

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047  
**2007**  
 Open to Public Inspection

**A For the 2007 calendar year, or tax year beginning** \_\_\_\_\_, **and ending** \_\_\_\_\_

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Termination  
 Amended return  
 Application pending

**C Name of organization**  
**NARCONON WESTERN UNITED STATES**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**6161 SANTA MONICA BLVD. 208**  
 City or town, state or country, and ZIP + 4  
**LOS ANGELES CA 90038-4406**

**D Employer identification number**  
**65-1238009**

**E Telephone number**  
**323-871-8644**

**F Accounting method**  Cash  
 Accrual  Other (specify) \_\_\_\_\_

**G Website:** N/A

**J Organization type**  
 (check only one)  501(c) ( **3** ) (insert no)  4947(a)(1) or  527

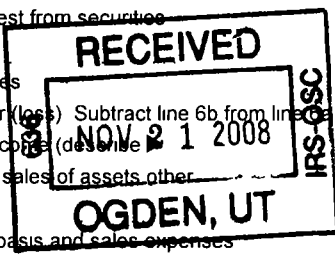
**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L Gross receipts** Add lines 6b, 8b, 9b, and 10b to line 12 **690,436**

**H and I are not applicable to section 527 organizations**  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates **▶**  
**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list. See instructions.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No  
**I Group Exemption Number** **▶ 2595**  
**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)**

Revenue					
<b>1</b>	Contributions, gifts, grants, and similar amounts received				
<b>a</b>	Contributions to donor advised funds	<b>1a</b>			
<b>b</b>	Direct public support (not included on line 1a)	<b>1b</b>	<b>16,000</b>		
<b>c</b>	Indirect public support (not included on line 1a)	<b>1c</b>			
<b>d</b>	Government contributions (grants) (not included on line 1a)	<b>1d</b>			
<b>e</b>	<b>Total</b> (add lines 1a through 1d) (cash \$ <b>16,000</b> noncash \$ _____ )			<b>1e</b>	<b>16,000</b>
<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)			<b>2</b>	<b>669,154</b>
<b>3</b>	Membership dues and assessments			<b>3</b>	
<b>4</b>	Interest on savings and temporary cash investments			<b>4</b>	<b>1,397</b>
<b>5</b>	Dividends and interest from securities			<b>5</b>	
<b>6a</b>	Gross rents	<b>6a</b>			
<b>b</b>	Less rental expenses	<b>6b</b>			
<b>c</b>	Net rental income or (loss) Subtract line 6b from line 6a			<b>6c</b>	
<b>7</b>	Other investment income (describe in Part VII)			<b>7</b>	
<b>8a</b>	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
<b>b</b>	Less cost or other basis and sales expenses	<b>8a</b>			
<b>c</b>	Gain or (loss) (attach schedule)	<b>8b</b>			
<b>d</b>	Net gain or (loss) Combine line 8c, columns (A) and (B)	<b>8c</b>		<b>8d</b>	
<b>9</b>	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
<b>a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1b)	<b>9a</b>			
<b>b</b>	Less direct expenses other than fundraising expenses	<b>9b</b>			
<b>c</b>	Net income or (loss) from special events Subtract line 9b from line 9a			<b>9c</b>	
<b>10a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>			
<b>b</b>	Less cost of goods sold	<b>10b</b>			
<b>c</b>	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a			<b>10c</b>	
<b>11</b>	Other revenue (from Part VII, line 103)			<b>11</b>	<b>3,885</b>
<b>12</b>	<b>Total revenue.</b> Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			<b>12</b>	<b>690,436</b>
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>			<b>820,346</b>
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>			<b>105,850</b>
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>			
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>			
	<b>17</b> <b>Total expenses.</b> Add lines 16 and 44, column (A)	<b>17</b>			
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year Subtract line 17 from line 12	<b>18</b>			<b>-235,760</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>			<b>276,186</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>			
	<b>21</b> <b>Net assets or fund balances at end of year</b> Combine lines 18, 19, and 20	<b>21</b>			



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**Part II Statement of Functional Expenses** All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b>	Other grants and allocations (attach schedule) <b>STMT 1</b> (cash \$ <b>368,622</b> non-cash \$ _____) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	<b>368,622</b>	<b>368,622</b>		
<b>23</b>	Specific assistance to individuals (attach schedule)				
<b>24</b>	Benefits paid to or for members (attach schedule)				
<b>25a</b>	Compensation of current officers, directors, key employees, etc listed in Part V-A <b>SEE STATEMENT 2</b>	<b>48,876</b>	<b>39,971</b>	<b>8,905</b>	
<b>25b</b>	Compensation of former officers, directors, key employees, etc listed in Part V-B <b>SEE STATEMENT 3</b>	<b>6,750</b>	<b>5,400</b>	<b>1,350</b>	
<b>25c</b>	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c	<b>170,008</b>	<b>134,471</b>	<b>35,537</b>	
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c				
<b>28</b>	Employee benefits not included on lines 25a - 27	<b>20,775</b>	<b>16,560</b>	<b>4,215</b>	
<b>29</b>	Payroll taxes	<b>20,303</b>	<b>16,184</b>	<b>4,119</b>	
<b>30</b>	Professional fundraising fees				
<b>31</b>	Accounting fees	<b>7,503</b>		<b>7,503</b>	
<b>32</b>	Legal fees	<b>22,601</b>	<b>22,601</b>		
<b>33</b>	Supplies	<b>24,113</b>	<b>19,220</b>	<b>4,893</b>	
<b>34</b>	Telephone	<b>21,766</b>	<b>17,349</b>	<b>4,417</b>	
<b>35</b>	Postage and shipping	<b>136</b>	<b>109</b>	<b>27</b>	
<b>36</b>	Occupancy	<b>77,434</b>	<b>61,723</b>	<b>15,711</b>	
<b>37</b>	Equipment rental and maintenance				
<b>38</b>	Printing and publications	<b>417</b>		<b>417</b>	
<b>39</b>	Travel	<b>37,807</b>	<b>30,136</b>	<b>7,671</b>	
<b>40</b>	Conferences, conventions, and meetings	<b>22,165</b>	<b>22,165</b>		
<b>41</b>	Interest	<b>444</b>	<b>354</b>	<b>90</b>	
<b>42</b>	Depreciation, depletion, etc (attach schedule)	<b>13,582</b>	<b>10,826</b>	<b>2,756</b>	
<b>43a</b>	Other expenses not covered above (itemize) <b>SEE STATEMENT 4</b>	<b>62,894</b>	<b>54,655</b>	<b>8,239</b>	
<b>43b</b>					
<b>43c</b>					
<b>43d</b>					
<b>43e</b>					
<b>43f</b>					
<b>43g</b>					
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>926,196</b>	<b>820,346</b>	<b>105,850</b>	<b>0</b>

**Joint Costs.** Check  if you are following SOP 98-2  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_