## 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)

2008

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

	For the	2008 calen	dar year,	or tax year beginning	, 2008, and ending		1-1	tion Number
В	Check if a	oplicable:	Diance		_	, ,		tion Number
	X	ess change	Please use	The Barth Syndrome Foundation	on, Inc.		375570	4
	Name	change	or print or type.	675 VFW Parkway #372		E Telepho		67.50
	Initial	return	See specific	Chestnut Hill, MA 02467		(61	7) 469	-6/69
	Termi	ination	Instruc- tions.					
	Amen	ided return				G Gross re		861,745.
	Applie	cation pending	F Name a	and address of principal officer: Linda Stundi		(a) Is this a group return		F-0
			Same A	As C Above		If 'No,' attach a list.		tions) Yes No
Ī	Tax-e	xempt statu	ıs X 501	(c) (3 ) ◄ (insert no.) 4947(a)	(1) or 527	,	•	
J	Webs	ite: > ww	w.bart	hsyndrome.org		H(c) Group exemption nu		
K	Type of	organization:	X Corpora	ation Trust Association Other►	L Year of Formation	on: 2000 M s	State of legal	I domicile: MA
Pa	rtl	Summ	ary					
	1 Br	riefly descri	be the or	ganization's mission or most significant activi	ties: <u>1) to pro</u>	mote awaren	ess_of	E_Barth
á	_\$_	yndrome	2;_2)_t	o educate and support physic	<u>ians, resear</u>	ch centers a	ind or	ganizations_
Activities & Governance	_a	ddressi	ng_the	causes, diagnosis, treatmen	it and cure of	f_Barth_Sync	irome:	and 31 to
ern	_a	ssist_i	n the	support of families with chi	ldren suffer:	ing_from_Bai	rth Sy	ndrome
Š	2 CI	heck this b	ox ►	if the organization discontinued its operation	s or disposed of moi	re than 25% of its	assets.	8
જ				nbers of the governing body (Part VI, line 1a), nt voting members of the governing body (Pa			4	$\frac{}{7}$
es				byees (Part V, line 2a)			5	4
tivit				teers (estimate if necessary)			6	50
Ac				business revenue from Part VIII, line 12, colu			7a	0.
				s taxable income from Form 990-T, line 34			7 b	0.
						Prior Year		Current Year
đì	8 C	ontributions	s and gran	nts (Part VIII, line 1h)		674,4	157.	727,957.
Revenue	<b>9</b> P	rogram ser	vice rever	nue (Part VIII, line 2g)				
9	10 in	vestment i	ncome (P	art VIII, column (A), lines 3, 4, and 7d)		116,5	505.	133,788.
α	11 0	ther revenu	ie (Part V	III, column (A), lines 5, 6d, 8c, 9c, 10c, and 1	1e)			264 745
	12 T	otal revenu	e – add li	ines 8 through 11 (must equal Part VIII, colur	nn (A), line 12)			861,745.
	1			ounts paid (Part IX, column (A), lines 1-3)			200.	253,894.
				members (Part IX, column (A), line 4)				200 614
Ø	15 S	alaries, oth	er compe	nsation, employee benefits (Part IX, column	(A), lines 5-10)	216,7	/49.	322,644.
nse	16a P	rofessional	fundraisir	ng fees (Part IX, column (A), line 11e)			-	
Expenses	ЬΤ	otal fundra	ising expe	enses (Part IX, column (D), line 25) -	11,582.			
ш				IX, column (A), lines 11a-11d, 11f-24f)		164,3	382.	490,087.
	18 T	otal expens	ses. Add f	ines 13-17 (must equal Part IX, column (A), I	ne 25)	690,3	331.	1,066,625.
	19 R	evenue les	s expense	es. Subtract line 18 from line 12		100,6	531.	-204,880.
88						Beginning of Y	/ear	End of Year
a a	ł	otal assets	(Part X. I	line 16)		2,613,7		2,375,329.
Net Assets Fund Belan	1		•	(, line 26)		183,9		150,424.
Ž	22 N	et assets o	r fund ba	lances. Subtract line 21 from line 20		2,429,7	785.	2,224,905.
Pa	art II		ure Blo			2/123/	00.	
					nanying schedules and state	ements, and to the best	of my know	ledge and belief, it is
		true, correct.	and complet	, I declare that I have examined this return, including accome. Declaration of preparer (other than officer) is based on all	information of which prepa	rer has any knowledge.	,	
Si	gn	<b>&gt;</b>	AEIN	R We Coules		4-8	09	
	ere	Signature	of officer			Date	-	
		<b>&gt;</b>	KEPHE	4 3 Mc CURRY - CHAIR	nav			
		Type or p	orint name ar	nd title.	- Cont			
					Date	Check if	Prepa	arer's identifying number instructions)
	aid	Preparer's				self- employed		
	'e-	signature	► Day	vid C. Ashenfarb			P00	0535436
pa Us	arer's	Firm's name		HALL & ASHENFARB CPAS				
	nly	yours if self- employed),	▶ 350	5TH AVE STE 728		EIN ► 1	3-403	6703
		address, and ZIP + 4	~	V YORK, NY 10118-0110			(212)	
Ma	y the IR	S discuss t		with the preparer shown above? (see instruc	tions)			X Yes No
				erwork Reduction Act Notice, see the separat			12/22/08	Form <b>99a</b> (2008)

_	The Batth Syndrome Foundation, Inc.	<u>22</u> -375570	4	Page 2
-	art III Statement of Program Service Accomplishments (see instructions)			
1	and the organizations imasion,			
	See Schedule O			
			- <b></b> -	- <b></b>
		<b></b>	- <b></b> -	
	Did the organization undertake any institut			
~	Did the organization undertake any significant program services during the year which were not listed on			
	Form 990 or 990-EZ?		Yes X	No
	If 'Yes,' describe these new services on Schedule O.		_	J
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	ices?	Yes X	No
	If 'Yes,' describe these changes on Schedule O.		103	<u>. 110</u>
4	Describe the exempt purpose achievements for each of the organization's three largest accounts.	h		
	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program applies are required to report the amount of grants and	by expenses. Sec l allocations to oth	ition 5010 ers the i	(C)(3) Intal
	expenses, and revenue, if any, for each program service reported.		,0,0, ,,,,	ioidi
4.	2 (Code)			
44	a (Code:) (Expenses \$ 473,533. including grants of \$ 253,894.) (I	Revenue \$		)
	See Schedule O			
		· <del>-</del>		
			<b></b>	
				<b>-</b> -
		. <b> -</b> -	<b></b>	
		. <b> </b>	<b></b> _	
		. <b></b>		
				<b></b>
		<del>-</del>		
4t	b (Code:) (Expenses \$) (F	Pevenue \$		,
	See Schedule O	.evenue \$		
	See Schedule 0			
			<b></b> -	
				_
				<del>-</del>
		<b></b>		<del>-</del>
		- <b></b>		
4-	(Code: Symptoms \$ 111 073			
-+ (	(Code: 111,073. including grants of \$) (F	Revenue \$		)
	Barth Registry and Repository (BRR)			
	As a rare disorder, easy access to an extensive collection of DNA,	tissue sam	ples	and
	<u>medical data provides a significant encouragement to prospective F</u>	Barth syndro	me	
	researchers. These samples and data themselves provide the basis	for research	h	<b>-</b> -
	revealing consistencies and anomalies which help to further define	the disord	er and	
	demonstrate and advance the development and dissemination of treat	- cire - arrigar	<u> </u>	<u></u>
	RSF is primarily responsible for facilitating the first in the second of the facilitation of the facilitat	meur darder	<u>ines.</u>	
	BSF is primarily responsible for facilitating the participation of	<u>_its_family</u>	_mempe	<u>ers</u>
	and the growth of the BRR, the maintenance and operation of which	is the		
	<u>responsibility of the University of Florida under contract from BS</u>	F. 2008 ma	rks t	ne
	third year of BSF's BRR contract with the University of Florida.			<b></b> -
				<b></b> -
4d	Other program services. (Describe in Schedule O.)  See Schedule O	<del></del>		
_	(Expenses \$ 88,463, including grants of \$ ) (Payanua \$			
40	(Expenses \$ 88,463. including grants of \$ ) (Revenue \$ ≥ Total program service expenses ► \$ 894,904. (Must equal Part IX. Line 25, column (B)			
70	From program service expenses ▶ \$ 894,904. (Must equal Part IX. Line 25. column /R	1)		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete			
2	Schedule A.  Is the organization required to complete Schedule B, Schedule of Contributors?	1 2	X	<del> </del>
3		3	A	х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part L	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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		v
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V.	10		X
11		11		х
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14:	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
I	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I.	14b	_x	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15	_x	
	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		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18 19	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
20	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
21	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.		_X	
	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
س	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25.			
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		-
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I.	25a		х
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I.	25b		<u>х</u>
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		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		<u></u>

