Form **990**

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)

OMB No 1545-0047

Department of the Treasury

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

Open to Public

A	For th	ne 2009 ca	alendar	year, or	tax year be	ginning		,	2009, and	d endin	g		, 20	
В	Check If	applicable	Please	C Name o	of organization	Executiv	e Service	Corps A	ffiliate N	etworl	r, Inc	D Empl	oyer identificat	ion number
_		change	use IRS label or	Doing E	Business As							_14	197	5312
_	Name c	_	print or	Number	and street (or P	O box if mail i	s not delivered	to street add	lress) F	Room/su	te	E Telep	hone number	
	nıtıal re	_	type. See	C/O Tr	udy Smith	DUMC - E	30x 3669					(919) 681-	-3536
	Termina	1	Specific Instruc-	City or	town, state o	r country, and	ZIP + 4							
		ed return	tions.		n, NC 277							G Gross	receipts \$	6,509
	Application	on pending	F Nan	ne and add	dress of princi	pal officer:	Ms. Trud	y Smith			H(a) Is the	s a oroup retu	m for affiliates?	Yes No
			Same	as C ab	ove.						1	_	included?	
1_	Tax-ex	empt status	s. 📝 5	501(c) (3) ∢ (insert no) 🔲 4947	(a)(1) or [527			If "N	lo," attach	a list. (see instr	uctions)
		ite: ▶ wv							···		H(c) Group	exemption n		
K	Form of	organization	Z Corp	oration 🔲	Trust Associ	ciation Oth	ner 🕨		L Year o	f formati	on: 2006	M State	of legal domicil	e: NC
Pa	art I	Summ											·	
	1	Briefly de	escribe	the orga	anızatıon's	mission or	most sig	nificant a	ctivities:	ESCA	N is a nati	onally re	cognized	
Φ.		organiza	ation th	nat prom	otes the g	rowth & d	evelopm	ent of its	affiliates	in the	ir mission	of using	volunteer	
Activities & Governance													ough over 3	30
Ë		affiliates	s, over	1,000 no	onprofit or	ganization	ns receive	d consu	lting and	relate	d services	in 2009.		· · · · · · · · · · · · · · · · · · ·
ŏ	2	Check this	box ►	if the	organization d	iscontinued it	ts operations	or dispose	d of more th	han 25%	of its net ass	ets.		
<u>م</u>	3	Number	of votin	ng memb	ers of the	governing	body (Pa	rt VI, line	1a)			. 3	↓	10
98	4	Number	of inde	pendent	voting me	mbers of t	he goverr	ing body	(Part VI,	line 1b)	. 4	<u> </u>	10
ž	5	Total nur	nber of	f employ	ees (Part V	/, line 2a).						. 5	ļ	0
Act	6	Total nur	nber of	f volunte	ers (estima	ite if neces	sary) .					. 6	<u> </u>	15
	7a	Total gro	ss unre	elated bu	isinėss rev	enue from	Part VIII.	çolumn (0	C), line 12	2		. 7a	<u> </u>	0
	b	Net unrel	lated b	usiness t	taxable inc			-T, line 34	<u> 4</u>	<u> </u>	<u> </u>	. 7b	<u> </u>	
	i					CEIV	<u>にし</u>	,}		L	Prior Y	ear	Curren	t Year
	8	Contribut	tions ar	nd grants	g (Part VIII,	line 1h) .	ĬĞ.					11,815		6,500
Ž					e Bean WA		010 9			L			<u></u>	
Revenue	10	Investme	nt inco	me (Part	VIII, colun	nn (A), line	s 3, 4, and	d 7d) .		L		60		9
æ	11	Other rev	enue (l	Part VIII,	column (A	Hines 5,	6d, 8 c, 9c	10c, an	d 11e)					
	12	Total reve	enue-à	dd lines	column (A 8 through	Hamust leg	uai Flart Vi	i, column	(A), line 1	12)		11,875		6,509
	13	Grants a	nd simi	ilar amou	ınts paid (f	Part IX, col	umn (A).	ines 1-3)		L				
	1				nembers (P					1 1			1	
Ses	1				tion, employ			-	. lines 5–1	10) [
Expenses					fees (Part I)					. L			<u> </u>	
Ä	į.			_	es (Part IX, o					[
			_		, column (A			f-24f)				10,408		3,411
					es 13-17 (r			-). line 25))[10,408		3,411
	19				Subtract line				,,	<u> [</u>		1,467		3,098
Assets or designation								·		E	Beginning of C	urrent Year	End of	Year
sets alan	20	Total ass	ets (Pa	art X. line	16)							13,727		15,575
A B	21	Total liab	•	-	•							1,250		0
Fund /					nces. Subti	ract line 21	from line	20.	<u> </u>			12,477		15,575
Pa	rt II	Sign	ature	Block										
													to the best of n	
		and belie	i, it is itu	ie, correct,	and complete	Declaration	or preparer	(other than	officer) is ba	ased on a	ali intormation	or which p	reparer has any	/ knowleage.
Sig	n			all	E /-	1/8/1	Enc	4				ma	14,2	010
He	re	1,	ature of c		\sim \times						Da	te d	•	
		L	OA	21118	<u> </u>)/EDE/	RICH	, 1R	FASH!	RER				
		Туре	or print	name and	title									
		Preparer's	s						Date		eck if		identifying numb	per
Paid self- employed (see instructions)														
		ļ										ļ		
-	oarer's Only	rimsna		ours 🔪							EIN	>	:	
U36	Only	if self-em address,		+ 4							Phone r	10. ▶ ()	
Ma	y the				with the pre	parer sho	wn above	? (see ins	tructions	s) .	· · · ·			s No
					duction Act						Cat. No. 1	1282Y -		990 (2009)
. •••	, , , , , ,	,				, 50						6) /	(=300)

