### Forms 990 / 990-EZ Return Summary

For calendar year 2008, or tax year beginning

, and ending

52-1343924

### Government Accountability Project

Net Asset / Fund Balance at Beginn	ing of Year			346,593
Revenue				
Contributions	2,4	70,660		
Program service revenue	6	90,925		
Investment income		7,848		
Capital gain / loss				
Special events:				
Gross revenue				
Direct expenses				
Net income				
Other income		446		
Total revenue		3	<u>,169,879</u>	
Expenses				
Program services	2,0	61,297		
Management and general		81,675		
Fundraising	4	47,053	E00 00E	
Total expenses			<u>,590,025</u>	570 054
Excess / (deficit)				579,854
Reconciliation of Re Total revenue per financial statements	evenue 3,169,879	Total expenses p	Reconciliation of Expe	926,447 nses 2,590,025
Less:	· · · · · · · · · · · · · · · · · · ·	Less:	_	
Unrealized gains		Donated ser	vices _	
Donated services		Prior year ad	justments _	
Recoveries		Losses	-	
Other		Other	· -	
Plus:		Plus:		
Investment expenses		Investment e	expenses	
Other	3,169,879	Other	-	2,590,025
Total revenue per return	3,109,019	iotaiex	penses per return	2,330,023
Assets	Beginning 487,011	Balance Sheet Ending 1,118,776	Differences	
Liabilities	140,418	192,329 926,447	579,854	Ì
Net assets	346,593	926,447	319,634	<u> </u>
	Miscellaneous Inf	ormation		
	Amended return	0/17/05		
	Return / extended due date Failure to file penalty	8/17/09		

Form 8879-EO

#### IRS e-file Signature Authorization for an Exempt Organization

and ending	. 20	

52-1343924

OMB No. 1545-1878

2008

Department of the Treasury Internal Revenue Service Name of exempt organization For calendar year 2008, or fiscal year beginning ......, 2008, a Do not send to the IRS. Keep for your records.

▶ See instructions. Employer identification number

Government Accountability Project Name and title of officer

Mark Cohen

Executive Director

Part I	Type of Return and Return Information (Whole Dollars Only)
Charletha ha	of an the datum for which was are using this Form 9970 FO and enter the applicable amount from

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount from the return if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I

1a	Form 990 check here X b Total revenue, if any (Form 990, line 12)	1b	3,169,879
	Form 990-EZ check here  Total revenue, if any (Form 990-EZ, line 9)	2b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	

#### Part II **Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2008 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the paymental have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X	_ to enter my PIN	81228 as my signature
ERO firm name		Enter five numbers, but do not enter all zeros
on the organization's tax year 2008 electronically filed return. If I have indicated within this is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State progaforementioned ERO to enter my PIN on the return's disclosure consent screen.		
As an officer of the organization, I will enter my PIN as my signature on the organization's filed return. If I have indicated within this return that a copy of the return is being filed with charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure.	a state agency(ies) re	
Officer's signature > Mark l	Date <b>▶</b>	9/11/09
Part III Certification and Authentication		

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

52412512345

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2008 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

RO's signature	•		Date	•	
. Coo oignaturo	,				

ERO Must Retain This Form—See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2008)

# CGAPREY 0944/2009 12:13 PM Form

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047 2008 Open to Public Inspection

Α	For the 20	08 calendar ye	ar, or tax year beginning , and ending				
В	Check if applica	<sub>able:</sub> Please		D Emplo	yer identification number		
	Address chang	use IRS					
$\equiv$	_	label or	52-	·1343924			
$\sqsubseteq$	Name change	print or type.	Room/suite	E Teleph	one number		
	Initial return	See	1100		2-408-0034		
$\bar{\Box}$	Termination	Specific	1612 K Street, N.W.		1100		
님	remination	Instruc-	City or town, state or country, and ZIP + 4			G Gross rece	ipts \$ 3,109,675
	Amended retu	-	Washington DC 20006				
	Application per	nding F Name	e and address of principal officer:			H(a) Is this	a group return for
	., .	MA.	RK COHEN			affiliate	
		16	12 K STREET, N.W.			H(b) Are all include	
		WA	SHINGTON DC 20006			If "No,"	'attach a list. (see instructions)
_	Tax-exempt		501(c) ( <b>3</b> ) <b>4</b> (insert no.) 4947(a)(1) or 527				
<u> </u>			whistleblower.org			H(c) Group	exemption number
		7.7		1. 7	ear of formation: 1	204	M State of legal domicile: DC
	Type of organi			<u>    L                                 </u>	ear of formation:	<del>70                                    </del>	Wi State of regal conflictie.
	art I	Summai					
	1 Brie	efly describe th	ne organization's mission or most significant activities:				
4	I	The Gove	rnment Accountability Project (GAP) is a 3	31-yea	r-old nor	profit	<b>,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ĕ	l r	oublic in	nterest group that promotes government and	corpo	rate acco	ountabi	lity
Governance	h	oy advano	cing occupational free speech, defending wh	nistle	blowers,	and	
Š			if the organization discontinued its operations or disposed of more				
ගී	į.					3	6
ంర	1	-				· ·	0
Activities	ì	-	endent voting members of the governing body (Part VI, line 1b)				19
Ĭ	E		employees (Part V, line 2a)	<i></i>		·	0
Act	6 Tota	al number of v	olunteers (estimate if necessary)	<i></i>			
-	7a Tota	al gross unrela	ated business revenue from Part VIII, line 12, column (C)			. 7a	
	b Net	unrelated bus	7b	0			
					Y Prior Yes		Current Year
4	8 Cor	ntributions and		8,913	2,470,660		
Revenue	9 Pro	gram service	<b>31</b>	0,754	690,925		
Ş.	1		revenue (Part VIII, line 2g) ne (Part VIII, column (A), lines 3, 4, and 7d)		- 100	1,134	7,848
æ	1		art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1:	2,817	446
		-	dd lines 8 through 11 (must equal Part VIII, column (A), line 12)			3,618	3,169,879
	4				-/ -/		
	l .		ar amounts paid (Part IX, column (A), lines 1-3)	· · · · · -  -			
	1	-	or for members (Part IX, column (A), line 4)		1 20	1 001	1 540 522
Ś	15 Sala	aries, other co	Impensation, employee benefits (Part IX, column (A), lines 5–10)  Iraising fees (Part IX, column (A), line 11e)  expenses (Part IX, column (D), line 25)  447,053			1,821	1,548,522
Expenses	16a Pro	fessional fund	Iraising fees (Part IX, column (A), line 11e)		12.	3,646	168,643
Бe	<b>b</b> Tota	al fundraising	expenses (Part IX, column (D), line 25)  447,053	3 [			
ŭ	17 Oth	er expenses (	Part IX, column (A), lines 11a-11d, 11f-24f)			9,455	872,860
	l .		Add lines 13-17 (must equal Part IX, column (A), line 25)	· · · · · · ·	2,34	4,922	2,590,025
			penses. Subtract line 18 from line 12	· · · · · ·		8,696	579,854
<u> </u>		vertue tess exp	Senses, Subtract line to from line 12		Beginning o		End of Year
Net Assets or	20 ⊤⇔	al assets (Par	t X, line 16)	ŀ		7,011	1,118,776
Asse Bals	20 100			· · · · · · · · · · · · · · · ·		0,418	192,329
et/	<b>21</b> Tota	ai liabilities (Pi	art X, line 26)	· · · · · · -		6,593	926,447
			d balances. Subtract line 21 from line 20		J4	0,000	J. U / 331
_P	art II	Signatu					
		Under penal	ties of perjury, I declare that I have examined this return, including accompanying sche	edules and	d statements, and	to the best o	f my knowledge
		and belief, it	is true, correct, and complete Declaration of preparer (other than officer) is based on a	an imorma	mon or willon prepa	י פוום במוון למיש ו	
Sig	าก		Muk a			- 1	14/05
He		Signatu	re of officer			Date	
			rk Cohen Ex	xecu	tive Dir	ector	,
		1 -	print name and title				
		, iype oi	· · · · · · · · · · · · · · · · · · ·		Cha-li	:6	Preparer's identifying number
Pa	id	Preparer's		Date	Check self-	"	(see instructions)
		signature	7	9/14	1/09 employ	ed ▶ L	P00176056
	eparer's	Firm's name	Coates & Hutchinson, P.C.			EIN	▶ 52-1639708
US	e Only	if self-employ				Phone	-
		address, and				no.	410-672-6339
Max	the IRS d	liscuss this rol	turn with the preparer shown above? (see instructions)				
IVICI	, alo ii to u		propers of entrance (000 monacono),,,,,,,,,,,,,,,,,				Transport Control