28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:	r	Yes	No
	the tax year, and any person who is a current or former officer, director, trustee, or key employee:			ı
8	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with the corrections of the control of			
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		}
t	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		<b>X</b>
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		   x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.	34		Х
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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
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		Х

Form 990 (2008) The Barth Syndrome Foundation, Inc.

Part V Statements Regarding Other IRS Filings and Tax Compliance

		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	ol 🐇		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ŏ		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		1
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	4		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21	X	1
Note. If the sum of lines 1a and 2a is greater than 250, you be required to e-file this return. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	a	х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	31	2	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, financial account in a foreign country (such as a bank account, securities account, or other financial account)?	,		х
b If 'Yes,' enter the name of the foreign country: ►	10	1	<u> </u>
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	3	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5t	,	Х
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	50		
6a Did the organization solicit any contributions that were not tax deductible?	6		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were deductible?			<u>                                     </u>
7 Organizations that may receive deductible contributions under section 170(c).		1	1
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7t	-	<del>                                     </del>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to fil Form 8282?	e 70		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	177	1	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76	J	х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	70	+	X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required	? 71	_	$\frac{x}{x}$
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		1
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b	-	
10 Section 501(c)(7) organizations. Enter:		1	-
a Initiation fees and capital contributions included on Part VIII, line 12	0.	1	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	0.	]	J.
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other members or shareholders	0.		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	0.		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		P. P
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		<del></del>	<del>1 (2)</del>
BAA	Forn	n <b>990</b>	(2008)

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

	ction A. Governing Body and Management		T.,	
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		Yes	No.
1	a Enter the number of voting members of the governing body	3		
	b Enter the number of voting members that are independent	7		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		x	
3		3		х
4	Did the organization make any significant changes to its organizational documents	4		X
	since the prior Form 990 was filed?		_	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		l x
6	Does the organization have members or stockholders?	6	<del>                                     </del>	X
7:	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		-	
ŀ	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7a		X
8		7b		
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
•	a The governing body?	8a	X	
٠.	b Each committee with authority to act on behalf of the governing body?	8b	X	
	a Does the organization have local chapters, branches, or affiliates?	9a		X
	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9 b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . See . Schedule . O	10	Х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	11	••	Х
<u>Sec</u>	tion B. Policies	<u> </u>		^
		-	Yes	No
12 <i>a</i>	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X	- 110
t	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
•	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done See. Schedule.0	12c	Х	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:	"	_^	:
Z	a The organization's CEO, Executive Director, or top management official?			:
	Other officers of key employees of the organization?SeeSchedule.0	15a	X	
	Describe the process in Schedule O. (see instructions)	15Ь	Х	
Ľ	·			
			l	·
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<u> X</u>
16 a	of Yes, has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken store to refer and the second the second to the sec	16a		<u> </u>
16 a	of Yes, has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16a		<u>x</u>
16 a	of Yes, has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16a		_ <u>X</u>

X Another's website

X Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

Linda Stundis 675 VFW Parkway, #372 Chestnut Hill MA 02467 (617) 469-6769

BAA

Form 990 (2008)

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

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

- 1 a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who
  received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or 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 \$100,000 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 n (A)	(B)	isate a	any			airecto	or, tr			
Name and Title	Average	Pos	(c) osition (check all that apply)				lv)	(D)	(E)	<b>(F)</b>
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Michaela Damin	_									
Board Member	20	X						0.	0.	0.
Stephen Kugelmann	1									
Board Member	10_	X						0.	0.	0.
Katherine McCurdy	]									
Board Member	10	Х						0.	0.	0.
Susan Osnos	]									
Board Member	10	Х						0.	0.	0.
Susan Wilkins										
Board Member	10	X			l			0.	0.	0.
Stephen B. McCurdy										
Chairman	20	X		X				0.	0.	0.
Randy Buddemeyer										
Treasurer	40	X		X				0.	0.	0.
Valerie Bowen										
President	40	X		X	X	ļ		61,495.	0.	0.
Lynda Sedefian										
Secretary	40			X	X			40,462.	0.	4,661.
Linda Stundis	[									
Executive Direc	40			X	X			55,385.	0.	7,086.
Matthew Toth						]				
Dir of Science	40				_X			<u>1</u> 17,600.	0.	11,325.
			l							
					1		+			
				$\dashv$	7		+			
BAA		<u> </u>	FFAD	1071	116	07/08				Form <b>990</b> (2008)

Part VII   Section A. Officers, Directors, Trus	tees, Key Employees, and							d Highest Compensated Employees (cont			
(A)	(B)			(	c)			(D)	(E)	(F)	
Name and Title	Average hours	Posi	ition i	_				Reportable compensation from	Reportable compensation from		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organization from related organization (W-2/1099-MISC)	s amount of other s compensation from the organization and related organizations	
						<del>                                     </del>					
									-		
			-								
1 b Total							▶	274,942.	0	. 23,072.	
2 Total number of individuals (including those in 1a) v organization ► 1	vho rece	eived	mo	ore t	han	\$10	00,00	00 in reportable co	ompensation from	the	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	idividua	I					- · · •			Yes No	
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater the individual.	portable nan \$15	0,00	npei 0? I	nsat If 'Ye	ion es' (	and comp	othe plete	er compensation for s	rom uch	4 X	
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch										5 X	
Section B. Independent Contractors  1 Complete this table for your five highest compensation from the organization.											
(A)  Name and business address		-						(B)	10	(C)	
Traine and business address	,						+	Description o	Services	Compensation	
							#				
2 Total number of independent contractors (including to compensation from the organization > 0	those in	1) v	vho	rece	eive	d m	ore t	han \$100,000 in		Takanggani (1971)	

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
TS, GRANTS	1a Federated campaigns     1a       b Membership dues     1b       c Fundraising events     1c			164-11 (25)	212, 313, 01 314
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	d Related organizations 1 d e Government grants (contributions) 1 e  f All other contributions, gifts, grants, and similar amounts not included above 1 f 727, 957.	. Ere j	e turk Ku	, XX	
	g Noncash contribus included in lns 1a-1f: \$ h Total. Add lines 1a-1f:	727,957.	estisk		
EVENUE	Business Code  2a				· · :- · · - · · · · · ·
PROGRAM SERVICE REVENUE	b				
PROGI	f All other program service revenue				- CAR
	3 Investment income (including dividends, interest and other similar amounts).	133,788.			133,788.
	4 Income from investment of tax-exempt bond proceeds. ►  5 Royalties				
	6a Gross Rents			7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
	7 a Gross amount from sales of assets other than inventory.  b Less: cost or other basis and sales expenses	- 10 <sup>-1</sup> - 1		13 b 1	
	c Gain or (loss)	- ·· -··	·		
ENUE	8a Gross income from fundraising events (not including. \$				
OTHER REVENUE	of contributions reported on line 1c).  See Part IV, line 18				
	9a Gross income from gaming activities. See Part IV, line 19 a  b Less: direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances	·			
	C Net income or (loss) from sales of inventory ►  Miscellaneous Revenue Business Code  11a				
	b				
	d All other revenue			710. 110. 110.	
	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e.	861,745.	0.	0.	133,788.

