



Crowe Horwath LLP
Member Horwath International

Instructions for filing
COTA - Children's Organ Transplant
Association
Form 990T - Exempt Organization Business Return
for the period ended June 30, 2008

Signature...

The original return should be signed (using full name and title) and dated on page 2 by an authorized officer of the organization.

Filing...

The signed return should be filed on or before November 17, 2008 with...

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

Overpayment of tax...

The return shows an overpayment of \$4,203. of which \$4,203. should be refunded to you and \$NONE has been applied to your 2008 Estimated Tax.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

For calendar year 2007 or other tax year beginning ending 07/01, 2007, and 06/30, 2008 See separate instructions.

A Check box if address changed

Name of organization (Check box if name changed and see instructions.)

D Employer identification number

COTA - CHILDREN'S ORGAN TRANSPLANT ASSOCIATION

35-1674365

B Exempt under section

Print or Type

Number, street, and room or suite no. If a P.O. box, see page 9 of instructions.

E Unrelated business activity codes

X 501(C)(3) 408(e) 220(e) 408A 530(a) 529(a)

2501 COTA DRIVE

City or town, state, and ZIP code

523000

C Book value of all assets at end of year

BLOOMINGTON, IN 47403

F Group exemption number (See instructions for Block F on page 9.)

22,590,645.

G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. PASSIVE INVESTMENT INCOME

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No X

J The books are in care of LISA FULKERSON Telephone number 812-336-8872

Part I Unrelated Trade or Business Income

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows 1-13 detailing income and expenses, ending with Total of -15,488.

Part II Deductions Not Taken Elsewhere (See page 12 of the instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: Line number, Description, Amount, Net. Rows 14-34 detailing deductions, ending with Unrelated business taxable income of -20,334.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation on page 15. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) _____ (2) _____ (3) _____ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) _____ (2) Additional 3% tax (not more than \$100,000) _____ c Income tax on the amount on line 34 _____ 35c	
36 Trusts Taxable at Trust Rates. See instructions for tax computation on page 16. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) _____ 36	
37 Proxy tax. See page 16 of the instructions _____ 37	
38 Alternative minimum tax _____ 38	
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies. _____ 39	

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) _____ 40a		
b Other credits (see page 17 of the instructions) _____ 40b		
c General business credit. Check here and indicate which forms are attached: <input type="checkbox"/> Form 3800 <input type="checkbox"/> Form(s) (specify) _____ 40c		
d Credit for prior year minimum tax (attach Form 8801 or 8827) _____ 40d		
e Total credits. Add lines 40a through 40d _____ 40e		
41 Subtract line 40e from line 39 _____ 41		
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) _____ 42		
43 Total tax. Add lines 41 and 42 _____ 43		
44a Payments: A 2006 overpayment credited to 2007 _____ 44a 1,158.		
b 2007 estimated tax payments _____ 44b 3,045.		
c Tax deposited with Form 8868 _____ 44c		
d Foreign organizations: Tax paid or withheld at source (see instructions) _____ 44d		
e Backup withholding (see instructions) _____ 44e		
f Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total 44f		
45 Total payments. Add lines 44a through 44f _____ 45 4,203.		
46 Estimated tax penalty (see page 4 of the instructions). Check if Form 2220 is attached <input type="checkbox"/> _____ 46		
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed _____ 47 NONE		
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid _____ 48 4,203.		
49 Enter the amount of line 48 you want: Credited to 2008 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> _____ 49 4,203.		

Part V Statements Regarding Certain Activities and Other Information (see instructions on page 18)

1 At any time during the 2007 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1. If YES, enter the name of the foreign country here _____	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see page 5 of the instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> \$ _____		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

1 Inventory at beginning of year _____ 1	6 Inventory at end of year _____ 6
2 Purchases _____ 2	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2, _____ 7
3 Cost of labor _____ 3	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4a Additional section 263A costs (attach schedule) _____ 4a	
b Other costs (attach schedule) _____ 4b	
5 Total. Add lines 1 through 4b _____ 5	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer _____ Date _____ Title _____
May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer's Use Only
Preparer's signature: *Steven Abenue* Date: 11/03/08
Firm's name (or yours if self-employed), address, and ZIP code: CROWE HORWATH LLP, 3815 RIVER CROSSING PKWY, SUITE 300, INDIANAPOLIS, IN 46240-0977
Check if self-employed Preparer's SSN or PTIN: 700756195
EIN: 35-0921680 Phone no. 317-569-8989

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions on page 20)

1 Description of property

Table with 4 rows for property description (1-4).

2 Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3 Deductions directly connected with the income.

Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).

Total deductions. Enter here and on page 1, Part I, line 6, column (B).

Schedule E - Unrelated Debt-Financed Income (see instructions on page 20)

Table with 5 columns: 1 Description of debt-financed property, 2 Gross income, 3 Deductions, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions.

Totals

Total dividends-received deductions included in column 8

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 21)

Table for Exempt Controlled Organizations with 6 columns: 1 Name of Controlled Organization, 2 Employer Identification Number, 3 Net unrelated income, 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5.

Nonexempt Controlled Organizations

Table for Nonexempt Controlled Organizations with 5 columns: 7 Taxable income, 8 Net unrelated income, 9 Total of specified payments made, 10 Part of column 9 that is included in the controlling organization's gross income, 11 Deductions directly connected with income in column 10.

Totals

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions on page 22)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions on page 22)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals ▶		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.

Schedule J - Advertising Income (see instructions on page 22)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1)						
(2)						
(3)						
(4)						
(5) Totals from Part I						
Totals, Part II (lines 1-5), . . . ▶	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 23)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
			%
			%
			%
			%

Total. Enter here and on page 1, Part II, line 14 ▶

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS
=====

AMREIT MONTHLY INC & GROWTH FUND III, LTD	497.
AMREIT MONTHLY INCOME & GROWTH FUND, LTD	1,555.
AMREIT MONTHLY INC & GROWTH FUND IV, LTD	-165.
NNN 2003 VALUE FUND, LLC	-17,375.

INCOME (LOSS) FROM PARTNERSHIPS	-15,488.
	=====

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

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INVESTMENT FEES RELATED TO REITS

3,141.

PART II - LINE 28 - OTHER DEDUCTIONS

3,141.
=====

FORM 990-T, PART II

NET OPERATING LOSS CARRYFORWARD

<u>GENERATED</u>	<u>AMOUNT</u>	<u>EXPIRES</u>	<u>UTILIZED</u>	<u>EXPIRED</u>	<u>REMAINING</u>
6/30/2008	(20,334)	6/30/2028	-	-	(20,334)
REMAINING NOL	<u>\$ (20,334)</u>				<u>\$ (20,334)</u>