Part III Statement	of Program Service Accom	plishments (see instruc	ctions)		
1 Briefly describe the organized The Governmen public intere		Project (GAP) notes governmen	is a 31-year- t and corpora	te accoun	tability
the prior Form 990 or 99	ertake any significant program service 0-EZ? new services on Schedule O.	s during the year which were r		.,,	Yes X No
3 Did the organization ceaservices?	se conducting, or make significant cha				Yes X No
Section 501(c)(3) and 50	changes on Schedule O. cose achievements for each of the org 1(c)(4) organizations and section 494 total expenses, and revenue, if any, fo	7(a)(1) trusts are required to r	eport the amount of grants	and	
Corporate Acc Challenging to o GAP Project Piltz was on cited in the interviewed of o In the Febr interviewed for administratio	enses \$ 603,126 ountability Progra he Oil/Coal Indust Climate Science W ABC World News Ton New York Times, AF n CBS 60 Minutes a uary 2009 issue of or a 20,000-word h n, featuring centr key moments in the	am: Try Disinformat  Natch's (CSW) D  Light, ABC News  P, USA Today; a  Lind PBS Frontli  Vanity Fair,  Listory of the  Lal people with	ion Effort: irector Rick Now; was nd ne. Piltz was Bush first-hand		
Taking place delegations i application o use of third-training prom systems, ethi protection po	enses \$ 218,198 Program:  in Paris, France, n the underlying of f rights protection party alternative oted best practice cs offices and whilicies. GAP   s train	GAP trained st concepts and pr on and promotio dispute mechan es in internal stleblower/wit ning was incor	actical n through the isms. This justice ness porated into	<b>3</b>	95,417
Servants Ass	cil of the Federat ociations (FISCA)	- a federated	group of 29		
Homeland Secu	,				
Federal Air M flights th budget pressu		en of of all lo egeted on 9/11	ed the  ordering of  ng-distance  due to	Ē.	
o GAP Homelan the following	d Security clients : a major telecomm	s have also hel nunications car	ped expose rier giving a	<b>a</b>	
4d Other program services.			) (Revenue \$	340,828	1
(Expenses \$ 4e Total program service	919,888 including grants ceexpenses ► \$ 2,061	, <b>297</b> (Must equal Part IX		3-30,020	/

#### Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A ..... X Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete X Schedule C, Part II 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 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete X Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," X complete Schedule D, Part IV X Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 11 X 11 Parts VI, VIII, VIII, IX, or X as applicable Did the organization receive an audited financial statement for the year for which it is completing this return X 12 that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X Did the organization maintain an office, employees, or agents outside of the U.S.? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X Did the organization report on Part IX, column (A), line 3; more than \$5,000 of grants or assistance to any 15 X 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 19 $\overline{\mathbf{x}}$ 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X 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 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete X 23 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 Х 24b-24d and complete Schedule K. If "No," go to question 25. **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified Х 25b person from a prior year? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Х 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or X substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

<u> </u>	art IV Checklist of Required Schedules (continued)		Yes	No
8	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 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
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			Ì
•	Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
•	W. D.C. T. C. C. T. C.	34		X
5	III, IV, and V, line 1 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		X
6	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		X
7	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			l
	VI	37		X
	VI	Forn	990	(200