Pai	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: ESCAN is a nationally recognized organization that promotes the growth & development of its affiliates in
	their mission of using volunteer professionals to provide quality consulting & related services to nonprofit organizations.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 966 including grants of \$) (Revenue \$)
	ESCAN maintains a website for affiliates which provides materials and resources that promote client development, assist in volunteer recruitment and training, help establish internal operational guidelines and standardization and presents tools for the delivery of consulting services to their nonprofit communities. They receive access to internal and external resources and publications.
	Through over 30 affiliates, over 1,000 nonprofit organizations received consulting and related services in 2009.
4b	(Code:) (Expenses \$
	ESCAN conducts an annual national conference for affiliates to enhance their skills and expertise in serving their nonprofit clients. The conference provides networking opportunities, affiliate collaboration, operational guidance and educational resources.
	Through over 30 affiliates, over 1,000 nonprofit organizations received consulting and related services in 2009.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses ► 1.730

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_	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or 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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
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		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11		1
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 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 5% 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 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		✓
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? 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		4
14a	G	14a	 	√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
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		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		√_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		√

Pa	rt IV 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 United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "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		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	;		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		✓_
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		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Par	Statements Regarding Other IRS Filings and Tax Compilance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			1
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1 fat least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
_	this return?	3a 3b		→
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i> At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
þ	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓_
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	,	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		
	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:		ļ	
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		l	
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management					
		1 1			Yes	No
1a	Enter the number of voting members of the governing body	1a		10	1	
b	Enter the number of voting members that are independent	1b		10		l
2	Did any officer, director, trustee, or key employee have a family relationship or a business	relatio	onship wit	h) .
	any other officer, director, trustee, or key employee?			2	<u> </u>	1
3	Did the organization delegate control over management duties customarily performed by or			:t	}	
	supervision of officers, directors or trustees, or key employees to a management company or o	ther p	erson? .	3	<u> </u>	1
4	Did the organization make any significant changes to its organizational documents since the prior For	m 990	was filed?	4	1	1
5	Did the organization become aware during the year of a material diversion of the organization	tion's	assets?	5	<u> </u>	1
6	Does the organization have members or stockholders?			6	1	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one o	r more	e member	s		İ
