EXTENSION GRANTED THROUGH 11/15/09

Department of the Treasury Internat 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 Inspection

A	FOR THE	e 2008 calendar year, or tax year beginning and ending		
В	Check if applicabl	e: Please use IRS C Name of organization	D Employer identifi	cation number
X	Addre	ss label or SPIRIT OF AMERICA WORLDWIDE		
Ļ	Name chang lnitial		20-1	687786
	return Termir	See Number and street (or P.O. box if mail is not delivered to street address) Room/s 12021 WILSHIRE BLVD., SUITE 507		r 230-5476
	Amen	ded tions.	G Gross receipts \$	1,006,380.
	Applic		H(a) Is this a group re	
	pendir	F Name and address of principal officer: JAMES HAKE	for affiliates?	Yes X No
		12021 WILSHIRE BLVD., SUITE 507, LOS ANGEL	ES H(b) Are all affiliates inc	
1	Tax-ex	empt status: X 501(c) (3		list. (see instructions)
J	Websit	te: > WWW.SPIRITOFAMERICA.NET	H(c) Group exemptio	
ĸ	Type of	organization: X Corporation Trust Association Other Ly		I State of legal domicile: CA
2	art I	Summary	· · ·	
-o	1	Briefly describe the organization's mission or most significant activities: SPIRIT O	F AMERICA'S M	ISSION IS
Governance	1	TO HELP AMERICANS SERVING ABROAD ASSIST LOCA	L PEOPLE IN N	EED.
ř	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its asset	s.
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	3
م ص	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	2
es	5	Total number of employees (Part V, line 2a)	5	<u>5</u>
<u>X</u>	6	Total number of volunteers (estimate if necessary)	6	
Activities &	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue			Prior Year	Current Year
		Contributions and grants (Part VIII, line 1h)	1,473,384.	978,031.
		Program service revenue (Part VIII, line 2g)		
Re.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	33,669.	28,349.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4 - 4 - 4 - 4	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,507,053.	1,006,380.
	i	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		22,141.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	450 244	015 105
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	152,344.	216,496.
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)	Managara Ma	11,770.
X	_b	Total fundraising expenses (Part IX, column (D), line 25) 54,865.	1 050 505	
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,059,505.	978,224.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,211,849.	1,228,631.
, jo	19	Revenue less expenses. Subtract line 18 from line 12	295,204.	<222,251.>
ts o			Beginning of Year	End of Year
Sse	20	Total assets (Part X, line 16)	1,119,572.	1,017,103.
Net Assets Fund Baland	21	Total liabilities (Part X, line 26)	50,018. 1,069,554.	83,502.
Б	22 art	Net assets or fund balances. Subtract line 21 from line 20	1,009,554.	933,601.
8.65		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme	nts, and to the best of my knowled	ne and helief it is true correct
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	edge.	go and bonor, it is abo, correct,
Sig	n		1	
Her		Signature of officer	Date	
		JAMES HAKE, CHIEF EXECUTIVE OFFICER		
		Type or print name and title		
		Preparer's Date		er's identifying number
Paid		signature	self- employed ▶ [(see ins	structions)
	parer's	Firm's name (or GURSEY SCHNEIDER LLP	EIN ▶	
Use	Only	self-employed), 1888 CENTURY PARK EAST, SUITTE 900		
		address, and LOS ANGELES, CA 90067-1735	Phone no. ▶ 3	10-552-0960
Ma	y the If	RS discuss this return with the preparer shown above? (see instructions)	1	X Yes No

	1990 (2008)		ERICA WORLDWIDE	20-168	7786	Page 2
Pa		······································	complishments (see instructions)			
1		the organization's mission:				
	SEE STAT	EMENT A.				
	_					
2	Did the organiza	ation undertake any significant prog	ram services during the year which were no	t listed on		
_	the prior Form 9		am os visos daming the year which were no		Yes	X No
		be these new services on Schedule				
3			nificant changes in how it conducts, any pro	ogram services?	Yes	X No
		be these changes on Schedule O.				
4	Describe the ex	empt purpose achievements for each	h of the organization's three largest progra	m services by expenses.		
	Section 501(c)(3) and 501(c)(4) organizations and se	ection 4947(a)(1) trusts are required to repo	rt the amount of grants and		
	allocations to of	thers, the total expenses, and reven	ue, if any, for each program service reported	d.		
4a			758 including grants of \$) (Revenue \$)
	SEE STAT	EMENT A.				
	-					
			W WY MAN C.			
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$		<u> </u>
	•			, ,,		,
	•					
4-	/C) (<u></u>		\		
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
						
	-					•••
				····		
					·····	
4d	Other program	services. (Describe in Schedule O.)				
	(Expenses \$	including gran	ts of \$) (Revenue \$)		
ie.	Total program		009.758. (Must equal Part IX. Line	25 column (P) I		

Form **990** (2008)

Form 990 (2008) SPIRIT OF AMERICA WORLDWIDE
Part IV Checklist of Required Schedules

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P	art IV Checklist of Required Schedules			
			Yes	No
. 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2		2	Х	
3				
	public office? If "Yes," complete Schedule C, Part I	3		Х
4		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				
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8				
	Schedule D, Part III	8		Х
9				
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	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	X	
13		13		Х
14		14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	1		
	located outside the United States? If "Yes," complete Schedule F, Part II	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16	Х	<u> </u>
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		18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	, , , , , , , , , , , , , , , , , , , ,	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24	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, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		<u> </u>
	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25	a 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		X
	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		X
26	.,			
	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	000	X
		Form	990 <i>(</i>	2008)

Form **990** (2008)

	990 (2008) SPIRIT OF AMERICA WORLDWIDE 20-168	7786	Р	age 4
Pa	t IV Checklist of Required Schedules (continued)	-		
		(Table in the	Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an	44		
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	•
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
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		Х
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		Х
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)

Form **990** (2008)