1a Enter the number reported in Box 3 of Form 1996, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable in the 1a Enter -0- if not applicable in the 1b Enter the number of Forms V2-2 included in line 1a. Enter -0- if not applicable garning (gambing) without price winners?  2a Enter the number of Genes V2-2 included in line 1a. Enter -0- if not applicable garning (gambing) withing to price winners?  2a Enter the number of enter v2-2 included in line 1a. Enter -0- if not applicable garning (gambing) withing to price winners?  2b If a least one is reported on line 2a, did the organization for which the year covered by this return.  3b If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return.  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return.  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return;  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return;  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return;  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return;  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return;  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return.  3c If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return.  3c If the organization are of the foreign country (such as a bank account, securities account or other financial account).  3c If the organization are of the foreign country (such as a bank account, securities account or other financial account).  3c If the instructions of the organization that it was	Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			Yes	No
U.S., Information Returns. Enter o-1 Find applicable  Differ the number of Forms W-25 included in line 1s, Enter o-1 Find applicable  Differ the number of Forms W-25 included in line 1s, Enter o-1 Find applicable  Differ the number of Forms W-25 included in line 1s, Enter o-1 Find applicable  Jamilio (gandhill) withing its prize withers?  In a find a find the catendary year ending with or within they year cowered by this return.  Jamilio (gandhill) withing its prize withers?  Jamilio (gandhill) withing its prize withing within they year cowered by the return of lines 1s and 2s is greater tran 250, you may be required for effect their including?  Note. If the sum of lines 1s and 2s is greater tran 250, you may be required for effect their including?  Jamilio (gandhill) withing its prize of the prize of the prize of the state of the state of lines 1s and 2s is greater tran 250, you may be required to effect this return. (see instructions)  Jamilio (gandhill) withing its prize of the state of the form 900-T for this year? If 'No,' provide an expandion in Schedule O.  Jamilio (gandhill) withing its prize of the state of the foreign country is over a financial account in a foreign country is count as a bank account, securities account, or other financial account in a foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (gandhill) withing its prize of the same of the foreign country.  Jamilio (ga		Estable surplies sended in Pay 2 of Form 1006, Applied Common and Transmittal of	i i		162	110
b Enter the number of Forms W-23 included in line 1a. Enter 4- if not applicable  Did the organization corrolly with backup withholding rules for reportable payments to vendors and reportable gaming (participal) withing so type withholding rules for reportable payments to vendors and reportable gaming (participal) withing so type withholding rules for reportable payments to vendors and reportable gaming (participal) withing so type with order or reportable payments to vendors and reportable  B of the complex payments of enterpoymen specified on Form W-3. Interestinated Wages and Tax Statements, Rule of the calescents year ending with or required federal employment tax esturns?  B of the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  B of the specific payments of the payment in the specific payments of the payments of	1a		1a   12			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gurining (gamiling) winnings to prize witners?  Seleziennits, filed for the calendar year ending with or within the year covered by this return  Seleziennits, filed for the calendar year ending with or within the year covered by this return  Note, if the sum of lines is a port of a fine from V-3, Transmittal of Wage and Tax  Seleziennits, filed for the calendar year ending with or within the year covered by the file of the calendar specific or the selection of the selection of the interval of dead and unprovingent tax returns?  Note, if the sum of lines is and 2a is greater han 250, you may be required to elide this return. (see instructions)  15. Vises has it filed a Form 90-T for they year? If No? provide an explanation in Schedule O  16. They has it filed a Form 90-T for they year? If No? provide an explanation in Schedule O  17. A remark the during the calendar year, did the organization have an interest, in or a signature or other authority cover, a financial account in a foreign country (such as a bank account, securities account, or other financial account?  18. A remark the name of the foreign country (such as a bank account, securities account, or other financial and financial Accounts.  18. Was the organization and prequirements for Form 10 F 90:22.1, Report of Foreign Bank and Financial Accounts.  18. Was the organization and prequirements for Form 10 F 90:22.1, Report of Foreign Bank and Financial Accounts.  18. Was the organization and prequirements for Form 10 F 90:22.1, Report of Foreign Bank and Financial Accounts.  18. Was the organization and prequirements for Form 8886-T. Disclosure by Tax-Exempt Entity Report of Provising Accounts and Provising Accounts.  18. Vises, 10 question Sao of St. did the organization include with overy solicitation an excress statement that such contributions or great with the provision of provision include with overy solicitation and exercises and provision o				1		
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If all least one is reported on line 22, did the organization file all required federal employment tax returns?   20   X	<b>4</b> a		2a 19			
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	b			2b	X	
an instructions)  a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If 'Yes,' has it field a Form 990-T for this year? If 'No,' provide an explanation in Schedule 0  At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts).  See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization a party to a prohibited tax shelter transaction?  5b Was the organization as of 5b, did the organization file Form 888-T, Discosure by Tax-Exempt Entity Reporting Prohibited Tax Shelter Transaction?  5c If 'Yes,' to question 5a or 5b, did the organization file Form 888-T, Discosure by Tax-Exempt Entity Reporting Prohibited Tax Shelter Transaction?  5c If 'Yes,' did the organization solicit any contributions that were not tax deductible?  7c Organizations that many receive deductible contributions under section 170(pt).  8d Did the organization provide goods or services in exchange for any quite property for which it was required to life Form 3222?  8d If 'Yes,' did the organization notify the donor of the value of the goods or services provided?  7d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 3222?  8d If 'Yes,' did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 3222?  9d If 'Yes,' did the organization of the year, pay premiums, directly or indirectly, on a parsonal benefit contract?  7d X Y Y Section 501(c)(3) and other sponsoring organiza	~					
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6a Did the organization solicit any contributions that were not tax deductible?  b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).  a Did the organization provide goods or services in exchange for any quid pro quo contribution of mote than \$\frac{7}{8}\$?  To b if "Yes," did the organization notify the donor of the value of the goods or services provided?  To Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  To Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  To Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  To Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  To Contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  To contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  2 Did the organization make any taxable distributions under section 4966?  9 Did the organization make any taxable distributions under section 4966?  9 Did the organization have any taxable d	С			5c		
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	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	Es-	, gar	(2009)

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

	required by the internal Revenue Code.)			
Sec	tion A. Governing Body and Management		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.	1		
	Enter the number of voting members of the governing body			
1a	Enter the number of voting members that are independent  1b 0	1		
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
2		2		X
•	any other officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct			
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
4	Did the organization make any significant changes to its organizational decamental decaments and product the product of the organization become aware during the year of a material diversion of the organization's assets?	5		X
5	Does the organization have members or stockholders?	6		X
6	Does the organization have members, stockholders, or other persons who may elect one or more members			
7a	40 1 5-40	7a		X
<b>h</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
b	Did the organization contemporaneously document the meetings held or written actions undertaken during			
8				
_	the year by the following: The governing body?	8a	X	
a	The governing body?  Each committee with authority to act on behalf of the governing body?	8b	X	
b	Does the organization have local chapters, branches, or affiliates?	9a		X
9a	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
40	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
10	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
4.4	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
11	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	11		X
Sec	tion B. Policies			
000			Yes	No
1 <b>2</b> a	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	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	i	ŀ	
•			1	
13	describe in Schedule O how this is done	12c	х	
	describe in Schedule O how this is done  Does the organization have a written whistleblower policy?	12c	х	х
	Does the organization have a written whistleblower policy?		х	X
14	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	13	х	X
14	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	13		X
14	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:	13	x	X
14	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?	13		X
14 15 a	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?	13 14 15a	x	X
14 15 a	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)	13 14 15a	x	<u>x</u>
14 15 a b	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	13 14 15a	x	X
14 15 a b	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?	13 14 15a 15b	x	<u>x</u>
14 15 a b	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	13 14 15a 15b	x	<u>x</u>
14 15 a b	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	13 14 15a 15b	x	<u>x</u>
14 15 a b	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?	13 14 15a 15b	x	<u>x</u>
14 15 a b	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?  Etion C. Disclosure  AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, IL	13 14 15a 15b	x	<u>x</u>
14 15 a b	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?  Etion C. Disclosure	13 14 15a 15b	x	<u>x</u>
14 15 a b 16a b	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?  Etion C. Disclosure  AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, IL	13 14 15a 15b	x	<u>x</u>
14 15 a b 16a b	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?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website  Another's website  X Upon request	13 14 15a 15b	x	<u>x</u>
14 15 a b 16a b	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?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,IL, Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.	13 14 15a 15b	x	<u>x</u>
14 15 a b 16a b	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?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,IL Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website  Another's website  Veryon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.	13 14 15a 15b	x	<u>x</u>
14 15 a b 16a b	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?  Extion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, IL Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website 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, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the	13 14 15a 15b	x	<u>x</u>
14 15 a b 16a b Sec 17 18	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?  Etion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the possesses in the programment of the person who possesses the books and records of the possesses in the possesses the books and records of the possesses in the possesses the books and records of the possesses the policy.	13 14 15a 15b	XXX	x