Part IX | Statement of Functional Expenses

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

4.44 .4	•
All other organizations must complete column (A) but are not require	<u>.</u>
MILUUIEL OLUMIIZAUOUS MUSI COMPIEIE COILIME (A) hiit see not eomilie	ad to commiste autour - 705 765 - 1705
	EU IO COMDIETE COIUMNS (R) (C) and (D)

<i>6b,</i>	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.	215,538.	215,538.		expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	210,000.	213,330.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	38,356.	38,356.	The state of the s	
4	Benefits paid to or for members			Washington Co.	
5	Compensation of current officers, directors, trustees, and key employees	277,992.	233,954.	34,103.	9,935.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B).	0.	0.	0.	
7	Other salaries and wages				<del></del>
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	23,072.	19,417.	2,830.	825.
10	Payroll taxes	21,580.	18,161.	2,648.	
11	Fees for services (non-employees)			2,030.	111.
;	Management				
١	Legal				<del> </del>
	Accounting				
(	Lobbying				
	Prof fundraising svcs. See Part IV, In 17				
1	Investment management fees				
	) Other.	211,964.	145 250	66 705	
12	Advertising and promotion	211, 304.	145,259.	66,705.	
13	Office expenses	67,863.	40 445		
14	Information technology.	07,863.	49,445.	18,367.	51.
15	Royalties				
16	Occupancy				
17	Travel	140.066		<del>-</del>	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	140,866.	124,402.	16,464.	
19 20	Conferences, conventions, and meetings				
	Interest.				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 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.)	6			
а	Audio_Visual_expense_	32,434.	32,434.		
Ŀ	Printing and Publications	14,099.	12,734.	1,365.	
	Telephone	7,919.	2,413.	5,506.	
	Dues & conferences	5,627.	376.	5,251.	
	Insurance	4,965.	370.	4,965.	
f	All other expenses	4,350.	2,415.	1,935.	
	Total functional expenses. Add lines 1 through 24f	1,066,625.	894, 904.	160,139.	11 500
	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		351, 504.	100,139.	11,582.
BAA	campaign and fundraising solicitation				Form <b>990</b> (2008)

					(A) Beginning of year		End (	B) of year	ır
	1	Cash - non-interest-bearing				1			
	2	Savings and temporary cash investments			2,317,189.	2	2,2	242,	382
	3	Pledges and grants receivable, net	· · · · · · · · · · · · · · · · · · ·	973.	. 3		.25,		
	4	Accounts receivable, net			1,477.	4			235
	5	Receivables from current and former officers, director or other related parties. Complete Part II of Schedule	L			5		:_•	
	6	Receivables from other disqualified persons (as defin	ed und	der section 4958(f)(1))					
Δ		and persons described in section 4958(c)(3)(B). Com	olete F	Part II of Schedule L		6	1		<b>4</b>
ŝ	7	Notes and loans receivable, net				7			
ASSETS	8	Inventories for sale or use		8					
Š	9	Prepaid expenses and deferred charges			7,297.	9			712
		Land, buildings, and equipment: cost basis		3,225.		1		<del></del>	
	ь	Less: accumulated depreciation. Complete Part VI of				.],		: "	
		Schedule D				10c			
	11	Investments - publicly-traded securities			286,833.	11			
	12	Investments - other securities. See Part IV, line 11				12			
	13	Investments - program-related. See Part IV, line 11.				13			
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11		·		15			
	16	Total assets. Add lines 1 through 15 (must equal line	34)	<u></u>	2,613,769.	16	2.3	75,	329
	17	Accounts payable and accrued expenses			15,684.	_		15,	
	18	Grants payable	168,300.	18	1	34,			
	19	Deferred revenue			19				
-AB-L-F-ES	20	Tax-exempt bond liabilities			20				
	21	Escrow account liability. Complete Part IV of Schedule		21					
	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per	Complete Part II						
Ę		of Schedule L				22			
S	23	Secured mortgages and notes payable to unrelated the	rties		23				
		Unsecured notes and loans payable		24					
	25	Other liabilities. Complete Part X of Schedule D	· · · · · ·			25			
	26	Total liabilities. Add lines 17 through 25			183,984.	26	1	50,4	124
ZET		Organizations that follow SFAS 117, check here ► 27 through 29 and lines 33 and 34.	X an	d complete lines					
せんいい	27	Unrestricted net assets	<i></i> .		1,993,659.	27	1.4	86,	721
	28	Temporarily restricted net assets			436,126.	28		38,:	
Š	29	Permanently restricted net assets				29	<u>·</u>	<u> </u>	101
R		Organizations that do not follow SFAS 117, check he	re 🟲	and complete				71000	
UZC.		lines 30 through 34.							,
	30	Capital stock or trust principal, or current funds	<b></b> .			30			
日々レベアし近の	31	Paid-in or capital surplus, or land, building, and equip	ment f	und		31			
Ă	32	Retained earnings, endowment, accumulated income,	or oth	er funds		32			
Ê		Total net assets or fund balances.			2,429,785.	33	2.2	24,9	905
	34	Total liabilities and net assets/fund balances			2,613,769.	34		75,3	
<u>ra</u>	rt XI	Financial Statements and Reporting							
_		_		_				Yes	No
1	Acc	counting method used to prepare the Form 990:	ash	X Accrual C	Other				
2	a wer	re the organization's financial statements compiled or r	eviewe	ed by an independent ac	countant?		2a		Х
	o is is	re the organization's financial statements audited by ar	indep	endent accountant?			2b	Х	
2.	revi	ew, or compilation of its financial statements and select	e that tion o	assumes responsibility f an independent accou	for oversight of the a ntant?	udit,	2c	Х	
J	Aud	a result of a federal award, was the organization requir lit Act and OMB Circular A-133?	ed to i	undergo an audit or aud	its as set forth in the	Single	:   _ ]		**
	<u>b                                    </u>	es,' did the organization undergo the required audit or	audite	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •		3a		X
3AA	1	The second secon				<u></u>	Form	99n /	2008
								/	

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

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2008

Employer identification number The Barth Syndrome Foundation, Inc. 22-3755704 Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 4 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: 5 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X in section 170(b)(1)(A)(vi). (Complete Part II.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 Type II Type III — Functionally integrated Type III- Other 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ... 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) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above?.... 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports. (i) Name of Supported Organization (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (ii) EIN (v) Did you notify the organization in col. (i) of your support? (vi) Is the organization in col. (i) organized in the U.S.? (iv) is the (vii) Amount of Support organization in col (i) listed in you governing document? Yes No Yes No Yes No Total

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

Schedule A (Form 990 or 990-EZ) 2008 The Barth Syndrome Foundation, Inc. 22-3755704

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5. 7. or 8 of Part I.)