Form 990 (2008) SPIRIT OF AMERICA WORLDWIDE

Part V Statements Regarding Other IRS Filings and Tax Compliance

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га	Statements negariting Other ins rinings and rax Compliance			<u> </u>						
		! I	-10015-100S	Yes	No					
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	_								
	U.S. Information Returns. Enter -0- if not applicable	1a	6							
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	U							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r		WARD STORE	ANG						
_	(gambling) winnings to prize winners?	 I i	1c	1,212,011						
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a	5	67/45 1						
	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	Х	de ere vil					
	Note. If the sum of lines 1a and 2a is greater than 250, you may 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?									
			3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other	• ,	i							
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a	11	X					
	If "Yes," enter the name of the foreign country: ▶									
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and								
	Financial Accounts.		4684		1201661					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			,	X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	***************************************	5b		X					
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regarding Prohibited								
	Tax Shelter Transaction?									
	Did the organization solicit any contributions that were not tax deductible?		6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	· ·								
	were not tax deductible?		6b	Lois dilina	2,131,121,111					
	Organizations that may receive deductible contributions under section 170(c).									
	Did the organization provide goods or services in exchange for any quid pro quo contribution of mor	***************************************			Х					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			l					
	to file Form 8282?		7c		X					
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	(100) (100) (102) (100)							
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	personal								
	benefit contract?				X					
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		···		Х					
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required	?	7g		X					
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	C as required?	7h	700 000	Х					
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec									
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	ganization, have	750000	eg) againg						
	excess business holdings at any time during the year?		8							
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.									
а	Did the organization make any taxable distributions under section 4966?		9a							
þ	Did the organization make a distribution to a donor, donor advisor, or related person?		9b							
10	Section 501(c)(7) organizations. Enter: N/A									
	Initiation fees and capital contributions included on Part VIII, line 12	10a								
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter: N/A	1 1	XIII.							
	Gross income from members or shareholders	11a	#374441A							
b	Gross income from other sources (Do not net amounts due or paid to other sources against		73577 1957 17587 15597	PRANCES.						
	amounts due or received from them.)	11b								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	114.000							

Form 990 (2008)

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

	tion A. Governing Body and Management			
		200 June 18	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.		gana.	
1a		1		
b	Enter the number of voting members that are independent	4		2524
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	570,20	Kir	
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	, , , , , , , , , , , , , , , , , , , ,			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	100100000000000000000000000000000000000		
	by the following:			rigrandin
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
þ	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?	9b		
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	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
<u>Sec</u>	tion B. Policies			
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
		-		
	to conflicts?	12b		<u>X</u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12b		X
c 13	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		Х	
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X	
13	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy?	12c		
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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:	12c	X	
13 14 15 a	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official?	12c	X X	
13 14 15 a	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	12c 13 14	X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	12c 13 14 15a	X X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	12c 13 14 15a	X X	X
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13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	12c 13 14 15a 15b	X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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	12c 13 14 15a 15b	X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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?	12c 13 14 15a 15b	X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? Tion C. Disclosure	12c 13 14 15a 15b	X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? List the states with which a copy of this Form 990 is required to be filed CA	12c 13 14 15a 15b 16a 16a	X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? Tion C. Disclosure	12c 13 14 15a 15b 16a 16a	X X	X
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	12c 13 14 15a 15b 16a 16a	X X	X
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. X Own website X Another's website X Upon request	12c 13 14 15a 15b 16a 16b	X X X	X
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	12c 13 14 15a 15b 16a 16b	X X X	X
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13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. X Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	12c 13 14 15a 15b 16a 16b	XXX	X
13 14 15 a b 16a b Sec 17 18	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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: The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "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? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. X Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	12c 13 14 15a 15b 16a 16b	XXX	X

Form 990 (2008)

SPIRIT OF AMERICA WORLDWIDE

20-1687786

Page 7

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not (A)	(B)	iy oi	ncer			or, tri	uste	(D)	(E)	(F)
Name and Title	Average		(C) Position					Reportable	(⊏) Reportable	(F) Estimated
	hours	(с	(check all that apply				ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуве	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JAMES HAKE CEO & CHAIRMAN	14.00			x				0.	0.	0
PEGGY FINDLEY	14.00			123		\vdash			0.	0
EXECUTIVE DIRECTOR	45.00			Х				75,000.	0.	0
DENNIS NORRIS EXECUTIVE DIRECTOR	45.00			x				12,423.	0.	0

									<u>: </u>	
	<u> </u>								·	
· ·									:	
NAME AND ADDRESS OF THE PARTY O										
									:	

FOR PUBLIC DISCLOSURE Form 990 (2008) SPIRIT OF AMERICA WORLDWIDE 20-1687786 Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (F) Name and title Average Position Reportable Reportable Estimated (check all that apply) hours compensation compensation amount of per from from related other Individual trustee or director week the organizations compensation organization (W-2/1099-MISC) from the Institutional trustee (W-2/1099-MISC) organization and related Officer organizations 87,423. 0. <u>o.</u> 1b Total ... Total number of individuals (including those in 1a) who received more than \$100,000 in reportable 0 compensation from the organization Yes Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 X For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual X 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person ... X Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from NONE the organization

(A) Name and business address	(B) Description of services	(C) Compensation
 Total number of independent contractors (including those in 1) who re from the organization 	ceived more than \$100,000 in compensation	

_		(2008) SPIRIT OF AMERICA	WORLDWIDE	20-1687786 Page		
Pa	n VI	III Statement of Revenue	(A) (B) Total revenue Related or exempt function revenue	(C) Unrelated business revenue revenue (D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	t c c e f	a Federated campaigns b Membership dues c Fundraising events d Related organizations d Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above f Noncash contributions included in lines 1a-1f: \$ f Total. Add lines 1a-1f				
Program Service Revenue	2 a b c c c c c f	Business a b c d	Code			
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties	>	28,349.		
	b c	(i) Real (ii) Personal Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of (i) Securities (ii) Oth				
	d	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	The second secon			
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b				
	9 a	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 a Less: direct expenses b				
	10 a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances a	ORD TO THE ACTUAL POPULATION OF THE ACTUAL PROPERTY OF THE ACTUAL PR			
		Less: cost of goods sold				
	b					
83200 02-02	e 12	Total. Add lines 11a-11d Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	1,006,380. 0.	0 • 28,349 • Form 990 (2008)		