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

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

- 1a Complete this table for all persons required to be listed. 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 or	ganization did not compens	ate a	ny o	fficer	, dire	ector,	trus	tee, or key employee.		
(A) Name and Title	<b>(B)</b> Average hours per	<u></u>		check		nat ap		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	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
Mark Cohen Exec Dir	40	x						89,285	0	0
Louis Clark President	40	x						87,368	0	0
Joanna Gualt Treasurer	1 (	x		x	1				<u>\</u> / 0	. 0
Robyn Y. Nis Board Member	1	x		1000	¥ 8		- Sa	0	0	0
Christina Ma Board Member	1	x						0	0	0
Mary Brumder Board Chair	1	х		х				0	0	0
Richard Foss Board Member Mark Niles	1	x						0	0	0
Board Member Rick Salzman	1	х						0	0	0
Board Member Betsy Taylor	1	x						0	0	0
Board Member Karen Gray	1	x				<u> </u>		0	0	0
Secretary	1	x		x				0	0	0
					_					
			_							
					_					
							· · · · · · · · · · · · · · · · · · ·			
		<u> </u>	L							000

(A) Name and title	(B) Average			() check	C) all th	nat ap	ply)	(D) Reportable	(E) Reportable	1	(F) Estimate		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	co o a	other other mpensa from the rganization ganization ganization ganization ganization district from the	tíon e ion ed	
• • • • • • • • • • • • • • • • • • • •	Same ,												
												· • • • • • • • • • • • • • • • • • • •	
												·	
		à	77	Ženo.	ì		Į,	Can	\ <i>J</i>				
	****	Ž	İ	No.	7		1s		J				
							<u> </u>	176,653	<u> </u>				
<ul><li>Total number of indivorganization ► 0</li></ul>	viduals (including those in 1a	a) wh	o red	ceive	d mo	ore th	nan \$	6100,000 in reportable comp	pensation from the				
3 Did the organization	list any former officer, direc	tor o	r trus	stee.	kev	empl	ovee	e, or highest compensated		Γ			No
employee on line 1a3 4 For any individual list	? If "Yes," complete Schedu ted on line 1a, is the sum of	le J f repo	or su rtabl	ıch ir e cor	ndivid mper	dual . nsatio	 on ar	d other compensation from			3	-	X
individual								complete Schedule J for suc	ch		4		X
5 Did any person listed services rendered to	on line 1a receive or accruding the organization? If "Yes," of	e cor comp	nper lete	nsatio Sche	on fro edule	om ai J fo	ny ur r suc	nrelated organization for h person			5		X
Section B. Independent	Contractors												
Complete this table for compensation from the complete this table for compensation from the compensation from the complete this table for compensation from the compensatio	ne organization.	sate	d ind	epen	ident	con	tracto	ors that received more than				(C)	
	(A) Name and business address				200		<u> </u>		(B) tion of services		Com	(C) pensation	1
Hudson Bay <b>Anoka</b>	MN	5	53		200	6 .		Avenue N Consult & Expe	en			125,	461
							<u> </u>						
								1.00					
2 Total number of inde	pendent contractors (includ	ina th	1056	in 1)	who	) rece	ejved	I more than \$100,000 in					
compensation from the		ng u	.000		*****	, , , , , (					1	000	
DAA											Form	990 (2	(800!

Pa	rt VI	II Statement of Revenue					(D)
				(A) Total revenue	(B) Related or	(C) Unrelated	Revenue
					exempt function	business	excluded from tax under sections
					revenue	revenue	512, 513, or 514
(0, (0)	1a	Federated campaigns 1a					
Program Service Revenue   Contributions, gifts, grants and other similar amounts	h	Membership dues 1b			ĺ		
go		Fundraising events 1c					
fts,							
<u>.gʻs</u>	a						
siris	е	Government grants (contributions) 1e					
iğ jəl	f	All other contributions, gifts, grants,	70 660				
흔힘			70,660				
달	g	Noncash contributions included in lines 1a-1f: \$	51,631	0 470 660			
O B	h	Total. Add lines 1a-1f	<u></u>	2,470,660			
g.			Busn. Code		600 005		
Ven	2a	Attorney Fees		690,925	690,925		
Re	b						
<u>3</u>	С						
ē	d						
ηS	•						
gra		All other program service revenue					
õ	'		<b></b>	690,925			
_	9	Total. Add lines 2a–2f		<b>0-0</b> /			
	3	Investment income (including dividends, interest		7,848			7,848
		other similar amounts)		7,040			
	4	Income from investment of tax-exempt bond prod	ceeds -				
	5	Royalties					
		(i) Real (ii) P	ersonal				
	6a	Gross Rents					
	b	Less: rental exps.					
	С	Rental inc. or (loss)	1		30 10 X X 1		
	d	Net rental income or (loss)			(11111		
		Gross amount from (i) Securities (ii)	Other		NJ NJ 7		
		sales of assets		]	.3		
	۱ ,	other than inventory Less: cost or other					
	ט						
		basis & sales exps.		1			
		Gain or (loss)	<b>•</b>				
	ı	Net gain or (loss)					
	8a	Gross income from fundraising events					
enne	İ	(not including \$					
ven		of contributions reported on line 1c).					
Re		See Part IV, line 18		į.			
Other Rev		Less: direct expenses b	······································				
₹	С	Net income or (loss) from fundraising events	<u></u>			1	
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a		j			
	l b	Less: direct expenses b	-				
		Net income or (loss) from gaming activities	, <b>&gt;</b>				
	1	Gross sales of inventory, less					
	'0"	returns and allowances a					
				1			
	1	Less: cost of goods sold b  Net income or (loss) from sales of inventory	>	1			
	<b>⊢</b> •		Busn. Code				
	<u></u>	Miscellaneous Revenue	Susii. Code	446	446		
	11a	Reimbursed Expenses		440	7.30		
	b	. ,					
	С		ļ				
	1	All other revenue					
		Total. Add lines 11a–11d		446			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d	d, 8c,			_	7 040
		9c, 10c, and 11e	<u> </u>	3,169,879	691,371	C	7,848