	of the governing body?			. 7a	1	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other	er per	sons? .	. 7b	1	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions ur	-		g		
	the year by the following:		·			
а	The governing body?			8a	1	<u> </u>
	Each committee with authority to act on behalf of the governing body?			. 8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who call	nnot b	e reache	d [
	at the organization's mailing address? If "Yes," provide the names and addresses in Sched	lule O		. 9a	1	1
Sec	tion B. Policies (This Section B requests information about policies not requ	ired	by the li	nterna	ī	
Rev	enue Code.)		•			
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		1
	If "Yes," does the organization have written policies and procedures governing the activities of	of sucl	chapters			}
_	affiliates, and branches to ensure their operations are consistent with those of the organization			" 10t		
11	Has the organization provided a copy of this Form 990 to all members of its governing body			e		
	form?	20.0		11	1	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 9	90.				
	Does the organization have a written conflict of interest policy? If "No," go to line 13			122	1	
	Are officers, directors or trustees, and key employees required to disclose annually interests		could aiv			
_	rise to conflicts?	o triat	oodia giri	121	,[1
_				. [
C	Does the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this is done	policy	rrites,	120	. 1	
13	Does the organization have a written whistleblower policy?	• •		13	1	
14	Does the organization have a written document retention and destruction policy?	• •		14	1	
15	Did the process for determining compensation of the following persons include a review	· ·	nnroval h	u 🗀		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberati				}	
9	The organization's CEO, Executive Director, or top management official		a decision	15a	1	
- L	Other officers or key employees of the organization			15t	+	1
U	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	• •		1.0		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or sim	ilos os				
108		na ar	rangemer	16		1
	with a taxable entity during the year?					 `
Þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and taken ste				1	İ
	the organization's exempt status with respect to such arrangements?			16t	.1	
Sec	tion C. Disclosure	<u></u>	•	1.01	<u>'</u>	<u> </u>
17 10	List the states with which a copy of this Form 990 is required to be filed none		000 T (50	1(0)(0)	onl. A	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990,		aan- ((20)	r(c)(3)9	only)	
	available for public inspection. Indicate how you make these available. Check all that apply	y.				
	☐ Own website ☐ Another's website ☑ Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing doc	cumer	nts, conflic	ct of in	terest	
	policy, and financial statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the organization: ► Sallie P. Diederich; c/o ESCH, 2630 Fountainview, #428, Houston, TX 77	e boo	ks and re	cords	of the	
	organization. > Jame F. Diedenon, Cio Loon, 2000 Fountamiview, #420, Houston, TX //	991				

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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.

Check this box if the organization did not co	(B)				<u>0</u> C)	,		(D)	(E)	(F)
Name and Title	Average	Posit	ion (c	•	•	that ap	מאמ	Reportable	Reportable	Estimated
Name and Three	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Jane Harding, Director	1 hour	1						0	0	O
Bethany Kendall, Director	1 hour	1						0	0	0
Marcia Lipetz, Director	1 hour	1						0	0	0
Nancy Long, Director	1 hour	1						0	0	0
Jesus Romero, Director	1 hour	1						0	0	0
Betsy Weber, Director	1 hour	1						0	0	0
Trudy Smith, Director and Chair	2 hour	1		1		_		0	0	0
Michael Daily, Director and Vice Chair	1 hour	1		1				0	0	0
Cindy Worthy, Director and Secretary	1 hour	1		1				0	0	0
Ron Swofford, Director and Treasurer	3 hour	1		1				0	0	0
Randy Mosteller, Director and prior Chair	2 hours	1		1				0	0	0
Frank Mittin, Director and prior Vice Chair	2 hours	1		1				0	0	0
Cindy Bahn, Director and prior Secretary	0 hours	1		1				0	0	0
Mr. Jerry Lewis, Executive Director	5 hours			1				0	0	O
				√						