Form 990 (2008)

SPIRIT OF AMERICA WORLDWIDE

20-1687786 Page **10**

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				Annual Control of the
3	Grants and other assistance to governments,				The second secon
	organizations, and individuals outside the U.S.			A STATE OF THE PROPERTY OF THE	
	See Part IV, lines 15 and 16	22,141.	22,141.	2 22 22 22 22 22 22 22 22 22 22 22 22 2	2
4	Benefits paid to or for members				i i i i i i i i i i i i i i i i i i i
5	Compensation of current officers, directors,				
	trustees, and key employees	87,423.	22,765.	41,893.	22,765
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	95,793.	74,333.	21,460.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	18,100.	4,525.	13,575.	
0	Payroll taxes	15,180.	7,428.	7,752.	
1	Fees for services (non-employees):				
	Management				
b	Legal				
	Accounting	4,500.		4,500.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17	11,770.	An and the second of the secon	Committee of the Commit	11,770
	Investment management fees				
	Other	34,245.	7,800.	26,445.	
2	Advertising and promotion				
3	Office expenses	18,939.	4,735.	9,469.	4,735
4	Information technology	18,217.	4,555.	9,107.	4,555
5	Royalties				
6	Occupancy	19,315.	4,829.	14,486.	
7	Travel	11,610.	2,903.	5,804.	2,903
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates	`			
2	Depreciation, depletion, and amortization	3,088.		3,088.	
:3	Insurance	6,159.	500.	5,659.	
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.)				
	CONTRIBUTIONS	516,783.	516,783.		The state of the s
b	PROGRAM GOODS	336,461.	336,461.		
c	MERCHANT DISCOUNT FEES	8,137.			8,137
đ	BUSINESS TAXES	770.		770.	
е					
	All other expenses				
5	Total functional expenses. Add lines 1 through 24f	1,228,631.	1,009,758.	164,008.	54,865
6	Joint Costs. Check here if following	· · · · · · · · · · · · · · · · · · ·	. ,		
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Form 990 (2008)

SPIRIT OF AMERICA WORLDWIDE

20-1687786 Page **11**

Pai	τX	Balance Sheet					·		
					(A) Beginning of year		Er	(B) nd of yea	
	1	Cash - non-interest-bearing			371,238.	1		176,	939.
	2	Savings and temporary cash investments			735,916.	2		834,	316.
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net				4			
	5	Receivables from current and former officers, of							
		employees, or other related parties. Complete I	⊃art II o	f Schedule L		5	}		
	6	Receivables from other disqualified persons (as	s define	d under section		77 (A) (A) (A)			76206060
		4958(f)(1)) and persons described in section 49	58(c)(3)	(B). Complete					
		Part II of Schedule L				6			
şţs	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8			312.
∢	9	Prepaid expenses and deferred charges			5,510.	9			
	10a	Land, buildings, and equipment: cost basis	10a	19,866.					
	þ	Less: accumulated depreciation. Complete) 200 100 100 100	The second secon				Enrick Co.
		Part VI of Schedule D			6,908.	10c		5,	536.
	11	Investments - publicly traded securities				11			
	12	Investments - other securities. See Part IV, line				12			
	13	Investments - program-related. See Part IV, line				13			
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11			1 110 550	15		~~ ==	4.00
	16	Total assets. Add lines 1 through 15 (must equ			1,119,572.	16	<u> </u>	017,	
	17	Accounts payable and accrued expenses	12,563.	17		26,	492.		
	18	Grants payable		marra	18				
	19	Deferred revenue			19				
	20	Tax-exempt bond liabilities				20		····	
ies	21	Escrow account liability. Complete Part IV of Sc		THE PARTY NAMED IN COLUMN TWO IS NOT THE PARTY NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED	AN AL CONTROL OF THE PROPERTY	21		esta de la constanta de la con	100000000000000000000000000000000000000
Liabilities	22	Payables to current and former officers, director	11.25	CANADA CA		transparing transparing	wijelijs (A		
Lia		highest compensated employees, and disquality of Schedule L			GOMBS:				
	23	***************************************				22	<u> </u>		
	23 24	Secured mortgages and notes payable to unre				23 24			
	25	Unsecured notes and loans payable Other liabilities. Complete Part X of Schedule D			37,455.	25		57	010.
	26	Total liabilities. Add lines 17 through 25			50,018.	26			502.
_		Organizations that follow SFAS 117, check h							
s		lines 27 through 29, and lines 33 and 34.		223 and complete	Principal Control of the Control of				
ces	27	Unrestricted net assets		**************************************	1,069,554.	27		933,	601.
alaı	28	Temporarily restricted net assets			2,000,0010	28		2007	
g p	29					29	h		
Net Assets or Fund Balan		Organizations that do not follow SFAS 117, o				orthonic orthonic			
P.		complete lines 30 through 34.			The second secon			A STATE OF THE STA	C. 1911 11 11 11 11 11 11 11 11 11 11 11 1
ets	30	Capital stock or trust principal, or current funds		1992	· · · · · · · · · · · · · · · · · · ·	30		······································	
\ss	31	Paid-in or capital surplus, or land, building, or e				31			
et /	32	Retained earnings, endowment, accumulated in				32			
Ż	33	Total net assets or fund balances			1,069,554.	33		933,	601.
	34	Total liabilities and net assets/fund balances			1,119,572.	34	1,	017,	103.
Par	t XI	Financial Statements and Reporting	3						
								Ye	s No
1		ounting method used to prepare the Form 990:			Other		ŝ		
2a	, , , , , , , , , , , , , , , , , , , ,							2a	X
b								2b X	
C		f "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,							
		review, or compilation of its financial statements and selection of an independent accountant?						2c	<u> </u>
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						dit		
_		Act and OMB Circular A-133?						3a	X
		es," did the organization undergo the required a	ıdit or a	udits?		<u></u>		3b	<u> </u>
83201	1 12-18	-08					F	orm 99 0) (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.