### 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).

	All other organizations must			(C)	(D)
Do	not include amounts reported on lines 6b,	(A) Total expenses	( <b>B)</b> Program service	Management and	Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	176,653	136,703	29,950	10,000
	trustees, and key employees	176,633	130,703	23,330	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1,056,257	1,000,190	12,975	43,092
7	Other salaries and wages	1,036,237	1,000,190	12,7,5	/
8	Pension plan contributions (include section 401(k)	25,846	23,067	1.605	1,174
	and section 403(b) employer contributions)	211,053	191,829	1,605 10,379	1,174 8,845
9	Other employee benefits	78,713	70,680	4,015	4,018
10	Payroll taxes	10,113	70,000		
11	Fees for services (non-employees):				
а	Management	58,813	54,369	3,560	884
b	Legal	14,797	13,044	1,181	572
С	Accounting	14,131	13,044		
d	Lobbying	168,643			168,643
е	Professional fundraising services. See Part IV, line 17	100,043			
f	Investment management fees	* 17373		7 / -	
g	Other	3,832	3,462	251	119
12	Advertising and promotion	35,621	34,707	484	430
13	Office expenses	33,022	<u> </u>		
14	Information technology				
15	Royalties	142,513	129,550	7,420	5,543
16	Occupancy	54,867	52,639	927	5,543 1,301
17	Travel	31,001			
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials  Conferences, conventions, and meetings				
19		511	484	14	13
20	Interest				
21 22	Payments to affiliates  Depreciation, depletion, and amortization	12,969	12,969		
23	•	7,068	6,160		538
23	Insurance				
24	Other expenses. Itemize expenses not				
24	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	Direct mail production	194,782			194,782
b	Professional Fees	193,969	189,705		2,243
c	Printing & Newsletter	51,561	46,974		1,436
d	Contributions	35,000	35,000		
e	Telephone	23,433	20,622		1,471 1,949
f	All other expenses	43,124	39,143		1,949
25	Total functional expenses. Add lines 1 through 24f	2,590,025	2,061,297	81,675	447,053
26	Joint Costs. Check here ▶ if following				
	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				200
					Form <b>990</b> (2008)

<u> Pa</u>	art X	Balance Sheet						
				(A) Beginning of year		( <b>B</b> ) End of		
_				30,940				085
	1	Cash—non-interest bearing			1			727
	2	Savings and temporary cash investments		381,784	2			
	3	Pledges and grants receivable, net		10.015	_3			000
	4	Accounts receivable, net		13,815	4		29,	026
	5	Receivables from current and former officers, directors, trustees, key						
		employees, or other related parties. Complete Part II of Schedule L			5			
	6	Receivables from other disqualified persons (as defined under section						
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete						
		Part II of Schedule L			6			
S	7	Notes and loans receivable, net			7			
šet	8	Inventories for sale or use		1,908	8		1,	862
Assets	9	Prepaid expenses and deferred charges		21,986	9		20,	515
1	l .	Land, buildings, and equipment: cost basis 10a	108,270					
		Less: accumulated depreciation. Complete						
			81,992	26,530	10c		26.	278
				762	11			588
	11	Investments—publicly traded securities			12			
	12	Investments—other securities. See Part IV, line 11			13			
	13	Investments—program-related. See Part IV, line 11	•		14			
	14	Intangible assets		9,286			5	695
	15	Other assets. See Part IV, line 11				1,1		
	16	Total assets. Add lines 1 through 15 (must equal line 34)		487,011	16			
	17	Accounts payable and accrued expenses		94,557	17	<u>.</u>	50,	617
	18	Grants payable			18			
	19	Deferred revenue			19			
	20	Tax-exempt bond liabilities			20			~_~
ies	21	Escrow account liability. Complete Part IV of Schedule D		20,361	21		<u>16,</u>	212
Liabilities	22	Payables to current and former officers, directors, trustees, key						
ab		employees, highest compensated employees, and disqualified	1 , ( )	( ) \/			<b>~</b> -	
Ξ		persons. Complete Part II of Schedule L		√ 25,500	22		25,	<u>500</u>
	23	Secured mortgages and notes payable to unrelated third parties		1 37	23			
	24	Unsecured notes and loans payable			24			
	25	Other liabilities. Complete Part X of Schedule D			25			
	26	Total liabilities. Add lines 17 through 25		140,418	26	<u> </u>	92,	329
S		Organizations that follow SFAS 117, check here 🕨 🗴 and						
alances		complete lines 27 through 29, and lines 33 and 34.				_		
a	27	Unrestricted net assets		17,734				<u>740</u>
Ва	28	Temporarily restricted net assets		328,859	28		<u>10,</u>	707
ğ	29	Permanently restricted net assets	Į.		29			
Fund		Organizations that do not follow SFAS 117, check here						
or F		and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund			31			
SS	32	Retained earnings, endowment, accumulated income, or other funds	1		32			
it A	33	Total net assets or fund balances	1	346,593	33	9	26,	447
Net	34	Total liabilities and net assets/fund balances		487,011	34	1,1	18,	776
	art X							
						ş	Yes	No
1	Acc	counting method used to prepare the Form 990: 🔲 Cash 🔀 A	ccrual 🗌 Oth	ner				l
<b>2</b> a		ere the organization's financial statements compiled or reviewed by an indep				1	<u> </u>	X
b		ere the organization's financial statements audited by an independent accou				<u>2b</u>	ļ	X
c		Yes" to lines 2a or 2b, does the organization have a committee that assume						
		e audit, review, or compilation of its financial statements and selection of an				2c		₩
3a		a result of a federal award, was the organization required to undergo an au						
							-	₩
b	lf"	Yes," did the organization undergo the required audit or audits?				3b	<u>L</u>	

#### SCHEDULE A

(Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 52-1343924 Government Accountability Project Reason for Public Charity Status (All organizations must complete this part.) (see instructions) Part I The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public X described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III–Functionally Integrated d Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one of more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes Nο (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports. h (vii) Amount of (iv) Is the organization (v) Did you notify (vi) Is the (ii) EIN (iii) Type of organization (i) Name of supported the organization in organization in col. (described on lines 1-9) in col. (i) listed in your organization (i) organized in the col. (i) of your above or IRC section governing document? (see instructions)) support? U.S.? Yes No Yes Yes No No

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)						2,595,713
6	Public support. Subtract line 5 from line 4						7,900,456
Sec	tion B. Total Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1,861,267	2,328,099	1,687,230	2,148,913	2,470,660	10,496,169
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	376	4,012	533	1,134	7,848	13,903
9	Net income from unrelated business activities, whether or not the business is regularly carried on		a				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	7,647	14,022	580	12,817	446	35,512
11	Total support. Add lines 7 through 10			.4			10,545,584
12	Gross receipts from related activities, etc. (s	ee instructions)				12	1,655,462
13	First five years. If the Form 990 is for the o	rganization's first, s	second, third, fourth	n, or fifth tax year as	s a section 501(c)(3	)	ļ
	organization, check this box and stop here						<u>,</u>
Sec	tion C. Computation of Public Su	pport Percenta	age				
14	Public support percentage for 2008 (line 6, o	column (f) divided b	y line 11, column (	f))			74.9172 %
15	Public support percentage from 2007 Scheo	lule A, Part IV-A, lir	ne 26f			15	71.6587 %
1 <b>6</b> a	33 1/3 % support test—2008. If the organiz	ation did not check	the box on line 13,	and line 14 is 33 1	/3 % or more, check	this box	F==
	and stop here. The organization qualifies as						▶ <u>X</u>
b	33 1/3 % support test-2007. If the organiz	ation did not check	a box on line 13 or	16a, and line 15 is	33 1/3 % or more, of	check this	
	box and stop here. The organization qualified	s as a publicly sup	ported organization				▶ ∟
17a	10%-facts-and-circumstances test—2008	. If the organization	did not check a bo	x on line 13, 16a, o	r 16b, and line 14 is	10% or	
	more, and if the organization meets the "fact	ts-and-circumstanc	es" test, check this	box and stop here	. Explain in Part IV I	now the	
	organization meets the "facts-and-circumsta	nces" test. The org	anization qualifies a	as a publicly suppor	ted organization		▶ ∟
b	10%-facts-and-circumstances test—2007					15 is 10% or	
	more, and if the organization meets the "faci						
	organization meets the "facts-and-circumsta	nces" test. The org	anization qualifies	as a publicly suppor	rted organization		▶ ∟
18	Private foundation. If the organization did r	ot check a box on	line 13, 16a, 16b, 1	7a, or 17b, check t	nis box and see inst	ructions	▶ ∟
					<del></del>	Schedule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2008 Support Schedule for Organizations Described in Section 509(a)(2) Part III

