OF COUNTRY

CANADA DENMARK UNITED KINGDOM

SCHEDULE A	OTHER INCOME			
DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT
COMMISSIONS	6,000.	6,532.	12,956.	10,646.
EXCHANGE GAINS FROM NON US BRANCHES	0.	0.	22,130.	37,128.
TOTAL TO SCHEDULE A, LINE 22	6,000.	6,532.	35,086.	47,774.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 17

DESCRIPTION OF PROGRAM SERVICE ONE

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 social betterment programs of four affiliated charitable and educational organizations.

In particular ABLE International addresses four fields of social betterment through the programs it supports:

- Literacy and education under Applied Scholastics International
- Morality and values under The Way to Happiness Foundation International
- Drug rehabilitation and drug abuse prevention under Narconon International
- Criminal rehabilitation under Criminon International

ABLE assists these organizations by continually reviewing their programs and suggesting ways they can be made more responsive to the public or otherwise improved, both in the short-term and long-term; by developing new programs; by assisting in the preparation, publication and dissemination of their educational materials (books, tapes, CDs and DVDs); by assisting in the development and execution of their fundraising programs; by assisting in the design and execution of their promotional programs; by helping them locate, acquire and construct or remodel new facilities; and by generally being available to provide whatever assistance the social betterment organizations may call on ABLE to provide them.

In 2007, the number of groups established to implement the social betterment programs increased to 1303 with new groups formed in 8 new countries: Nigeria, Belgium, Ukraine, Kenya, Congo, Iran, Syria and Qatar and a group formed in the US territory of Guam.

ABLE has actively assisted The Way to Happiness Foundation International in its international campaign, "Creating a World of Trust, Honesty and Competency," intended to spread the commonsense guide to more ethical living, The Way to Happiness. In 2007 ABLE assisted in the launch and distribution of 2,800 DVDs containing 21 PSAs embodying all of the precepts of The Way to Happiness and in distributing the PSAs to 111 television stations across the United States with a viewership of 41 million.

ABLE also assisted Criminon International with the establishment of an on-site rehabilitation program in the Sylmar Juvenile Hall in California. Internationally, ABLE played a major role in gaining the approvals for and assisting in the establishment of the Criminon program in the 17 prisons of Rwanda where there is a pressing need for programs to re-integrate many tens of thousands of prisoners who had participated in the Rwandan genocide of 1994.

ABLE assisted the International Academy of Detoxification Specialists with a fund raising event in NY attended by 150 people including members of the fire and police unions, city councilmen and celebrities. As a result of this and earlier fund raising events which ABLE assisted with, 108 rescue workers were able to complete the Hubbard detoxification program, and a further 120 men and women to receive rehabilitative services in 2007. All project services are provided to rescue workers at no cost.

ABLE also assisted the International Academy of Detoxification Specialists to establish a project to detoxify the police officers that have been exposed to drugs and toxic chemicals used in the manufacture of methamphetamines in illegal meth labs. With funding from the Utah legislature and the Office of the Attorney General, the project began operation in 2007 and by year-ending approximately 20 police officers had completed the Hubbard detoxification program.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 18

DESCRIPTION OF PROGRAM SERVICE TWO

Materials Compilations and Publications

ABLE International published materials for broad distribution books and other materials for use by its affiliated social betterment organizations. These included life skills materials for use in prison on-site programs, correspondence course and workshops; drug rehabilitation course materials; drug rehabilitation and drug education courses; as well as children's The Way to Happiness activity book. ABLE also developed and piloted materials for 8 drug detoxification and drug education courses and for literacy programs including a course for each of 12 precepts of The Way to Happiness.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 19

DESCRIPTION OF PROGRAM SERVICE THREE

Public Information on the Solution to Societal IIIs

ABLE funded a multi-year study of the delivery of the Narconon Drug Education curriculum to high school students in Hawaii and Oklahoma, which was completed and written up in 2007. Further, two authoritative white papers were written, describing the Narconon rehabilitation program and the drug education program. ABLE established a program in Narconon Arrowhead to implement a procedure for the routine outcome monitoring of Narconon graduates and staticizing Narconon's long-term results for purposes of quality control and ensuring that the graduates do well.

Also, ABLE coordinated on an Israeli study of the Criminon program in several prisons in that country.