2008
Open to Public
Inspection

Name of the organization

Employer identification number

			OF AMERICA W					1	20	-1687	786	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t.) (see ins	tructions)				
The organ	ization is not a	a private foundation	because it is: (Please ch	neck only o	ne organi	zation.)						
1	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2			70(b)(1)(A)(ii). (Attach Sc									
3			ital service organization	•	in section	170(b)(1)	(A)(iii). (At	tach Sche	dule H)			
4			operated in conjunction							e hospita	l's nam	ıe.
•	city, and stat		oporatoo iii ootijariodo.ii	***************************************	pital doco	11000 11100	/C.I.O.II 11 0	(~)(-)(·)		оттоорна	10 Harri	ιο,
5	•		benefit of a college or u	niversity o	wned or or	nersted hy	/ a govern	mental uni	it describe	d in		
•		(b)(1)(A)(iv). (Compl		inversity of	wiled or of	Jerated D	a govern	menta un	ii describer	, III		
•			•	is alamanilaa.		470/LV	43/ 43/- 3					
6 L	-		ent or governmental uni						,			
ا لیکنا			ceives a substantial part	or its supp	ort from a	governme	ental unit d	or from the	general pi	ublic desc	oribed II	n
		(b)(1)(A)(vi). (Comple										
8	-		section 170(b)(1)(A)(vi).		•							
9 📖			eives: (1) more than 33									
			nctions - subject to certa	-	•	•				-		
			axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	inization af	iter June (30, 197	'5.
	See section	509(a)(2). (Complete	e the Part III.)									
10 📙	An organizat	ion organized and o	perated exclusively to te	st for publ	ic safety. S	See sectio	on 509(a)(4	4). (see ins	tructions)			
11 []	An organizat	ion organized and o	perated exclusively for the	he benefit (of, to perfo	orm the fu	nctions of	, or to carr	y out the p	ourposes o	of one o	or
	more publicly	y supported organiz	ations described in secti	ion 509(a)([.]	 or section 	on 509(a)(2	2). See se c	ction 509(a)(3). Chec	k the box	र that	
	describes the	e type of supporti <u>ng</u>	organization and compl	lete lines 1	1e through	11h.						
	a ∟l Type	I b∟	_ Type II d	с 🔛 Тур	e III - Func	tionally in	tegrated		d	Type III - (Other	
e	By checking	this box, I certify the	at the organization is not	t controlled	l directly o	r indirectly	y by one o	r more dis	qualified p	ersons ot	her tha	n
	foundation m	nanagers and other	than one or more publicly	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or se	ection 509	∂(a)(2).	
f	If the organiz	ation received a wri	tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check t	his box									
g	Since Augus	t 17, 2006, has the	organization accepted ar	ny gift or c	ontributior	from any	of the foll	owing per	sons?			
	(i) A perso	n who directly or inc	lirectly controls, either a	lone or tog	ether with	persons o	described	in (ii) and (iii) below,		Yes	No
	the gov	erning body of the s	upported organization?			-				11g(i)		
	(ii) A family	member of a perso	n described in (i) above?)						. 11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i)	or (ii) above	∋?					11g(iii)		
h			about the organizations				***************************************					
		· ·	Ü	J	,	•						
(i) Niame	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did yo	u notify the	(vi) ls	the	(vii) Ar	nount of	f
	anization	(11) E 114	organization	in col. (i) lis	sted in your	organizat	ion in col.	organizátio (i) organiz	on in col. I		nount of	
* 9			(described on lines 1-9 above or IRC section	governing (document?	(i) of you	r support?	U.S	?	004	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
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								1				
							ļ					
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		Control of the Contro					200	The second secon	A STATE OF THE STA			
*		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				22 (Tarrison) (15)		TO THE STATE OF TH	1000000 10000 10000 100000 10000 10000			

Schedule A (Form 990 or 990-EZ) 2008 SPIRIT OF AMERICA WORLDWIDE

20-1687786 Page 2

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 412,212. 993,994. 587,771. 1473384 3467361. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 - 3 412,212. 993,994. 587,771. 1473384. 3467361. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public Support. Subtract line 5 from line 4 3467361. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 993,994 412,212. 587,771 1473384. 3467361. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 2,725. 30,215 34,441 33,669. 101,050. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 599 assets (Explain in Part IV.) 1,500. 2,099. 3570510. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 97.11 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) % 14 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 % 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization \rightarrow X b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part L Section A. Public Support Calendar vear (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 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 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 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.) Section B. Total Support (a) 2004 (b) 2005 Calendar year (or fiscal year beginning in) (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here______ Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f) 17 % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

2008

SP	IRIT OF AMERICA WORLDWIDE	20-1687786
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or a Special Rule. See instructions.)	(10) organization can check boxes
General Rule		
For organizations fi contributor. Compl	iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mor ete Parts I and II.	ney or property) from any one
Special Rules		
509(a)(1)/170(b)(1)(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of (A)(vi), and received from any one contributor, during the year, a contribution of the grea 90, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and I	ter of (1) \$5,000 or (2) 2% of the
aggregate contribu	c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one itions or bequests of more than \$1,000 for use exclusively for religious, charitable, science revention of cruelty to children or animals. Complete Parts I, II, and III.	
some contributions \$1,000. (If this box etc., purpose. Do n	c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one of for use exclusively for religious, charitable, etc., purposes, but these contributions did is checked, enter here the total contributions that were received during the year for an not complete any of the parts unless the General Rule applies to this organization becall, etc., contributions of \$5,000 or more during the year.)	not aggregate to more than exclusively religious, charitable, use it received nonexclusively
they must answer "No" on F	t are not covered by the General Rule and/or the Special Rules do not file Schedule B (IPart IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990. These instructions will be issued separately.