Part VII Section A. Officers, Directors, T (A)	(B)				C)	<u>=</u> _		(D)	(E)	T	(F)
Name and title	Average	Positi	ion (e	•	•	that ap	DIV)	Reportable	Reportable	1,	Estimated
Tune and the	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	con	other of other oth
										1	
									!		
1b Total				<u> </u>		ــــــا	•	0	C	,	(
2 Total number of individuals (including bu			ose	liste	ed a	above)) wh	o received mo	ore than \$100,0)00 in	
reportable compensation from the organi	ization ▶ no	ne									 -
											Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete						•	-	e, or nignest c	•	3	1
4 For any individual listed on line 1a, is the the organization and related organization individual.	s greater tha	an \$15	50,0	00?	If "	Yes,"	con	nplete Schedu	le J for such	4	\ \ \
5 Did any person listed on line 1a receive services rendered to the organization? If	e or accrue	com	oen:	satio	on f	rom a	anv	unrelated org	anization for	5	1
Section B. Independent Contractors											
1 Complete this table for your five highest compensation from the organization.	compensate	ed ind	epe	nde	nt c	contra	ctor	s that received	d more than \$1	00,00	0 of
(A) Name and business a	ddress							(B) Description of s	ervices		C) ensation
None											
											
2 Total number of independent contractors more than \$100,000 in compensation from						those	liste	ed above) who	received		

Par	t VII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a	1				
ts, gra amoui	1	Membership dues 1b	6,350				
	C	Fundraising events 10	;			i	
igi ilar	d	Related organizations 10					
Contributions, gifts, grants and other similar amounts	e	Government grants (contributions). 1e	<u> </u>				
	f	All other contributions, gifts, grants,					
휼		and similar amounts not included above 1f	150				
Š		Noncash contributions included in lines 1a-1f. \$		6 500			
	n	Total. Add lines 1a-1f	Business Code	6,500	·		
une			Business code				
ě	2a						· · · · · · · · · · · · · · · · · · ·
8	b				-		
Ē	4						
S	۵						
Program Service Revenue	f	All other program service revenue .					
<u> </u>	g	Total. Add lines 2a-2f	<u></u> >				
	3	Investment income (including dividend	ds, interest, and				
	l	other similar amounts)	🕨	9			
	4	Income from investment of tax-exempt bo	nd proceeds				
	5	Royalties	· · · · •				
			(ii) Personal				
	l .	Gross Rents					
		Less: rental expenses					
		Rental income or (loss) Net rental income or (loss)					
	l	() 0	(iı) Other				· · · · · · · · · · · · · · · · · · ·
	/a	Gross amount from sales of assets other than inventory	(,,, 0				
	۱ ہ	Less: cost or other basis					
	~	and sales expenses .					
	С	Gain or (loss)			·		
	d	Net gain or (loss)	<u> </u>				
nue	8a	Gross income from fundraising events (not including \$					
946		of contributions reported on line 1c).					
Other Revenu		See Part IV, line 18					
Ę			D				
ō	С	Net income or (loss) from fundraising	events		<u></u> .		
	9a	Gross income from gaming activities.					
	١.	See Part IV, line 19	1 1				
		Less: direct expenses	o Livitias				
			Ivities P				
	iva	Gross sales of inventory, less returns and allowances					
	l b		3				
		Net income or (loss) from sales of inven					
		Miscellaneous Revenue	Business Code			-	
	11a						
	ь						
	С						
		All other revenue					
	e 12	Total Add lines 11a-11d	🟲	0.500		ļ <u>-</u>	
	12	Total revenue. See instructions	🟲	6,509	0	0	0

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.		
l other organizations must complete column (A) but are not required to complete columns (R)	(C)	and f

Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 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 organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
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				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other				
12	Advertising and promotion	386	0	386	
13	Office expenses	210	210	0	
14	Information technology	210	210		
15	Royalties				
16 17	Occupancy				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	597	597		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	1,295	0	1,295	
23	Insurance	1,233		1,295	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Memberships	756	756	0	
b	Board expenses	167	167	0	
C					
d					
e	All other expanses				
1 25	All other expenses	3,411	1,730	1,681	
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	3,711	.,,. 5	,,,,,,,	
		-	<u></u>		

Part X **Balance Sheet** (A) Beginning of year (B) End of year 13,727 Cash-non-interest-bearing 1 15,025 1 2 2 3 550 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 8 9 9 Prepaid expenses and deferred charges . Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D **b** Less: accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 12 Investments-other securities. See Part IV, line 11 13 13 Investments-program-related. See Part IV, line 11 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 13,727 16 15,575 1,250 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Pavables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities. Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 . . 1,250 26 Organizations that follow SFAS 117, check here ▶ and Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 12.477 27 15,575 28 28 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds 12,477 15,575 33 33 Total liabilities and net assets/fund balances . . . 15,575 13,727 34

Pai	t XI Financial Statements and Reporting						
_			Yes	No			
1	Accounting method used to prepare the Form 990: Cash Cash Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		İ				
	Schedule O.		.	,			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_			
b	b Were the organization's financial statements audited by an independent accountant?						
	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?						
	If the organization changed either its oversight process or selection process during the tax year, explain in						
	Schedule O.						
d	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:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		- 1				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in						
	the Single Audit Act and OMB Circular A-133?	За		1			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b					

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2009

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number **Executive Service Corps Affiliate Network** 14 1975312 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **c** Type III–Functionally integrated d 🗌 Type III-Other a Type I **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col. support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes No Yes No Yes

Total

Pai	Support Schedule for Org (Complete only if you chec					and 170(b)(1)(A)(vi)
Sec	tion A. Public Support				· · · · · · · · · · · · · · · · · · ·		
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		<u> </u>				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.	<u> </u>	<u> </u>		L	<u> </u>	<u> </u>
	tion B. Total Support	(a) 2005	(h) 2000	(-) 2007	(4) 0000	(-) 0000	40 Total
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .				<u></u>		<u> </u>
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	
13	*, *, *, *, *, *, *, *, *, *, *, *, *, *						
Sec	tion C. Computation of Public Su	pport Perce	ntage	_			
14	Public support percentage for 2009 (line	6, column (f) d	ivided by line 11	I, column (f))		14	<u> </u>
15	Public support percentage from 2008 Sch	nedule A, Part	II, line 14 .			15	%_
16a	33% % support test—2009. If the organization qualifies	as a publicly	supported orgar	nization			▶ □
b	33% % support test—2008. If the organization quality box and stop here. The organization quality	lifies as a pub	licly supported of	organization .			▶ □
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 more, and a more test—20 more, and a more test—20 more test—	acts-and-circu	mstances" test,	check this box	and stop here .	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test – 2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circun inces" test. The	nstances" test, c organization qua	heck this box a difies as a public	and stop here. Bly supported or	Explain in Part ganızatıon	IV how the

Schedule A (Form 990 or 990-EZ) 2009 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 contributions. Gifts. grants, membership fees received. (Do not include 17,762 11.815 6,500 36,077 any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 17,762 11,815 6,500 36,077 Total. Add lines 1 through 5 ĥ 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . 0 0 0 0 c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) 36,077 Section B. Total Support (b) 2006 Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total 17,762 11,815 6,500 36,077 Amounts from line 6 Gross income from interest, dividends, 10a payments received on securities loans, rents, royalties and income from similar 0 60 9 69 sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 0 60 9 69 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, 13 17,762 11,875 6.509 36,146 and 12.) . . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % Public support percentage from 2008 Schedule A, Part III, line 15 16 %

17 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33\% \% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33\% \%, and line 18 is not more than 33%%, check this box and stop here. The organization qualifies as a publicly supported organization

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

19a 33\% % support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33\% %, and line

Section D. Computation of Investment Income Percentage

Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)).