STATEMENT(S) 19

4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization 990 (Including Information on Listed Property)

► See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates identifying number ASSOCIATION FOR BETTER LIVING & **EDUCATION INTERNATIONAL** FORM 990 PAGE 2 95-4188814 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount. See the instructions for a higher limit for certain businesses 1 125,000. 2 2 Total cost of section 179 property placed in service (see instructions) 500,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- if married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 176,102 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions) 17 MACRS deductions for assets placed in service in tax years beginning before 2007 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and year placed (d) Recovery (e) Convention (a) Depreciation deduction (a) Classification of property in service 19a 3-year property 5-year property b 7-year property 10-year property d 15-year property е 20-year property S/L 25 yrs. 25-year property q 27.5 yrs MM S/L h Residential rental property 27.5 yrs. MM S/L MM S/L 39 vrs. i Nonresidential real property MM S/t Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L 12 yrs. b 12-year S/L 40 yrs MM 40-year C Part IV Summary (see instructions) 21 Listed property Enter amount from line 28 21 22 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 22 176,102. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the

23

portion of the basis attributable to section 263A costs

Form 4562 (2007)

EDUCATION INTERNATIONAL

95-4188814 Page 2

P	art V Listed Proper			ertain ot	her vehic	cles, cell	lular tele	phone	s, certain	compu	ers, and	propert	y used fo	or enterta	ıınment,
	recreation, or Note ; For any			usina the	standar	d milead	ne rate o	r dedu	ctina leasi	e expen	se com	olete oni	v 24a 2	4b colum	nns (a)
	through (c) of	Section A, all	<u> of Section B</u>	, and Sec	ction C ii	f applica	ble								
Sec	ction A - Depreciation	and Other In	formation (C	aution: 3	See the i	instructi	ons for I	ımıts fo	or passeng	ger auto	mobiles.)			
<u>24a</u>	Do you have evidence to	support the bu	siness/investm	<u>ient use cl</u>	aimed?	<u> </u>	es	No	24b If "Y	'es," is	he evide	nce writ	ten?	_ Yes L	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business investmen use percenta	it o	(d) Cost or ther basis	(bus	(e) sis for depr siness/inve use onl	stment	(f) Recovery period		(g) ethod/ evention	Depre	(h) eciation uction	Elec sectio	(i) cted on 179 ost
25	Special allowance for q	ualified Gulf (Opportunity 2	Zone prop	perty pla	ced in s	ervice d	uring t	he tax yea	ar and				-	
_	used more than 50%_ir	a qualified b	usiness use								25				
26	Property used more that	an 50% in a c	qualified busii	ness use:	:										
				%											
_				%									_		
		<u></u> _		%					<u> </u>	<u> </u>	_	<u> </u>	_		
<u>27</u>	Property used 50% or	ess in a quali	ified business	s use									_		
		<u> </u>		%						S/L ·		<u> </u>	_]	
				%						S/L·		<u> </u>		4	
		<u> </u>	L	<u>%</u>		l			L	S/L·				1	
28	Add amounts in column	n (h), lines 25	through 27	Enter her	e and or	n fine 21	, page 1				28	<u> </u>		ļ	
<u>29</u>	Add amounts in column	n (i), line 26 E	nter here an	d on line	7, page	1							29_	L	
				Section	B - Infor	mation	on Use	of Vel	nicles						
	mplete this section for v														
,	ou provided vehicles to se vehicles.	your employe	es, first ansv	ver the q	uestions	ın Secu	ion C to	see ii	you meet	an exce	ption to	complet	ing this :	section it	or .
								Т				 -		T	
	·			1 '	(a)	1 '	(b)	Ι,	(c)	I	(d)	1	(e)	(f	
30	Total business/investment		turing the	Vel	hicle	ve	hicle	 	/ehicle	V6	hicle	Ve	<u>hicle</u>	Ve <u>h</u>	icie
	year (do not include com					<u> </u>		 		 		 		-	
	Total commuting miles	_						 							
32	Total other personal (no	oncommuting)) miles									l		ļ	
	driven		•			-	· · · · · · · · · · · · · · · · · · ·	 		-		├			
33	Total miles driven durin	•								ŀ					
04	Add lines 30 through 3		al una	Vac	No	V	No	Var	. T No	V	T No		l Na	Vac	No.
34	Was the vehicle availab	ne ioi person	iai use	Yes	No_	Yes	No_	Yes	No No	Yes	No_	<u>Yes</u>	No	Yes	No
25	during off-duty hours? Was the vehicle used p	rimanly by a	more	<u> </u>			 	1	+	†	1	 	 		
33	than 5% owner or relat		Hole						ĺ						
36	Is another vehicle availa	•	 nnal	 	 		 	†	+		 	 -			
30	use?	able for perse	Ji iai				1				1	İ			
_		Section C	- Questions	for Emp	lovers V	Vho Pro	vide Ve	hicles	for Use b	v Their	Employ	ees			
Ans	swer these questions to			-	_								re not ii	nore than	5%
	ners or related persons.		,			.pg				,					
	Do you maintain a writt	en policy stat	tement that p	rohibits a	all perso	nal use	of vehic	es, ınc	luding coi	nmutin	g, by you	ir		Yes	No
	employees?		•		•			·							
38	Do you maintain a writt	en policy stat	tement that p	rohibits i	personal	use of v	vehicles	, excep	ot commu	ing, by	your				
	employees? See the in:	structions for	vehicles use	d by corp	oorate o	fficers, c	directors	, or 1%	6 or more	owners					
39	Do you treat all use of	ehicles by er	mployees as	personal	use?										
40	Do you provide more th	an five vehic	les to your er	nployees	, obtain	ınforma	tion fron	n your	employee	s about					
	the use of the vehicles,	and retain th	ne information	received	: ?										
41	Do you meet the requir	ements conc	erning qualifi	ed autom	nobile de	monstra	ation use	e?							
	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Y	es," do n	ot comp	lete Sec	tion B fo	or the c	covered ve	ehicles					
P	art VI Amortization										_				
	(a) Description	of contr	Dat	(b) te amortization	}	(C) Amortizal	bla	ł	(d) Code	}	(e) Amortiza		Δ.	(f) mortization	
			Ua	begins	<u></u>	amoun			section		penod or pe		fe	or this year	
<u>42</u>	Amortization of costs ti	nat begins du	ırıng your 200	07 tax ye	ar.										
					<u> </u>										
					L			Щ.							
	Amortization of costs ti	•	-									43			
44	Total. Add amounts in	column (f) Se	ee the instruc	tions for	where to	o report						44			