Schedule B (Fo	orm 990, 990-EZ, or 990-PF) (2008)		Page Lof LofPartI
Name of org	ganization	Empl	oyer identification number
SPIRIT	r of america worldwide	2	0-1687786
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	· · · · · · · · · · · · · · · · · · ·	\$\$516,783.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
823452 12-18	3-08	Schedule B (Fori	n 990, 990-EZ, or 990-PF) (2008)

1 of Schedule B (Form 990, 990-EZ, or 990-PF) (2008) Name of organization Employer identification number SPIRIT OF AMERICA WORLDWIDE 20-1687786Part II Noncash Property (see instructions) (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I VARIOUS MEDICAL GOODS AND SUPPLIES 1 516,783. 12/31/08 (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I

Schedule D (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number 20-1687786

	SPIRIT OF AMERICA	WORLDWIDE	20-1687786
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 donor advi	ised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor	or donor advisor or other impermissible p	rivate benefit? Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an hi	istorically important land area
	Protection of natural habitat	Preservation of certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified con-	servation contribution in the form of a cor	nservation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements	•••••••••••••••••	2a
b	- '	••••••••••••	
C	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re-	eleased, extinguished, or terminated by th	ne organization during the taxable
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, violations, a	and
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and		······································
8	Does each conservation easement reported on line 2(d) about		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservat	•	
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	s the organization's accounting for
miz:	conservation easements.	A A . L I II	NI - O' - 'I- A I
Pal	till Organizations Maintaining Collections of	•	otner Similar Assets.
	Complete if the organization answered "Yes" to Form	1990, Part IV, line 8.	110.000
4-	If the appearing time should be as you that an also CEAC 44C as		
ıa	If the organization elected, as permitted under SFAS 116, no	· ·	
	treasures, or other similar assets held for public exhibition, e	•	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
D	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to
	these items:		. .
	(i) Revenues included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		ai gairi, provide
_	the following amounts required to be reported under SFAS 1	-	•
a	Revenues included in Form 990, Part VIII, line 1		
U	Assets included in Form 990, Part X		▼ ③

		OF AMERICA						8778		
Pai	tt III Organizations Maintaining C	Collections of A	rt, Historical Ti	reasures,	or Other	r Simila:	[.] Asse	ts (cont	inued,)
3	Using the organization's accession and other	r records, check any	y of the following th	at are a signif	icant use d	of its collec	ction ite	ms (che	ck all	
	that apply):									
а	Public exhibition	C	Loan or exc	change progr	ams					
b	Scholarly research	e	Other							
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how they further t	the organizati	on's exem	soarua ta	e in Pari	XIV.		
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m							Yes		No
Pai	Trust, Escrow and Custodia								9 or	
0.505.000	reported an amount on Form 990, Pa		complete ii orga.		3,0u .00		,,, i u.		0, 0.	
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for contribution	ns or other as	sets not in	ncluded				
	on Form 990, Part X?							Yes		No
ь	If "Yes," explain the arrangement in Part XIV				••••••] 163	_	140
	ii 100, Oxplain ale allangement iii are xiv	and complete the ic	moving table.					Amoun	+	
С	Beginning balance					10		Amoun	ι	
	Additions during the year									
_	Distributions during the year									
t O-	Ending balance	000 D-1V I'		· · · · · · · · · · · · · · · · · · ·		1f		T.,		т.,
	Did the organization include an amount on F		217		• • • • • • • • • • • • • • • • • • • •		🖳	Yes	Ĺ	No
	If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete			000 D-+IV	t 40					
raı	TV Endowment Funds. Complete						1			
	Section 1	(a) Current year	(b) Prior year	(c) Two year	rs back (d	i) Three yea	rs back	(e) Four	years	back
1a	Beginning of year balance							et lude		
b	Contributions		Property of the Control of the Contr				200000000000000000000000000000000000000			
C	Investment earnings or losses		The section of an absence of the section of the sec						des elections Exceptions	
d	Grants or scholarships								ridani e	ELECTION OF S
е	Other expenditures for facilities									
	and programs		The state of the s	pethylephiae day about			2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Personatum		
f	Administrative expenses		production of free for the first of the firs							Sanctudi George
g	End of year balance				A CONTROL OF THE CONT					
2	Provide the estimated percentage of the year	ır end balance held a	as:							
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С	Term endowment	%								
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	and administe	red for the	e organizat	tion			
	by:								Yes	No
	(i) unrelated organizations	·/-·						3a(i)	"	
								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Schedule R?					3b		
4	Describe in Part XIV the intended uses of the									
Pai	t VI Investments - Land, Building), Part X, line	10.					
	Description of investment	(a) Cost or o basis (investr	ther (b) Cos	t or other		oreciation		(d) Bool	k valu	e
	II		nent) Dasis	(other)		gaingeanna is an paireil are the	Z211.C			
	Land									
b	Buildings									
	Leasehold improvements			0 504		4 4 5 4				2.5
	Equipment		1	9,584.		14,04			<u>5,5</u>	<u>36.</u>
	Other			282.		28:	۷.			<u>U.</u>
Total	I. Add lines 1a-1e. (Column (d) should equal Fo	orm 990, Part X, colu	ımn (B), line 10(c).)				▶		5,5	36.

	MERICA WORLD		20-1687786 Page 3
Part VII Investments - Other Securities. Sec	e Form 990, Part X, line		
(a) Description of security or category (including name of security)	(b) Book value		thod of valuation: d-of-year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other	· · · · · · · · · · · · · · · · · · ·		
	· ·	- was	
			···