	(Complete only if you che	cked the box o	n line 9 of Par	t I.)			
	tion A. Public Support					1	(O.T. ( )
Cal	lendar year (or fiscal year beginning in) ▶	(a) 2004	( <b>b</b> ) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						. 10.0-1
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organizations 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						
8	Public support (Subtract line 7c from						
J	line 6.)						
Sec	tion B. Total Support			/ N	X-, -1 -7		
Ca	lendar year (or fiscal year beginning in) 🕨 🦼	(a) 2004	(b) 2005	(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.)						
13	Total support. (Add lines 9, 10c, 11,						
14	and 12.)  First five years. If the Form 990 is for the	organization's first,	L second, third, four	th, or fifth tax year a	ls a section 501(c)	(3)	
	organization, check this box and stop here	<u>, 22</u>					
Sec	tion C. Computation of Public Su			(0)		TAFT	0/
15	Public support percentage for 2008 (line 8,					1 1	<u>%</u>
16	Public support percentage from 2007 Sche						%
Sec	tion D. Computation of Investme					17	0/
17	Investment income percentage for 2008 (lin					····	<u>%</u> %
18	Investment income percentage from 2007 S	schedule A, Part IV	-A, line 2/h		oro than 23 1/2 9/		76
19a	33 1/3 % support tests—2008. If the organ	nization did not ched	ck the box on line 1	14, and line 15 is mo	ore man 33 1/3 %,	anu iine ation	▶ □
	17 is not more than 33 1/3 %, check this bo 33 1/3 % support tests—2007. If the organ	ex and stop here.	ne organization qu	or line 10a and line	aupported organiza	33 1/3%, and	
þ	33 1/3 % support tests—2007. If the organ line 18 is not more than 33 1/3 %, check this	is how and aton bor	or a box on line 14	n qualifies as a nuh	licly supported orga	anization	▶ [
20	Private foundation. If the organization did						

Schedule A (F	orm 990 or 99	90-EZ) 2008	Gover	nment 1	Account	abilit	<u>y Proje</u>	ct !	52-134392	4	Page 4
Part IV	Supplen	nental Inf	ormation.	Complete t	his part to	provide th	e explanati	on require	d by Part II, li n. (see instru	ne 10; ctions)	
Part I			Other								
Expens	e Reim	oursem	ent		<b>\$</b>		25,042	,			
Rental	Income	<b>9</b>			<b>\$</b>		10,470				
							. , , , , , , , , , , , , , , ,				
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<i></i>			
								. , . , . ,			
,											
							, . , . , . ,				
		,,									
									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No. 1545-0047

Name of the organization

Employer identification number

52-1343924

Government 2	Accountability Project	52-1343924							
Organization type (check									
Filers of:	Section:								
Form 990 or 990-EZ	<b>X</b> 501(c)( <b>3</b> ) (enter number) organization								
	4947(a)(1) nonexempt charitable trust <b>not</b> 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								
Check if your organization organization can check bo	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . ( <b>Note</b> . Only a section 501(c)(7), (8), or (10 exes for both the General Rule and a Special Rule. See instructions.)	))							
	filing Form 990, 990-EZ/ or 990-PF that received, during the year, \$5,000 or more (in money or yone contributor. Complete Parts I and II.	זר							
Special Rules	4 39								
under sections 50	(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the r 09(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990- s I and II.	of the							
during the year, a	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one congregate contributions or bequests of more than \$1,000 for use exclusively for religious, charit or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I,	table,							
during the year, so not aggregate to the year for an exapplies to this org	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one come contributions for use exclusively for religious, charitable, etc., purposes, but these contributions that were received to the standard religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>Gene</b> ganization because it received nonexclusively religious, charitable, etc., contributions of \$5,000.	outions did during eral Rule or more							
990-EZ, or 990-PF), but t	nat are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form hey <b>must</b> answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (F	their							

Page 1 of 2 of Part I Schedule B (Form 990, 990-EZ, or 990-PF) (2008) Employer identification number Name of organization 52-1343924 Government Accountability Project Part I Contributors (see instructions) (d) (a) (c) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. X Carnegie Foundation Person 1.... 437 Madison Ave Payroll \$ 75,000 Noncash New York NY 10022 (Complete Part II if there is a noncash contribution.) (d) (b) (c) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. 2... Ford Foundation Person 320 East 43rd Ave Payroll 175,000 Noncash NY 10017 New York (Complete Part II if there is a noncash contribution.) (c) (d) (b) (a) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. Zodiac Fund X 3... Person Payroll 211 McClees Road 205,000 Noncash 07701 Red Bank (Complete Part II if there is a noncash contribution.) (d) (b) (a) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. 4.... Bullit Foundation Person 1212 Minor Avenue Payroll 60,000 Noncash Seattle WA 98101 (Complete Part II if there is a noncash contribution.) (d) (c) (a) (b) Type of contribution Name, address, and ZIP + 4 Aggregate contributions No. 5... Fund for Constitutional Government Person Payroll 122 Maryland Ave NE 52,250 Noncash Washington DC 20002 (Complete Part II if there is a noncash contribution.) (d) (a) (c) Type of contribution Name, address, and ZIP + 4 Aggregate contributions No.

NY 10019

Person

Payroli

Noncash

(Complete Part II if there is a noncash contribution.)

250,000

6...

Open Society Institute

400 West 59th Street

New York

## Name of organization

Government Accountability Project

Employer identification number 52-1343924

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	Schwab Charitable Fund 101 Montgomery Street San Francisco CA 94104	\$ 205,000	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
8	New York Community Trust 909 Third Avenue 22nd Floor New York City NY 10022	\$ 75,000	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
9	T. Rowe Price Program PO Box 17115  Baltimore MD 21297	\$ 205,000	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
	Name, autress, and Zii · · ·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Aggregate contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4	\$	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.)