Form 886	66 (Rev	. 4-2008)		Page 2
• If you	u are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II ar	nd check	this box . ▶ □
		omplete Part II if you have already been granted an automatic 3-month extension on a previ filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	iously file	d Form 8868.
Part II		Additional (Not Automatic) 3-Month Extension of Time. You must file original	l and or	A COOV
Type or				Identification number
print		Association for Better Living and Education International	95	4188814
File by the	e		For IRS us	e only
extended due date f		7065 Hollywood Blvd		•
filing the		City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
return Securition		Los Angeles CA 90028		
Check t	type	of return to be filed (File a separate application for each return):	-	
☑ Form				Form 6069
=	990 ת			Form 8870
Form		2 1 om 000 1 (11201 01101 11121 12010)		
		t complete Part II if you were not already granted an automatic 3-month extension on	a previo	usly filed Form 8868.
• The bo	ooks	are in the care of ▶ Chelsea Zwan		
Teleph	hone	No. ► (323) 960 3530 FAX No. ► ()	••••••	
		ization does not have an office or place of business in the United States, check this be		
• If this i	is for	a Group Return, enter the organization's four digit Group Exemption Number (GEN) _		If this is
		group, check this box	▶ [and attach a
		names and EINs of all members the extension is for.	- 00	
4 I re	eques		0.08	
5 For	r cale	ndar year .2007, or other tax year beginning, 20, and ending.	<u> </u>	, 20
6 If th	nis ta	x year is for less than 12 months, check reason: Initial return Final return detail why you need the extension. Additional time is needed to compile the information.	Change	in accounting period
		detail why you need the extension	iioii iieci	ssary to prepare

8a If th	his a	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax.		
		nonrefundable credits. See instructions.	8a	s
-		oplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
		d tax payments made. Include any prior year overpayment allowed as a credit and any] 3	
amo	ount	paid previously with Form 8868.	8ь	S
c Bala	ance	Due. Subtract line 8t from line 8a. Include your payment with this form, or, if required, deposit		
with	FTD	coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions,	8c	<u> </u>
		Signature and Verification		
Under penal d is true, co	altas o Direct.	f perjury. I declare that I have examined this form, including accompanying schedules and statements, and to the and complete, and that I am authorized to prepare this form.	e best of m	y knowledge and belief,
Cinnetura >		Title b. Secondary		48.4
Signature >		Title ► Secretary	Date ►	12 August 2008
			E	- ARRA (Day, 4 2000)