Se	ction A. Public Support	ed the box on line	e 5, 7, 01 6 01 Pai	11.)			
beg	endar year (or fiscal year inning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	338,932.	1,144,539.	1,018,888.	674,457.	727,957.	3,904,773.
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf			,,		.27,331.	0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4	Total. Add lines 1-3	338,932.	1,144,539.	1,018,888.	674,457.	727,957.	3,904,773.
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)						1,230,018.
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support		in a second granting of the first second	الفتاب <u>لـ فت فتحفظ الله في جا الر فيحا ال</u>	الاجتيان والمتحدد		2,674,755.
Cale beg	ndar year (or fiscal year inning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	338,932.	1,144,539.	1,018,888.	674,457.	727,957.	3,904,773.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	17,350.	21 002	66 916	116 505		
9	<u> </u>	17,330.	21,802.	66,816.	116,505.	113,788.	336,261.
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.).						0.
	Total support. Add lines 7 through 10						4,241,034.
12	Gross receipts from related activi	ities, etc. (see ins	structions)			12	0.
	First five years. If the Form 990 i organization, check this box and	stop nere	<u></u>	nd, third, fourth,	or fifth tax year as	a section 501(c)(	(3) ▶ □
	tion C. Computation of Put	Siic Support P	ercentage				
15	Public support percentage for 200 Public support percentage for 200	07 Schedule A. P	r (i) divided by lin art IV-A. line 26f	ie 11, column (t).	• • • • • • • • • • • • • • • • • • •	14	63.1 % 58.8 %
	33-1/3 support test — 2008. If the and stop here. The organization						
	33-1/3 support test — 2007. If the and stop here. The organization of						
17 a	n 10%-facts-and-circumstances ter or more, and if the organization r the organization meets the 'facts	neers ine tacis.a	nd-circumetance	' test chack this	hav and class has	n Evalaia ia Dadi	IV In account
ŧ	o 10%-facts-and-circumstances ter or more, and if the organization r organization meets the 'facts-and	l-circumstances	test. The organiz	s test, check this ration qualifies as	box and stop here a publicly suppor	e. Explain in Part ted organization	IV how the ►
18 BAA	Private foundation. If the organiz	ation did not che	ck a box on line,	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions
•- 1					Sch	equie A (Form 99	0 or 990.F7\ 2008

# Schedule A (Form 990 or 990-EZ) 2008 The Barth Syndrome Foundation, Inc. Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

300	tion A. Public Support	ened the box on	ine 9 or rait i.)				
	ndar year (or fiscal yr beginning in)	(=) 2004	(F) 200E	(c) 000C	(d) 0007	(-) 2000	
	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose			. ,,,,,,			
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	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						
	Total. Add lines 1-5						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.						
c	Add lines 7a and 7b						
8	Public support (Subtract line	-					
	7c from line 6.)	·		-252			
Sec	tion B. Total Support	b Atlanting Company of the Company	to the second stands and high Boll Millian standard and	باللب يستنف الفصفة لونغس ولينبعث والمعودية ه	الكار أربي فتفضي أراد كيه مرجعها		
_	ndar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(4) 2007	(-) 2000	40 T. I. I
	Amounts from line 6	(4) 2007	(5) 2003	(6) 2000	(d) 2007	(e) 2008	(f) Total
	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income form similar sources						
	similar sources						
c	unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
11	similar sources						
11 12 13	similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (2dd Ins 9, 10c, 11, and 12)	is for the organiz	ation's first, secon	d, third, fourth,	or fifth tax year as	a section 501(c)(3	
11 12 13 14	similar sources.  Durrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secon	d, third, fourth,		a section 501(c)(3	3) ►□
11 12 13 14 Sec	similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (2dd Ins 9, 10c, 11, 2nd 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	<u>blic Support F</u>	Percentage		or fifth tax year as		
12 13 14 Sec:	similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	blic Support F 108 (line 8, colum	Percentage n (f) divided by lin	e 13, column (f))	or fifth tax year as	15	%
11 12 13 14 Sec 15 16	similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul  Public support percentage from 20.	<b>blic Support F</b> 108 (line 8, colum 2007 Schedule A,	<b>Percentage</b> n (f) divided by lin , Part IV-A, line 27	e 13, column (f))	or fifth tax year as	15	
11 12 13 14 Sec: 15 16 Sec:	similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage from 20 Public support percentage from 21 tion D. Computation of Inv	blic Support F 108 (line 8, colum 2007 Schedule A, estment Incol	Percentage n (f) divided by lin , Part IV-A, line 27 me Percentage	e 13, column (f))	or fifth tax year as		%
11 12 13 14 Sec: 15 16 Sec: 17	similar sources.  Durrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from a tion D. Computation of Investment income percentage for 10 taxes of the process of the proce	blic Support F 108 (line 8, colum 2007 Schedule A, estment Incol or 2008 (line 10c,	Percentage  n (f) divided by lin Part IV-A, line 27  ne Percentage  column (f) divided	e 13, column (f)) g d by line 13, colu	or fifth tax year as	15 16	% %
12 13 14 Sec 15 16 Sec 17 18	similar sources.  Dunrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from tion D. Computation of Investment income percentage finvestment income percentage finvestment income percentage finvestment income percentage financing in the computation of Investment	blic Support F 108 (line 8, column 2007 Schedule A, estment Incolumn or 2008 (line 10c, rom 2007 Schedulard	Percentage  n (f) divided by lin Part IV-A, line 27  me Percentage  column (f) divided the A, Part IV-A, line check the beauters.	e 13, column (f)) g	or fifth tax year as	15 16 17 18	%
11 12 13 14 15 16 Sec 17 18 19a	similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (200 lins 9, 10c, 11, 2nd 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage from thousand tion D. Computation of Investment income percentage from 1.  Investment income percentage from 1.  133-1/3 support tests – 2008. If the comore than 33-1/3%, check this box.	blic Support F 108 (line 8, colum 2007 Schedule A, estment Incolumn or 2008 (line 10c, rom 2007 Schedu organization did not ox and stop here	Percentage  n (f) divided by lin Part IV-A, line 27  me Percentage  column (f) divided  lle A, Part IV-A, lin check the box on li The organization	e 13, column (f)) g	or fifth tax year as  mn (f))  is more than 33-1/39  ablicly supported o	15 16 17 18 6, and line 17 is not roanization	% % %
11 12 13 14 Sec 15 16 Sec 17 18 19a	similar sources.  Dunrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from tion D. Computation of Investment income percentage finvestment income percentage finvestment income percentage finvestment income percentage financing in the computation of Investment	blic Support F 108 (line 8, column 2007 Schedule A, estment Incolumn or 2008 (line 10c, rom 2007 Schedul organization did not ox and stop here the organization did this box and sto	Percentage  n (f) divided by lin Part IV-A, line 27  me Percentage  column (f) divided  lle A, Part IV-A, lin check the box on li The organization  id not check a box phere. The organi	e 13, column (f))  g  1 by line 13, colume 27h  ne 14, and line 15 qualifies as a pu on line 14 or 19 zation qualifies a	or fifth tax year as  mn (f))  is more than 33-1/39  ublicly supported o a, and line 16 is many as a publicly supported supported to a publicly supports a publicly supports a publicly supports.	15 16 17 18 4, and line 17 is not rganization ore than 33-1/3%, rted organization	% % % % and line 18