Investment income percentage from 2008 Schedule A, Part III, line 17

17

18

17

%

%

Schedule A (F	orm 990 or 990-EZ) 20	009					Page 4
Part IV	Supplementa	I Information. (Complete this	part to provide	the explanations ther additional inf	s required by F	art II, line 10;
	Part II, line 17	a or 17b; and P	art III, line 12.	Provide any o	ther additional inf	formation. See	instructions.
				• • • • • • • • • • • • • • • • • • • •		·	•••••
					·		
							· · · · · · · · · · · · · · · · · · ·
				•			
				·			

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

Employer identification number

Executive Service Corps Affiliate Network, Inc.	14 1 19/3312				
Part VI, Section A, Line 6 - Does the organization have members or stockholders? YES					
- The organization is a nonprofit with one class of members who have met the membership requirements. Their rights					
consist of: the right to elect the members of the governing body and its officers, the right to share in the net assets					
of the organization upon dissolution and the approval of the annual budget and any other	r issues that the governing				
body may submit to them.					
Part VI, Section A, Lines 7a and 7b	·				
- Line 7a - Do the members elect members of the governing body? YES, at the annual me	embership conference.				
- Line 7b - Are governing body decisions subject to approval by members? YES, certain	decisions are approved.				
Part VI, Section A, Line 9, Officers and Directors who cannot be reached at the mailing ad	dress:				
Michael Daily, Executive Service Corps of New Hampshire & NNEG, 10 Emery Drive, Atk	inson, NH 03811				
Jane Harding, Ph.D., Executive Service Corps of Houston, 2630 Fountainview, Suite 428	, Houston, tX 77057				
Bethany Kendall, Executive Service Corps of Boston, 176 Federal St., Boston, MA 02110					
Marcia J. Lipetz, Ph.D., Executive Service Corps of Chicago, 25 East Washington St., Su	ite 1500, Chicago, IL 60602-1804				
Nancy Long, Executive Service Corps of Washington, 510 2nd Ave. West, Seattle, WA 98	3119				
Jesus R. Romero, Executive Service Corps of Southern California, 1000 North Alameda S	Street, Suite 330,				
Los Angeles, CA 90012					
Ron Swofford, Executive Service Corps of Houston, 2630 Fountainview, Suite 428, Hous	ton, tX 77057				
Betsy Weber, National Executive Service Corps, 55 West 39th Street, 12th Floor, New Yo	rk, NY 10018				
Cindy Worthy, Executive Service Corps of Greater Kansas City, 1010 West 39thSt., Suite	101, Kansas City, MO 64111				

Name of the organization	Employer identification number			
Executive Service Corps Affiliate Network, Inc.	14 1975312			
Part VI, Section B, Line 11A, What is the process used by the organization to r	eview this form 990?			
- This Form 990 is prepared from the books and records of the organization a	nd submitted to the Treasurer for review.			
The Treasurer then submits the Form 990 to the board members and Executive Director for approval prior to filing.				
Part VI, Section B, Lines 12b and 12c, Annual disclosure and monitoring and e	enforcement of the conflict of interest policy?			
- The organization's policy requires any member of the organization or any off	icer, director or employee to inform the			
board of any actual or potential conflict of interest prior to the approval of any	related transaction.			
Part VI, Section B, Lines 15a and 15b - Compensation Process				
- The organization has a volunteer Executive Director and no other compensa	ited officers or employees. The board			
annually evaluates whether to compensate an Executive Director and determine	nes that a volunteer Executive			
Director is still appropriate for the level of activities.				
Part VI, Section C, Line 19 - Describe the disclosure of the governing documen	nts, conflict of interest policy, and			
and financial statements to the public.				
- These documents are available to the public upon request. They are available	e to the membership through the			
"members only" portion of ESCAN's website.				
······	·			