	·		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)		produced Color (Free Color)	
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line		
(a) Description of investment type	(b) Book value		thod of valuation:
		Cost or end	d-of-year market value
	•		
			 .
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)		The state of the s	
Part IX Other Assets. See Form 990, Part X, line	15. Description		(b) Book value
(a)	Description		(b) Book value
		·	
T-1-1 (0.1 (1) 1.1 15 000 B (1) (1/0) 1	451		
Total. (Column (b) should equal Form 990, Part X, col (B) lin Part X Other Liabilities. See Form 990, Part X,			·····
(a) Description of liability	inte 20.	(b) Amount	
Federal income taxes		The Andrew Control of Manager Co	an ing mangkat dina berdapat dina berdapat dina berdapat dina berdapat dina berdapat dina berdapat dina berdap Berdapat dina berdapat din
ACCRUED VACATION		5,965.	
CREDIT CARD PAYABLE		51,045.	
	***	200 (100 (100 (100 (100 (100 (100 (100 (
		ANY A Marin de Carlo A and An And And And And And And And And An	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
W. L. A		The state of the s	
		And the second s	
		MODEL Y STATE OF THE PROPERTY	
Total (Column (h) obeside a set Farm COC Bod V - 1/25"	0.05	57,010.	
Total. (Column (b) should equal Form 990, Part X, col (B) lin In Part XIV, provide the text of the footnote to the organiza			n's liability for uncertain toy positions

Sche	dule D (Form 990) 2008 SPIRIT OF AMERICA WORLDWID	E		20-	1687786	Page 4
Pai	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)		1		1,006,	380.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,228,	631.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				<222,	251.>
4	Net unrealized gains (losses) on investments					
5	Donated services and use of facilities					
6	Investment expenses					
7	Prior period adjustments				86,	298.
8	Other (Describe in Part XIV)					
9	Total adjustments (net). Add lines 4-8		9		86,	298.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		<135,	953.>
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With I	Revenue per F	?etur i		
1	Total revenue, gains, and other support per audited financial statements			1	1,006,	380.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments					
b	Donated services and use of facilities			20071730CC		
С	Recoveries of prior year grants					
d	Other (Describe in Part XIV)	2d				_
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	1,006,	380.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			200		
а	Investment expenses not included on Form 990, Part VIII, line 7b			1000 CARLOS CARL		
b	Other (Describe in Part XIV)	4b		1161611777		_
С	Add lines 4a and 4b			4c	1 000	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	1,006,	380.
2.41 1212	TXIII Reconciliation of Expenses per Audited Financial Statem			1 1		<u> </u>
1	Total expenses and losses per audited financial statements			1	1,228,	631.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
a	Donated services and use of facilities					
b	Prior year adjustments	2b		2202010/07/61/613		
C,	Losses reported on Form 990, Part IX, line 25			7 979 1797		
d	Other (Describe in Part XIV) Add lines 2a through 2d			0-		0
е 3	• • • • • • • • • • • • • • • • • • • •			2e	1,228,	631
4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:			3	1,220,	031+
*	Investment expenses not included on Form 990, Part VIII, line 7b	4a		research land		
h				- 12 Ind 27 1973		
	Other (Describe in Part XIV) Add lines 4a and 4b	40		4c		0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)			5	1,228,	
	TXIV Supplemental Information	***************************************		<u> </u>	1,220,	001.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	II, lines 1a an	d 4; Part IV, lines ²	b and	2b; Part V, line 4	4; Part

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

Inspection

Name of the organization					Employer identif	ication number
COTOTE OF AMEDI	CA DIODID				00 46000	
SPIRIT OF AMERI Part General Info			toide the United Ctates C		20-168778	
to Form 990, Par		cuvities Ou	tside the United States. Comp	lete if the organ	nization answered "	Yes-
		n maintain recor	ds to substantiate the amount of the g	rante or acciet	ance the	w.=u
			selection criteria used to award the gr			Yes X No
	3	,				.00 [
2 For grantmakers. Desc	ribe in Part IV th	e organization's	procedures for monitoring the use of	grant funds out	side the United Sta	ites.
			-	_		
3 Activities per Region. (L	lse Schedule F-1	(Form 990) if ac	dditional space is needed.)			
(a) Region	(b) Number of		(d) Activities conducted in region		vity listed in (d)	(f) Total
	offices in the region	employees or	(by type) (i.e., fundraising,		gram service,	expenditures
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Totals			an Ang magang kalang banggan ang kanang ka			874 000

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

Schedule F (Form 990) 2008

A Name of organization An in this file of the page	Part II Grants and Other recipient who rece Use Schedule F-1	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000, Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.	Grants and Other Assistance to Organizations or Entities recipient who received more than \$5,000, Check this box if I Use Schedule F-1 (Form 990) if additional space is needed.	Grants and Other Assistance to Organizations or Entitles Outside the United States. Complete if th recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.	omplete if the o than \$5,000	rganization answerec		, in the second	
0. M/A	f organizatior			(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)
National has provided a charities by the foreign country or for which the grantee or counsel has provided a Strickleby better 501(e)(s) equivalency better			SOUTH ASIA	TO PROVIDE SURGERY FOR TORTURED VICTIMS.	10,000.	снвск	0	//A	FAIR MARKET VALUE
Table number of organizations that are recognized as charilies by the foreign country or for which the grantee or coursel has provided a Soliciple advisions that are recognized to the grantee or course has provided a Soliciple advisions that are recognized to the grantee or course has provided a Soliciple advisions that are recognized as charilies by the foreign country or for which the grantee or course has provided a Soliciple advision to the grantee or course has provided a Soliciple advision to the grantee or course has provided a Soliciple advision to the grantee or course has provided a Soliciple advision to the grantee or course has provided a Soliciple advision to the grantee or course has provided a Soliciple advisor to the grantee or course has provided and the grantee or course has provided and the grantee									
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	stal number c 501(c)(3) equ	of organizations that are aivalency letter	e recognized as charitie	es by the foreign country or for	which the grant	ee or counsel has pro	wided a		