Schedule A	(Form 990 or	990-EZ) 2008	The Barth	Syndrome	Foundation	on, Inc.	22-3755704	Page 4
Part IV	Supplemen Part II, line	<b>Ital Informa</b> 17a or 17h	tion. Complet	e this part to	provide the	explanation re	22-3755704 equired by Part II, line rmation. (see instruction	10;
		.,	, 01 1 41 (111, 11	12. 17001	ue any other	additional info	rmation. (see instruction	ons)
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- <b></b>			<b></b>				<b></b>	<b></b> -
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				<b>-</b>	<b></b>			
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## SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

2008

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

The	Barth Syndrome Foundation, Inc.		22-	3755704	
	Committee of the Committee of the Committee of Other Similar Fundamental Organizations Maintaining Donor Advised Funds or Other Similar Fundamental Organizations	is or A	ccounts	Complete	if
	the organization answered 'Yes' to Form 990, Part IV, line 6.	15 VI A	ccounts	Complete	; 11
	(a) Donor advised funds	- 0	) Funds a	and other acc	ounts
1	Total number at end of year		ey r undo c	ind outer dec	June
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				·
5	Did the organization inform all donors and donor advisors in writing that the assets held in dor funds are the organization's property, subject to the organization's exclusive legal control?	nor advis	sed	. Tyes	□No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fundused only for charitable purposes and not for the benefit of the donor or donor advisor or othe impermissible private benefit?	s may be	3		
Dai	Impermissible private benefit??	<u></u>		Yes	_ No
<u> </u>	t II. Conservation Easements Complete if the organization answered 'Yes' to	o Form	990, Pa	art IV, line	<u>7.                                    </u>
'	Purpose(s) of conservation easements held by the organization (check all that apply).				
	Preservation of land for public use (e.g., recreation or pleasure)  Protection of natural habitat  Preservation of				area
	Teservation of	certified	I historic s	structure	
2	Preservation of open space				
2	Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of the tax year.	of a con	servation	easement or	the last day
			Held	at the End of	the Year
ā	Total number of conservation easements	. 2a			tio real
	Total acreage restricted by conservation easements				
	Number of conservation easements on a certified historic structure included in (a)				_
	Number of conservation easements included in (c) acquired after 8/17/06				
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	d by the	organiza	tion during th	e taxable
	year •	<b>,</b>	· • • • • • • • • • • • • • • • • • • •		ic taxabic
4	Number of states where property subject to conservation easement is located ▶				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violation enforcement of the conservation easement it holds?	ations, a	nd	. Yes	□No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the	e vear 🕨			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the y	ear > \$			
	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?			. Yes	□No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expens include, if applicable, the text of the footnote to the organization's financial statements that deconservation easements.	e statem scribes	ent, and ba the organi	alance sheet, a zation's acco	and ounting for
Par	Complete if the organization answered 'Yes' to Form 990, Part IV, line 8	Other S	imilar A	ssets	
1 a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement treasures, or other similar assets held for public exhibition, education, or research in furtherant the text of the footnote to its financial statements that describes these items.	-4 4	alance she blic servic	eet works of e, provide, ir	art, historical Part XIV,
Ŀ	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement treasures, or other similar assets held for public exhibition, education, or research in furtheran amounts relating to these items:	ce of pu	Diic servic	e, provide th	art, historical e following
	(i) Revenues included in Form 990, Part VIII, line 1.			<b>-</b> \$	
_	(ii) Assets included in Form 990, Part X	. <b>.</b>		-\$	
	If the organization received or held works of art, historical treasures, or other similar assets for amounts required to be reported under SFAS 116 relating to these items:	r financia	al gain, pr	ovide the foll	lowing
a	Revenues included in Form 990, Part VIII, line 1			<b>-</b> \$	
b	Assets included in Form 990, Part X			<b>\$</b>	

Schedule D (Form 990) 2008 The B	Barth Synd	rome Foundation	on, Inc.	22-375	5704	Page 2
Part III Organizations Maintai	ning Collec	tions of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (con	tinued)
3 Using the organization's accessio that apply):	n and other red	cords, check any of th	e following that are a	significant use of its coll	ection item	ns (check al
a Public exhibition		<b>d</b> Loan (	or exchange programs			
<b>b</b> Scholarly research		e Other				
c Preservation for future genera	ations	_				
4 Provide a description of the organ Part XIV.					se in	
5 During the year, did the organizat assets to be sold to raise funds ra	tion solicit or re ather than to be	eceive donations of art	t, historical treasures,	or other similar	Yes	No
Part IV Trust, Escrow and Custly, line 9, or reported a	stodial Arra	ngements Comple	ete if organization	answered 'Yes' to F		), Part
1a Is the organization an agent, trust included on Form 990, Part X?	tee, custodian,	or other intermediary	for contributions or ot	her assets not	Yes	□No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and	d complete the followi	ng table:		_	
					Amount	
c Beginning balance			• • • • • • • • • • • • • • • • • • • •	1c		
d Additions during the year				1d		
e Distributions during the year						
f Ending balance						
2a Did the organization include an ar	mount on Form	990, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement						
Part V Endowment Funds Con	nplete if org	anization answere	ed 'Yes' to Form 9	90. Part IV. line 10.		
	(a) Current ye	1				r years back
1a Beginning of year balance		<b>V</b>	r a chi Calla War a chia i i i	(d) Three years back	(6) 1 001	years back
b Contributions					<u> </u>	e <u>se de dimense de la </u>
c Investment earnings or losses			un el Arther de Personal el			
d Grants or scholarships			* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 No. 2 11, 91	
e Other expenditures for facilities		The second of th				ALLEMAN TO THE STATE OF THE STA
and programs		to the second second second				
f Administrative expenses		The same and the same as the same			Marian (filoso) Marian Villagia	
g End of year balance						
2 Provide the estimated percentage	of the year en	d balance held as:				
a Board designated or quasi-endow	ment 🟲	<u>*</u>				
b Permanent endowment ►	*	<u> </u>				
c Term endowment ►	8					
3a Are there endowment funds not in organization by:	the possession	n of the organization	that are held and adm	inistered for the	[v	es No
(i) unrelated organizations					3a(i)	03 110
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related or					3b	
4 Describe in Part XIV the intended	uses of the or	ganization's endowme	ent funds		30	
Part VI Investments—Land, Bu	ildings, and	Equipment, See	Form 990 Part X	line 10		
Description of investment		) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Boo	k Value
1a Land						
<b>b</b> Buildings						
c Leasehold improvements			-			
<b>d</b> Equipment			3,225.	3,225.		0.
e Other	<b>)</b>			0,220.		
otal. Add lines 1a-1e (Column (d) show		990, Part X. column	(B), line 10(c).)			0.
BAA	<u>-</u>		<u> </u>		ule D (Forr	m 990) 2008

Schedule D (Form 990) 2008 The Barth Syndrome	Foundation, I	nc. 22-3755704	Page 3
Part VII   Investments-Other Securities See Fo	orm 990, Part X, lin	e 12. N/A	1 age c
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives and other financial products.			
Closely-held equity interests			
Other			
	<u> </u>		
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.)			
Part VIII Investments-Program Related (See F	orm 990, Part X, li	ne 13) N/A	*
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market value	
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.)		4. 1	
Part IX Other Assets (See Form 990, Part X,			
	scription	<b>(b)</b> Bo	ok value
Total. Column (b) Total (should equal Form 990, Part X, col	.(B), line 15)		
Part X Other Liabilities (See Form 990, Part 2	X, line 25)		
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
			and the second of the second o
			mg Marka
	<del>-</del>		
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)			2 Mili