SCHEDULE C (Form 990 or 990-EZ)

#### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

#### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization  Government Accountab	oility Project		Employer identific	24				
Part I-A To be completed by all organization See the instructions for Schedule C for	s exempt under section	501(c) and sec	tion 527 organiza	itions.				
Provide a description of the organization's direct and indirect.		Part IV.						
2 Political expenditures			▶\$					
3 Volunteer hours								
Part I-B To be completed by all organization See the instructions for Schedule C for		501(c)(3).						
1 Enter the amount of any excise tax incurred by the organi								
2 Enter the amount of any excise tax incurred by organization	on managers under section 4955 <sub>.</sub>		<b>▶</b> \$					
3 If the organization incurred a section 4955 tax, did it file F	form 4720 for this year?			Yes No				
4a Was a correction made?				Yes No				
b If "Yes," describe in Part IV.								
Part I-C To be completed by all organization See the instructions for Schedule C for	ns exempt under section or details.	501(c), except	section 501(c)(3)					
1 Enter the amount directly expended by the filing organizatio		3 2						
activities			<b></b>					
2 Enter the amount of the filing organization's funds contribute	ed to other organizations for section	on						
527 exempt function activities								
3 Total of direct and indirect exempt function expenditures. Ad	dd lines 1 and 2 and enter here an	d						
				,,				
4 Did the filing organization file Form 1120-POL for this year?	?			Yes No				
5 State the names, addresses and employer identification nur								
were made. Enter the amount paid and indicate if the amou								
contributions received and promptly and directly delivered to			segregated fund					
or a political action committee (PAC). If additional space is	needed, provide information in Par	t IV.						
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political				
	7		filing organization's funds. If none, enter -0	contributions received and promptly and directly				
			runus. Il none, enter o .	delivered to a separate				
				political organization. If				
				none, enter -0-				

Sch	edule C (Form 990 or 990-EZ) 2008 Go	vernment Accountability Pro	oject	52-134392	4 Page 2
Р	art II-A To be completed by or	ganizations exempt under section 501(c)	)(3) that filed	Form 5768	
	(election under section	501(h)). See the instructions for Schedule	e C for details	3.	
<u>,                                     </u>	Check ▶ if the filing organizat	on belongs to an affiliated group.			
3	Check ▶ ☐ if the filing organizat	ion checked box A and "limited control" pro	rovisions app	ly	
	Limits on Lo (The term "expenditures"	obying Expenditures means amounts paid or incurred.)	,	) Filing ation's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence put	olic opinion (grass roots lobbying)			
k	Total lobbying expenditures to influence a le	gislative body (direct lobbying)		10,555	
c	Total lobbying expenditures (add lines 1a ar	nd 1b)		10,555	
c	Other exempt purpose expenditures		1 2	,579,470	
e		es 1c and 1d)		,590,025	
	f Lobbying nontaxable amount. Enter the amo				
	columns.	•		279,501	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	İ		
	Not over \$500,000	20% of the amount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.			
	Over \$17,000,000	\$1,000,000.			
	Grassroots nontaxable amount (enter 25%	of line 1f)		69,875	
ł	Subtract line 1g from line 1a. Enter -0- if line	e g is more than line a		0	
	i Subtract line 1f from line 1c. Enter -0- if line			0	
	j If there is an amount other than zero on eith	er line 1h or line 1i, did the organization file Form 4720	reporting		
					Yes No
		4-Year Averaging Period Under Section	n 501(h)		

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

		_obbying Expenditur	es During 4-Year	r Averaging Perio	d	
	Calendar year (or fiscal year beginning in)	(a) 2005	( <b>b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) Total
2a	Lobbying non-taxable amount	242,584	241,935	267,246	279,501	1,031,266
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,546,899
С	Total lobbying expenditures	86,278	53,592	2,200	10,555	152,625
d	Grassroots non-taxable amount	60,646	60,484	66,812	69,875	257,817
е	Grassroots ceiling amount (150% of line 2d, column (e))					386,726
f	Grassroots lobbying expenditures		8,692			8,692

Schedule C (Form 990 or 990-EZ) 2008

Page 3

Pa	rt II-B To be completed by organizations exempt under section 501(c)(3) that have N	IOT f	iled I	-orm			
	5768 (election under section 501(h)). See the instructions for Schedule C for de	taiis.	<u> </u>	Γ	(b)	· · · · · · · · · · · · · · · · · · ·	
		- (			(~)		
		Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or	1					
	referendum, through the use of:						
а	Volunteers?	-	-	ł			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>		ł			
С	Media advertisements?	<u> </u>	<u> </u>	<del>                                     </del>			
	Mailings to members, legislators, or the public?						
	Publications, or published or broadcast statements?		_				
f	Grants to other organizations for lobbying purposes?		<u> </u>	<del>                                     </del>			•
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?						
	Other activities? If "Yes," describe in Part IV		<u> </u>				
	Total lines 1c through 1i  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
	If "Yes," enter the amount of any tax incurred under section 4912			1			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
	If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?		1				
	urt III-A To be completed by all organizations exempt under section 501(c)(4), section	501(	c)(5)	, or			
Г	section 501(c)(6). See the instructions for Schedule C for details.	`	. , , ,				
	Section of No. Coo the metactions of Serious Serious					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			<u> </u>	3	<u> </u>	
	ort III-B To be completed by all organizations exempt under section 501(c)(4), section	า 501(	(c)(5)	, or			
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR	if Par	t III-/	۹,			
	question 3 is answered "Yes." See Schedule C instructions for details.		T				<del></del>
1	Dues, assessments and similar amounts from members		1	<del> </del>			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of						
	political expenses for which the section 527(f) tax was paid).		١.				
	Current year		2a	₩			
b	Carryover from last year		2b	<del> </del>			
С	Total		2c	╁	u		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<i>.</i>	3	-			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		4				
	and political expenditure next year?		5	-			
5_	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)						
	art IV Supplemental Information  Delete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line	1i.					
		•••					
Aiso,	complete this part for any additional information.						

Schadula C (Ed	orm 990 or 990-EZ) 2008	Government	Accountability	Project	52-1343924	Page 4
Part IV	Supplemental Info	ormation (continue	ed)			
		,				
,						
						,
,						
,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		731!	ent C		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		1 7 1 1 6				
				`JJ		
						, , , , , , , , , , , , , , , , , , , ,