Page 3

Schedule F (Form 990) 2008 SPIRIT OF AMERICA WORLDWIDE 20-1687786

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. 20-1687786

Use Schedule F-1 (Form 990) if additional space is needed,

Use Schedule FT (FOTH 990) if additional space is needed.	Ji adolitoriai space is ne	(c) Number of	(d) Amount of	(e) Manner of	(f) Amount of	(g) Description of	(h) Method of
(a) I ype of grant or assistance	(a) Region	recipients cash grant	cash grant	cash disbursement	non-cash assistance	non cash assistance	valuation (book, FMV, appraisal, other)
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Schedule F (Form 990) 2008 SPIRIT OF AMERICA WORLDWIDE	20-1687786 Page 4
Part IV Supplemental Information	-12
Complete this part to provide the information required by Part I, line 2, and any other additional inform	iation.
PART I, LINE 3, COLUMN (E):	
REGION: SOUTH ASIA	
(E) SPECIFIC TYPES OF SERVICES IN REGION: THE ORGANIZATIO	N HAS DONATED
NECESSARY GOODS SUCH AS FARM TOOLS, WATER PURIFICATION EQ	UIPMENT,
CLOTHING, MEDICAL EQUIPMENT, SCHOOL AND SPORTS SUPPLIES A	ND TOYS TO NEEDY
PEOPLE.	
REGION: MIDDLE EAST AND NORTH AFRICA	
(E) SPECIFIC TYPES OF SERVICES IN REGION: THE ORGANIZATIO	N HAS DONATED
NECESSARY GOODS SUCH AS FARM TOOLS, WATER PURIFICATION EQ	UIPMENT,
CLOTHING, MEDICAL EQUIPMENT, SCHOOL AND SPORTS SUPPLIES A	ND TOYS TO NEEDY
PEOPLE.	
	-

SCHEDULE M (Form 990)

NonCash Contributions

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

2008 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Name of the organization

Employer identification number

SPIRIT OF AMERICA WORLDWIDE 20-1687786 Types of Property Part I (c) Check if Number of Revenues reported on Method of determining applicable contributions Form 990, Part VIII, line 1g revenues Art - Works of art Art - Historical treasures 2 3 Art - Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 8 Intellectual property Securities - Publicly traded 9 Securities - Closely held stock _____ 10 11 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution (historic structures) Qualified conservation contribution (other) 14 Real estate - Residential 15 16 Real estate - Commercial Real estate - Other 17 18 Collectibles _____ Food inventory 19 516,783.FAIR MARKET VALUE Drugs and medical supplies _____ X 100 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other > 26 Other 27 Other > 28 Other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? X 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II. If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) 2008

LHA

SCHEDULE O (Form 990)

Supplemental Information to Form 990

➤ 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.

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number SPIRIT OF AMERICA WORLDWIDE 20-1687786 PART VI, SECTION A, LINE 10: A CPA FIRM IS HIRED TO PREPARE THE FORM 990 AND THE FORM 990 IS FORWARDED TO THE GOVERNING BODY BEFORE THE RETURN IS FILED. FORM 990, PART VI, SECTION B, LINE 15: THE COMPANY PURCHASES STANDARD COMPENSATION SURVEYS AND HIRES AN INDEPENDENT CONSULTING FIRM TO PROVIDE INDUSTRY COMPENSATION INFORMATION. EMPLOYEE OFFER LETTERS ARE DRAFTED BASED ON STANDARD PRACTICES DETERMINED FROM THIS INFORMATION. FORM 990, PART VI, SECTION C, LINE 19: ALL PERTINENT DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE, AN INTERNET SEARCH, OR UPON REQUEST BY INTERESTED PARTIES.

FORM	990 PAGE 10						066							
Asset No.	ot Description	Date Acquired	Method	Life	C o c >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
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828111 04-25-08	80					(D) - Asset disposed	pasor		*	ITC, Salvage,	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	nercial Revital	lization Deduct	tion, GO Zone

2008 DEPRECIATION AND AMORTIZATION REPORT

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

 See separate instructions. ▶ Attach to your tax return. OMB No. 1545-0172

990

Sequence No. 67

Name(s) shown on return Business or activity to which this form relates SPIRIT OF AMERICA WORLDWIDE FORM 990 PAGE 10 20-1687786 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000. 1 Maximum amount. See the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed in service (see instructions) 2 800,000. 3 Threshold cost of section 179 property before reduction in limitation 3 4 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, see instructions (a) Description of property 6 (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 R 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 858. 14 Special depreciation for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 2,058. 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery period (business/investment use only - see instructions) (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction 3-year property 19a 858. 5 YRS. HY 200DB 172. ь 5-year property 7-year property d 10-year property 15-year property f 20-year property 25-year property 25 yrs. S/I g 27.5 yrs. MM S/L h Residential rental property 27.5 vrs. MM S/L MM S/L 39 yrs. i Nonresidential real property ММ Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year S/I 12 yrs. 40-year S/L С 40 yrs. MM Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 3,088. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form 4562 (2008)

SPIRIT OF AMERICA WORLDWIDE

20-1687786 Page 2

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A all of Section B, and Section C if applicable

	ıgh (c) of Section A, ali								-					
Section A - Depre	eciation and Other In	formation (Ca	aution: 5	See the i	nstructi	ons for li	mits fo	r passeng	er autom	obiles.))			
24a Do you have ev	vidence to support the bu	siness/investm	ent use cl	aimed?	Y	es _	No	24b If "Y	es," is th	e evide	nce writt	ten?	_ Yes _	No
(a) Type of prope (list vehicles fi	erty (b) Date placed in service	(c) Business/ investment use percenta		(d) Cost or her basis	l /bu	(e) sis for depre siness/inve use only	stment	(f) Recovery period	Meti Conve	hod/	Depre	h) ciation action	Ele sectio	(i) cted on 179 ost
25 Special depre	ciation allowance for c	ualified listed	property	/ placed	in servi	ce during	g the t	ax year an	d	T			118821888 CB	i carololo
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27 Property used	150% or less in a qual	fied business	use:		<u> </u>			L	!				<u> </u>	
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28 Add amounts	in column (h), lines 25	L	- 1	e and on	line 21	nane 1		t	<u> </u>	28	 			
	in column (i), line 26. E										1.	29	HARMANA	
29 Add amounts	ir column (i), in le 20. L		Section I									_ 29	<u> </u>	
hose vehicles.	hicles to your employe	es, ilist alisw		a)	E	b)	See II y	(c)	(d			ng this : e)	Section 1	
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34 Was the vehic	de available for person	al use	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
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than 5% own	er or related person?													
	nicle available for perso	**												
	Section C	- Questions	for Empl	oyers W	/ho Pro	vide Vel	nicles	for Use b	y Their E	mploye	ees		·	
Answer these que owners or related	estions to determine if y	you meet an e	exception	to com	pleting :	Section I	B for v	ehicles us	ed by en	ployee	s who aı	re not m	nore than	5%
37 Do you mainta employees?	ain a written policy stat	•						•	nmuting,	by you	r		Yes	No
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Part VI Amor														
	(a) Description of costs	Date	(b) amortization begins		(c) Amortizat amount	ple		(d) Code section		(e) Amortiza eriod or per	tion		(f) mortization or this year	
42 Amortization of	of costs that begins du	ring your 200		i <u> </u>				32011011		anda or per	evilleg5		. uno year	
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43 Amortization o	of costs that began be	fore your 200s	•	r			1				43			
	nounts in column (f). Se										44			