Sche	edule D (Form 990) 2008 The Barth Syndrome Foundation, Inc.	22-3755704	Page 4
Pal	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12).		861,745.
2	Total expenses (Form 990, Part IX, column (A), line 25)		1,066,625.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-204,880.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		<del></del>
9	Total adjustments (net). Add lines 4-8.		<del></del>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		-204 990
Par	t XII   Reconciliation of Revenue per Audited Financial Statements With Revenue per	Botum	-204,880.
1	Total revenue, gains, and other support per audited financial statements	Return	061 745
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		861,745.
	Net unrealized gains on investments	_[	
	Donated services and use of facilities		
	Recoveries of prior year grants	_	
	Other (Describe in Part XIV)	1 1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	861,745.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investments expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b.	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	. 5	861,745.
Par	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	001,745.
1	Total expenses and losses per audited financial statements		1,066,625.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1,000,023.
	Donated services and use of facilities		
	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25	<b>-</b>	
	Other (Describe in Part XIV)		
	Add lines 2a through 2d	<b></b>   <u>-</u> {	
3	Subtract line 2e from line 1	.   2e	
	Subtract line 2e from line 1	3	<u>1,066,625.</u>
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	<b>→</b>	
	Other (Describe in Part XIV)	اختا	
	Add lines 4a and 4b.	4c	
<u> </u>	Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.).	5	1,066,625.
rar	XIV Supplemental Information		
Compine 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part ; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	IV, lines 1b and	I 2b; Part V,
- <b></b>			

Schedule D	(Form 990) 2008 Supplemental Information (continued)	Page 5
Part XIV	Supplemental Information (continued)	
	~	

## Schedule F (Form 990)

### **Statement of Activities Outside the United States**

OMB No. 1545-0047
2008
A

► Attach to Form 990. Complete if the organization answered 'Yes' to

nternal Revenue Service	F	form 990, Part IV	, line 14b, line 15, or line 16.			Inspection
Name of the organization					Employer ide	ntification number
The Barth Syndron	ne Foundation,	Inc.			22-3755	5704
Part I General Infor	mation on Activiti	es Outside th	e United States. Complet	e if the	organizat	ion answered 'Yes'
to Form 990,	Part IV, line 14b.	<del></del>				
<ol> <li>For grantmakers. Doe grantees' eligibility for</li> </ol>	es the organization ma r the grants or assistan	intain records to s ace, and the selec	substantiate the amount of the ction criteria used to award the	grants or grants or	assistance, assistance	the X Yes No
2 For grantmakers. Des	scribe in Part IV the or	ganization's proce	edures for monitoring the use o	of grant fur	nds outside	the United States.
3 Activities per Region.	(Use Schedule F-1 (Fo	orm 990) if addition	onal space is needed.)			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(d) is a service specif	ivity listed in a program e, describe in type of s) in region	expenditures in region
Europe	0	0	Grant to recipient			40,000.
			located in this			
			region			
North America	0	0	\$77,256 of grants			-77,256.
			awarded were			
			funded by another			
			charitable			
			organization.			ļ
North America	0	0	Grant to recipient			75,612.
			located in this			
			region			
	_			· · · · · · · · · · · · · · ·		

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

Schedule F (Form 990) (2008)

38,356.

Schedul	le F (For	m 990) 20	008 1	he Ba	rth Syn	drome	Foundation,	Inc.			22-37	55704	Page 3
Part II	<b>∐ Gran</b> Form Use	i <b>ts and (</b> 1990, P Schedul	<b>Other A</b> art IV, le F-1 (	<b>\ssistar</b> line 15, Form 99	nce to Or for any 90) if add	r <b>ganizat</b> i recipient ditional s	i <b>ons or Entities</b> t who received space is neede	SOutside the log more than \$5, d.	<b>Jnited States.</b> (000. Check this	Complete if the box if no one	organization a recipient receiv	nswered 'Yes' to ved more than \$	5,000 ▶□
1	(a) N	ame of or	ganizatio	on	section	RS code and EIN plicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
							Europe	Research	40,000.	Check			
-	: . 			<del> </del>	11. 11.		North	Research	75,612.	Check			
	<del></del>	· · · · · ·	,				America						
<u></u>	*	· · · · · · · · · · · · · · · · · · ·	33.1				North	Research	-77,256.				
			<del></del>	-		·	America	funded					
	· 			2,				by					
		<del></del>				<u> </u>		another		_			
						· ·		organiza					
	*		**					tion					
	- <u> </u>				71								
Ţ.	198		*				ij						

2	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.	<b>&gt;</b>
3	Enter total number of other organizations or entities	<b>•</b>

BAA

Schedule F (Form 990) 2008

Page 3

Schedule F (Form 990) 2008 The Barth Syndrome Foundation, Inc.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2008 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance BAA

#### SCHEDULE I (Form 990)

### Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Name of the organization Employer identification number The Barth Syndrome Foundation, Inc. 22-3755704 Part | General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part VI Part III Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed..... (f) Method of valuation (book, FMV, appraisal, other) 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash grant (e) Amount of non-cash (a) Description of (h) Purpose of grant or government if applicable assistance non-cash assistance or assistance Henry Ford Health System 2799 W. Grand Blvd, Room 7 Detroit, MI 48202 38-1357020 501 (c) 3 39,996 0 Research Medical College of Wiscons 8701 Watertown Plank Road Milwaukee, WI 53226 39-0806261 501 (c) 3 40,000 0 Research Nemours Children's Clinic 1600 Rockland Road 59-0634433 501 (c) 3 Wilmington, DE 19803 0 24,145 Research University of Colorado 12635 East Montview Blvd. Aurora, CO 80045 84-6000555 501 (c) 3 33,701 0 Research University of Washington 1959 NE Pacific Street, Bo Seattle, WA 98195 91-6001537ln/a 0 40,000 Research Wayne State University 5047 Gullen Mall Detroit, MI 48202 38-6028429 501 (c) 3 40,000 0 Research 2 Enter total number of section 501(c)(3) and government organizations..... 6 3 Enter total number of other organizations.

Schedule I (Form 990) 2008

as planned and that reasonable progress is being made in accordance with the original

BAA

2008

### Schedule I, Part IV - Supplemental Information

Page 3

**Client BARTH** 

The Barth Syndrome Foundation, Inc.

22-3755704

3/17/09

02:09PM

### Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

proposal. Following completion of the work, a summary of the research results is required to be sent to BSF as well as any published findings.

### Part IV - Additional Supplemental Information

During 2008, the Barth Syndrome Foundation Board approved six grants to organizations inside the United States totaling \$217,842. \$2,304 of unused grant funds were returned to the Barth Syndrome Foundation. Total grant expense to organizations inside the United States was \$215,538.

### SCHEDULE O (Form 990)

### **Supplemental Information to Form 990**

OMB No. 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

The Barth Syndrome Foundation, Inc.	22-3755704
Form 990, Part III, Line 1 - Organization Mission	
The Barth Syndrome Foundation is a not-for-profit ord	ganization_dedicated_to: 1)
promote_awareness of Barth syndrome; 2) assist in the	e_support_of_families_with
children_suffering_from_Barth_syndrome; 3) assist_in_	the support of research centers
and organizations addressing the causes, diagnosis, t	treatment and cure of Barth
syndrome; and 4) such other charitable, scientific ar	nd_educational_purposes_within
the_meaning of Section 501(c)(3) of the Code as may be	oe_determined_by_the_Board_of
Directors of the Barth Syndrome Foundation	
Form 990 Part III Line 4a - Program Service Accomplishments	
Scientific Research Program	
2008 marked the seventh year of the Barth Syndrome Fo	oundation's (BSF) Research
program. In 2008, following announcement of the progr	ram_via_internet_and_several
scientific journals, BSF's Scientific and Medical Rev	view Board and several
independent reviewers assessed the scientific merit of	of the proposals, the
qualifications of the researcher, the likely success	of the research in attracting
future funding, and the impact of the research on adv	vancing understanding of Barth
syndrome, and made approval recommendations to the Bo	pard of BSF which made the final
decisions. The BSF Board approved nine out of 14 prop	posals submitted for a total of
\$333,454, \$77,256 of which were funded by other chari	itable organizations in Canada
and the UK. Approved proposals were submitted from 9	academic and research
institutions in 3 countries and ran for periods of up	to 2 years. In total, BSF has
now approved a total of almost \$1.5M in 40 seed grant	s to researchers on three
continents through the same rigorous peer reviewed ac	lvisory_process.
Form 990 Part III Line 4b - Program Service Accomplishments	
International Scientific, Medical and Family Conferen	nce
Every two years, BSF runs an International Scientific	. Medical and Family Conference

Name of the organization

Name of the organization  The Barth Syndrome Foundation Inc.	Employer identification number 22-3755704			
The Barth Syndrome Foundation, Inc.	122-3755704			
Form 990, Part III, Line 4b - Program Service Accomplishments (continued)				
with the most recent one in 2008. This unique and acclaimed for	ormat brings together			
the world's top Barth syndrome researchers, clinicians attending	ng affected families			
and the families themselves to share their data, their research	and their			
observations. The Conference begins with a clinic at which extends	ensive data and			
samples are gathered from the affected boys and their families	for the Barth			
Syndrome Registry and Repository (see below) and clinicians have	ve the chance to			
examine and take histories from the largest gathering of people	affected by this			
rare disorder in the world. Then researchers present the result	lts of their work and			
extensive discussion ensues. Families benefit from access to	the world's experts on			
Barth syndrome in all of the many disciplines affected by this	multi-system			
disorder, and from scientists reviewing results of their latest	research. Over the			
years, a strong sense of trust and mutually beneficial cooperat	ion has grown among			
the various groups in attendance which continues to facilitate	and encourage further			
discovery.				
Form 990, Part III, Line 4d - Other Program Services Description	·			
Other program services include newsletters and publications as	well as other support			
for families with children suffering from Barth syndrome.	·			
	·			
Form 990, Part VI, Line 10 - Form 990 Review Process	·			
The Form 990 was sent to the full board of directors via e mail	prior to being filed			
with the IRS. All directors were afforded the opportunity to as	sk questions and offer			
edits. The decision of whether to make edits was made by the staff person in charge				
of finances within the organization in conjunction with consult	ation with our tax			
preparer.				
·				

Name of the organization	Employer identification number				
The Barth Syndrome Foundation, Inc.	22-3755704				
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts					
The organization has a conflicts of interest policy. Each board member must fill out					
an annual declaration stating that they had no conflicts or ide	entifying the nature				
of their interested party transactions.					
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers	s & Key Employees				
Each year, the executive committee reviews comparable salaries	based on a recognized				
study and reviews the performance of key employees to determine	e if the existing				
salaries fall within these ranges. After a deliberation of this	matter, a new				
proposed salary and benefit package is voted on. The minutes of	the board of				
directors reflect the nature of this process.					
Form 990 , Part VI, Line 17 - List of States which this Return is Filed	~				
MA NY CT NJ IL TN PA DE CA FL MD UT GA					
	· <b></b>				
~					



IRA L. SCHALL, CPA DAVID C. ASHENLARB, CPA

## THE BARTH SYNDROME FOUNDATION, INC.

**Audited Financial Statements** 

December 31, 2008 and 2007



TRA F. SCHALL, CPA DAWID C. ASHENFARB, CPA

#### INDEPENDENT AUDITORS' REPORT

To the Board of Directors of The Barth Syndrome Foundation, Inc.

We have audited the accompanying statement of financial position of The Barth Syndrome Foundation, Inc. (the "Foundation") as of December 31, 2008 and 2007 and the related statements of activities, functional expenses, and cash flows for the years then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatements. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, based on our audits, the financial statements referred to above present fairly, in all material respects, the financial position of The Barth Syndrome Foundation, Inc. as of December 31, 2008 and 2007, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Schall & Ashenfarb

Certified Public Accountants, LLC

Schall & Ashenfarb

March 16, 2009

# THE BARTH SYNDROME FOUNDATION, INC. STATEMENT OF FINANCIAL POSITION AT DECEMBER 31, 2008 AND 2007

Assets	12/31/08	12/31/07					
Cash and cash equivalents (Notes 2g and 2h) Investments (Note 5) Accounts receivable Unconditional promises to give (Note 2c and 2e) Prepaid expenses  Total assets	\$2,242,382 0 7,235 125,000 712 \$2,375,329	\$2,317,189 286,833 1,477 973 7,297 \$2,613,769					
Liabilities and Net Assets							
Liabilities: Accounts payable and accrued expenses Grants payable (Note 4)	\$15,581 134,843	\$15,684 168,300					
Total liabilities	150,424	183,984					
Net Assets: (Note 2b) Unrestricted Temporarily restricted (Note 3)  Total net assets	1,486,721 738,184	1,993,659 436,126					
Total liabilities and net assets	2,224,905 \$2,375,329	\$2,613,769					

# THE BARTH SYNDROME FOUNDATION, INC. STATEMENT OF ACTIVITIES FOR THE YEARS ENDED DECEMBER 31, 2008 AND 2007

	12/31/08			12/31/07		
	Temporarily			Temporarily		
	Unrestricted	Restricted	Total	Unrestricted	Restricted	Total
Public Support and Revenue:						
Contributions (Notes 2c and 3)	\$361,165	\$366,792	\$727,957	\$291,849	\$382,608	\$674,457
Interest income	133,788		133,788	116,505		116,505
Net assets released from restrictions:						·
Satisfaction of program restrictions (Note 3)	64,734	(64,734)	0	335,697	(335,697)	0
Total public support and revenue	559,687	302,058	861,745	744,051	46,911	790,962
Expenses:						
Program services	894,904		894,904	596,095		596,095
Management and general	160,139		160,139	81,864		81,864
Fundraising	11,582		11,582	12,372		12,372
Total expenses	1,066,625	0	1,066,625	690,331	0	690,331
Change in net assets	(506,938)	302,058	(204,880)	53,720	46,911	100,631
Net assets - beginning of year	1,993,659	436,126	2,429,785	1,939,939	389,215	2,329,154
Net assets - end of year	\$1,486,721	\$738,184	\$2,224,905	\$1,993,659	\$436,126	\$2,429,785

# THE BARTH SYNDROME FOUNDATION, INC. STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2008

		Management			
	Program	and		Total	Total
	Services	General	Fundraising	12/31/08	12/31/07
Salaries	\$233,954	\$34,103	\$9,935	\$277,992	\$216,749
Payroll taxes and benefits	37,578	5,478	1,596	44,652	15,723
Total personnel services	271,532	39,581	11,531	322,644	232,472
Research grants	253,894			253,894	309,200
Professional	145,259	66,705		211,964	48,616
Telephone	2,413	5,506		7,919	5,508
Office expense	49,445	18,367	51	67,863	25,908
Printing and publications	12,734	1,365		14,099	12,480
Dues and conferences	376	5,251		5,627	8,759
Transportation	124,402	16,464		140,866	30,572
Insurance		4,965		4,965	2,043
Meals	492	1,935		2,427	8,388
Audio visual expense	32,434			32,434	0
Exhibits	1,923			1,923	6,385
Total expenses	\$894,904	\$160,139	\$11,582	\$1,066,625	\$690,331