Form 8	868 (Rev. 4-2009)				Page 2
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and ch	eck this box	۲		<u> </u>
Note.	Only complete Part II if you have already been granted an automatic 3-month extension on a previ				
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
Part	Additional (Not Automatic) 3-Month Extension of Time. Only file the ori	ginal (no co	pies n	eeded).	
Туре	Name of Exempt Organization		Emplo	yer iden	tification number
print	SPIRIT OF AMERICA WORLDWIDE		20	-168	7786
File by the extended due date	Number, street, and room or suite no. If a P.O. box, see instructions.		For IR	S use on	ly
filing the return. S instruction	ee City, town or post office, state, and ZIP code. For a foreign address, see instructions.		A segue a segu	A SA AND A S	
Check	type of return to be filed (File a separate application for each return):				
X	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 10 Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4		= ' '	m 5227 m 6069	Form 8870
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on	a previous	ly filed	Form 8	368.
Tele	SPIRIT OF AMERICA WORLDWIDE books are in the care of ▶ 12021 WILSHIRE BLVD. SUITE 507 - I sphone No. ▶ 310-230-5476 FAX No. ▶				
• If th	ne organization does not have an office or place of business in the United States, check this box				▶ □
• If th	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this	is for	the whole	group, check this
box 🕨		EINs of all n	nembe	rs the ex	tension is for.
	request an additional 3-month extension of time until NOVEMBER 15, 2009.				
		t ending			
	If this tax year is for less than 12 months, check reason: Initial return Final ret	turn	C	hange in	accounting period
	State in detail why you need the extension ADDITIONAL TIME IS NECESSARY TO PREPARE A COMPLET	רוזא גי יבו	7.00	URAT	
	TAX RETURN	E AND	ACC	LANU	<u>E</u>
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less an	v I	T		
	nonrefundable credits. See instructions.	,	8a	\$	
b i	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estim	ated			MH
1	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	3			
_	previously with Form 8868.		8b	\$	
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, de	, ,			
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See ins	structions.	8c	\$	N/A
	Signature and Verification				
Under p	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statement e, correct, and complete, and that I am authorized to prepare this form.	s, and to the	best of	my knowle	dge and belief,
Signatu	re ► Title ► CHIEF EXECUTIVE OFFI	CER	Date	<u> </u>	
		<u></u>		For	m 8868 (Rev. 4-2009)

2008 DEPRECIATION AND AMORTIZATION REPORT

— CURRENT YEAR FEDERAL —

SPIRIT OF AMERICA WORLDWIDE

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

828102 04-25-08

- NEXT YEAR FEDERAL -

2009 DEPRECIATION AND AMORTIZATION REPORT

SPIRIT OF AMERICA WORLDWIDE

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SPIRIT OF AMERICA FEIN: 20-1687786

STATEMENT A

Mission and Objectives

Spirit of America's mission is to help Americans serving abroad assist local people in need. We respond to requests from American military and civilian personnel in Iraq, Afghanistan and the Horn of Africa for items that will help local people.

Our objectives are to:

- Increase the reach, scale and impact of the informal humanitarian activities that take place on the front lines in troubled regions.
- Contribute charitable goods that can have a positive, practical and timely impact in the local communities where American persoane! are involved.
- Establish connections and strengthen bonds between the American people and those in countries struggling for freedom and democracy.

Some of our supporters see Spirit of America as a way to support our troops by helping them be safer and more successful with their mission. Others see us as a way to help people who have suffered from repression, terrorism and war. And others see Spirit of America as a way to help advance freedom and peace. We are all of those things.

What We Do

Spirit of America helps American military and civilian personnel serving in Afghanistan, Africa and Iraq. We fulfill requests from American personnel for goods that improve the lives of local people. This improves relations and helps save lives.

We have provided school and medical supplies, sewing machines, hand tools, watches, water barrels, farming tools, clothing, sporting goods and toys in response to needs identified by American personnel.

Through Spirit of America every American can make a difference in the world's most troubled regions.

Program Accomplishments

Since it's inception in 2003, Spirit of America has spent over \$12,000,000 in cash contributions and donated goods. These gifts were used to further pursue and fulfill our mission to extend the goodwill of Americans by assisting those serving abroad assist local people in need in Afghanistan, Iraq and Africa.

In Afghanistan in 2008, we spent over \$678,000 on the following program services:

Tons of donated medical equipment and supplies, farm tools, first aid kits, camelback hydration systems and ballistic sunglasses, over 3,000 backpacks filled with school supplies, hygiene kits, sports equipment including soccer balls and 800 soccer uniforms, traditional Afghan clothing, winter coats and boots, crutches and wheelchairs, baby bottles and formula, toys and more.

In Iraq in 2008, we spent over \$180,000 on the following program services:

Water purification units, camping equipment for Scouts, medic trauma kits, children's clothing and shoes, blankets, hygiene kits, wheelchairs, sewing supplies, cookware, art supplies, backpacks filled with school supplies, basketballs, jump ropes, board games and more.

In Africa in 2008, we spent over \$16,000 on the following program services:

Solar lanterns, hundreds of hygiene kits, over 300 backpacks filled with school supplies, soccer balls, toys and more.