# THE BARTH SYNDROME FOUNDATION, INC. STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2007

	Program Services	Management and General	Fundraising	Total 12/31/07
Salaries	\$191,188	\$25,561		\$216,749
Payroll taxes and benefits	13,869	1,854		15,723
Total personnel services	205,057	27,415	0	232,472
Research grants	309,200			309,200
Professional	20,774	27,842		48,616
Telephone	2,453	3,055		5,508
Office expense	7,691	9,451	8,766	25,908
Printing and publications	8,271	2,683	1,526	12,480
Dues and conferences	4,241	4,518		8,759
Transportation	26,036	4,536		30,572
Insurance		2,043		2,043
Meals	5,987	321	2,080	8,388
Audio visual expense				0
Exhibits	6,385			6,385
Total expenses	\$596,095	\$81,864	\$12,372	\$690,331

# THE BARTH SYNDROME FOUNDATION, INC. STATEMENT OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2008 AND 2007

	12/31/08	12/31/07
Cash Flows from Operating Activities:		
Change in net assets	(\$204,880)	\$100,631
Adjustments to reconcile change in net assets	-	
to net cash provided by/(used for) operating activities:		
Donated stock	0	(10,395)
Realized gain on sale of investments	(1,762)	0
(Increase)/decrease in assets:		
Accounts receivable	(5,758)	(929)
Unconditional promises to give	(124,027)	335,332
Prepaid expenses	6,585	(5,998)
Increase/(decrease) in liabilities:		
Accounts payable and accrued expenses	(103)	3,531
Grants payable	(33,457)	49,276
Total adjustments	(158,522)	370,817
Net cash (used for)/provided by operating activities	(363,402)	471,448
Cash Flows from Investing Activities:		
Proceeds from sales of investments and donated stock	288,595	21,596
Purchase of investments	0	(286,990)
Net cash provided by/(used for) investing activities	288,595	(265,394)
Net (decrease)/increase in cash and cash equivalents	(74,807)	206,054
Cash and cash equivalents - beginning of year	2,317,189	2,111,135
Cash and cash equivalents - end of year	\$2,242,382	\$2,317,189
Supplemental data:		
Interest & income taxes paid	\$0	\$0
<b>*</b> · · ·		

# THE BARTH SYNDROME FOUNDATION, INC. NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2008 AND 2007

### Note 1. Organization

The Barth Syndrome Foundation, Inc. (the "Foundation") is a not-for-profit organization incorporated under the laws of the state of Delaware on September 8, 2000 to act as a public foundation, operated for the following purposes: a) to promote awareness of Barth Syndrome; b) to educate and support physicians, research centers and organizations addressing the causes, diagnosis, treatment and cure of Barth Syndrome, and c) to assist in the support of families with children suffering from Barth Syndrome.

The Foundation is a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code. They have not been designated as a private foundation.

### Note 2. Summary of Significant Accounting Policies

#### a. Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

### b. Basis of Presentation

The Foundation follows Statement of Financial Accounting Standards (SFAS) No.'s 116 and 117, Accounting for Contributions Received and Contributions Made, and Financial Statements of Not-for-Profit Organizations. Under SFAS No. 117, organizations are required to report information regarding their financial position and activities according to the following classes of net assets:

- > Unrestricted represents all activity without donor imposed restrictions.
- > Temporarily restricted relates to contributions of cash and other assets with donor stipulations that make clear the assets restriction, either due to a program nature or by passage of time.
- ➤ Permanently restricted relates to contributions of cash and other assets whereby the assets must remain intact due to restrictions placed by the donor. The Foundation had no permanently restricted net assets at December 31, 2008 and 2007.

### c. Contributions

Contributions received are recorded as unrestricted or temporarily restricted support depending on the existence and/or nature of any donor restrictions.

Support that is restricted by the donor is reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in temporarily restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose

restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restriction.

### d. Donated Assets

Donated marketable securities and other non-cash donations are recorded as contributions at their estimated fair values at the date of donation.

### e. Unconditional Promises to Give

Unconditional promises to give are recognized as revenues or gains in the period received and as assets or decreases of liabilities, depending on the form of the benefits received. Conditional promises to give are recognized when the conditions on which they depend are substantially met. At year end, the full amount is due within one year. These receivables have been evaluated for collectability and no allowance for doubtful accounts is deemed necessary.

### f. In-Kind Contributions

Under SFAS No. 116, organizations are required to recognize contributions of services that enhance non-financial assets and require specialized skills. Many individuals volunteer their time and perform a variety of tasks that assist the Association with specific programs, campaign solicitation, and various committee assignments. These volunteer services do not meet the criteria stated above and have not been recognized in the financial statements.

### g. Cash and Cash Equivalents

For purposes of financial reporting, cash and cash equivalents include cash held in banks, certificates of deposits and money market funds. There were no interest or taxes paid during the year.

### h. Concentration of Credit Risk

The Foundation maintains its cash balances at institutions they consider to be credit worthy. The cash balances are insured by the Federal Deposit Insurance Corporation (FDIC) for amounts up to \$250,000. From time to time, balances may exceed insured limits and at December 31, 2008, the Foundation had uninsured cash balances of \$141.635.

#### i. Capitalization Policies

Items of property and equipment with an individual cost in excess of \$5,000 are capitalized at cost. Routine maintenance and repair costs and leasehold improvements, which do not materially extend the estimated useful lives of property and equipment, are expensed as incurred.

### j. Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the statement of activities and in the statement of functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited. Management and general expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of the Foundation.

### k. Management Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, results could differ from those estimates.

### Note 3. Temporarily Restricted Net assets

At December 31, 2008, temporarily restricted net assets consist of the following:

	Balance 1/1/08 C	ontributions	Released from Restrictions	Balance 12/31/08
Program Restrictions:	27 7/ 44 3	211111111111111111111111111111111111111	100110110110	XHIDXIOO
Paula & Woody Varner				
Science and Medicine Fund	\$188,918	\$24,607	(\$45,431)	\$168,094
Barth Syndrome Trust	19,303	0	(19,303)	0
Science and Medicine Fund	<u> 227.905</u>	<u>217.185</u>	0	445.090
Total Program Restrictions	436,126	241,792	(64,734)	613,184
Time Restrictions	0	<u> 125.000</u>	0	<u>125.000</u>
Total	<u>\$436,126</u>	<u>\$366,792</u>	<u>(\$64,734)</u>	<u>\$738,184</u>

At December 31, 2007, temporarily restricted net assets consist of the following:

Program Restrictions:	Balance <u>1/1/07</u> <u>C</u>	Contributions	Released from Restrictions	Balance 12/31/07
Paula & Woody Varner Science and Medicine Fund	\$89,215	\$99,703	\$0	\$188,918
Barth Syndrome Trust	0	55,000	(35,697)	19,303
Science and Medicine Fund	0	<u>227.905</u>	0	<u>227.905</u>
Total Program Restrictions	89,215	382,608	(35,697)	436,126
Time Restrictions	<u>300,000</u>	0	(300.000)	0
Total	<u>\$389,215</u>	\$382,608	(\$335,697)	<u>\$436,126</u>

#### Note 4. Commitments

Grants payable accrued of \$134,843 are all due to be paid within twelve months.

Although the Foundation does not have any long-term leases, they are committed to research grants awarded subsequent to year end, up to the amount of \$119,998, that are payable in 2009 and 2010.

#### Note 5. Investments

Securities are carried at fair market value in accordance with SFAS No. 124. At December 31, 2007, investments consisted of a United States Treasury Bill. At December 31, 2008, the Foundation did not carry any investments. At year end, the quoted market price was used as the basis of determining fair value, which also approximates the original cost.