#### 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.

OMB No. 1545-0047
2008
Open to Public

Name of the organization

Inspection
Employer identification number

G	overnment Accountability Project					5	2-1	3439	24	
	irt I Organizations Maintaining Donor Advised Fun the organization answered "Yes" to Form 990, Pa	nds o	or Otl	ner Simila e 6.	ar Funds o					
	3.0 0.33	T		a) Donor advis	ed funds		(b)	Funds a	nd other a	ccounts
1	Total number at end of year		<u></u>	-						
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	e asse	ets hel	d in donor a	dvised				-	
	funds are the organization's property, subject to the organization's exclusive							L	Yes	∐ No
6	Did the organization inform all grantees, donors, and donor advisors in wri									
	used only for charitable purposes and not for the benefit of the donor or do							_	_	
	impermissible private benefit?		<u></u>	<u> </u>			<u>.</u> .	,. <u>.</u>	Yes	No
Pa	Int II Conservation Easements. Complete if the organ	nizat	tion a	nswered	"Yes" to F	orm 99	0, Pa	<u>ırt IV,</u>	line 7.	
1	Purpose(s) of conservation easements held by the organization (check all	that a								
	Preservation of land for public use (e.g., recreation or pleasure)	-			an historicall			area		
	Protection of natural habitat	L	Pre	eservation o	certified hist	oric struct	ture			
	Preservation of open space			, -			•			
2	Complete lines 2a–2d if the organization held a qualified conservation cont	ntributio	ion in t	ne form of a	conservation	easemen	ΙŢ			
	on the last da <b>y</b> of the tax year.							المام ا	at the En	d of the Year
	The state of the s						2a	пени	at the En	u oi tile Teal
a	Total number of conservation easements						2b			
b	Total acreage restricted by conservation easements  Number of conservation easements on a certified historic structure include	ed in (	(2)	<b></b>			2c			
C C	Number of conservation easements on a certified historic structure included Number of conservation easements included in (c) acquired after 8/17/06	eq III (	(a)/	, ()	7777		2d			
d 3	Number of conservation easements modified, transferred, released, exting				the organiza	 ation durin		·		
J	the taxable year	90.00	Ju, J. 1				3			
4	Number of states where property subject to conservation easement is loca	ated	•							
5	Does the organization have a written policy regarding the periodic monitori		nspecti	on, violations	 s, and					
•	enforcement of the conservation easements it holds?							[	Yes	☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing e								_	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easi				▶ \$_				***	
8	Does each conservation easement reported on line 2(d) above satisfy the	requir	remen	ts of section				_	_	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?							L	Yes	∐ No
9	In Part XIV, describe how the organization reports conservation easements									
	balance sheet, and include, if applicable, the text of the footnote to the org	ganizal	ation's	financial stat	ements that o	describes				
	the organization's accounting for conservation easements.									-M
Pa	organizations Maintaining Collections of Art, H	Histo	orica	Treasur	es, or Oth	ier Simi	iiar A	ssets	•	
	Complete if the organization answered "Yes" to I	1 0111	11 330	, raitiv,	iii le o.			·		····
	If the organization elected, as permitted under SFAS 116, not to report in it	ita ra	ionii -	statamast ==	d balanca ch	oot works	of			
та	art, historical treasures, or other similar assets held for public exhibition, e									
	provide, in Part XIV, the text of the footnote to its financial statements that				Tar in ordinoo .	or public o		1		
	provide, if if art XIV, the text of the footbole to its illiandal statements that	( 40501		nood nomo.						
b	If the organization elected, as permitted under SFAS 116, to report in its re	evenu	ue state	ement and b	alance sheet	works of a	art,			
	historical treasures, or other similar assets held for public exhibition, educa-									
	provide the following amounts relating to these items:				•					
	(i) Revenues included in Form 990, Part VIII, line 1						>	· \$ _		
	(ii) Assets included in Form 990, Part X						▶	\$		
2	If the organization received or held works of art, historical treasures, or oth	her sin	milar a	ssets for fina	ıncial gain, pr	ovide the				
	following amounts required to be reported under SFAS 116 relating to the									
а	Revenues included in Form 990, Part VIII, line 1						▶	· \$_		
b	Assets included in Form 990, Part X						<b>&gt;</b>	• \$		

basis (other)

108,270

(investment)

Schedule D (Form 990) 2008

81,992

1a Land

**b** Buildings ..... c Leasehold improvements d Equipment

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

		overnment Accour			52-1343924	Page 3
Part VII		-Other Securities. See Fo	orm 990, F	Part X, line 12.		
		n of security or category g name of security)		(b) Book value	1	od of valuation: of-year market value
Financial deriv	atives and other finan	icial products				
Other	<b>1</b>					
	. <u> </u>					
	·					
Total. (Columi	n (b) should equal Fo	rm 990, Part X, col. (B) line 12.)	<b>&gt;</b>			
Part VIII		<b>-Program Related</b> . See F	<u>orm 990,</u>			
	(a) Descript	tion of investment type		(b) Book value	1	nod of valuation:
					Cost or end-	of-year market value
	// \	000 B-4 V 1 BV 12 )				
Part IX	Other Assets	rm 990, Part X, col. (B) line 13.) See Form 990, Part X, lir	. ► I	1 7 7 7	* <u> </u>	
Partix	Other Assets.		cription		<del>-                                    </del>	(b) Book value
		1,4, 200	STIPRIOTI 4			
Total. (Column	n (b) should equal Fo	rm 990, Part X, col. (B) line 15.)				<b>&gt;</b>
Part X	Other Liabiliti	es. See Form 990, Part X	, line 25.			
	(a) Des	scription of liability		(b) Amount		
Federal income	e taxes					
					_	
					_	
				Andrew Print	_	
					_	
Total. (Colum	n (b) should equal Fo	rm 990, Part X, col. (B) line 25.)	<b>&gt;</b>			
In Part VIV pr	ovide the text of the fo	ootnote to the organization's finance	cial statemen	ts that reports the organi	zation's liability for	

uncertain tax positions under FIN 48.

\_funds. \_ If checks\_are\_needed\_to\_cover\_expeneses, checks\_are\_cut\_from\_this\_\_\_ \_account\_and\_the\_related\_trust\_liability\_account\_is\_also\_reduced\_to\_track\_\_\_

Schedule D (Form 990) 2008

Schedule D (Fr	orm 990) 2008	Government	Accountability	Project	52-1343924	Page 5
Part XIV	Supplemen	tal Information (co	ntinued)			
1 4117111	Сорр					
					<del></del>	
			dient	√ _ `-/ => ÷/ =		
				1 , ( ) (	) \/	
				+ -		
				- 195	1 may	
				=		
			=			
	<b>_</b>					
· <del>_</del>						

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

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer @Yes@ to Form 990, Part IV, lines 17, Department of the Treasury 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

4-1-1-1

Employer identification number 52-1343924

Government Account	ability Pi	0]	ect		32-134394	4-3
Part I Fundraising Activities. Complete i	f the organization	n an	swei	ed "Yes" to Form	990, Part IV, line 1	7.
Indicate whether the organization raised funds through at	ny of the following act	ivities	. Che	ck all that apply.		
▼				rnment grants		
	f Solicitation					
••						
c X Phone solicitations	g Special fund	Iraisin	g eve	nts		
d In-person solicitations						
2a Did the organization have a written or oral agreement wit or key employees listed in Form 990, Part VII) or entity in	h any individual (inclu connection with prof	iding ( essio	officer nal fui	rs, directors, trustees ndraising services?		X Yes No
b If "Yes," list the ten highest paid individuals or entities (fu to be compensated at least \$5,000 by the organization. F	ndraisers) pursuant t orm 990-EZ filers are	o agre	equire	nts under which the fund ed to complete this table	draiser is	
(i) Name of individual	(ii) Activity	(iii) Did raiser		(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
or entity (fundraiser) Hudson's Bay fee was \$6,381,		custo	dy or	from activity	(or retained by) fundraiser listed in	(or retained by) organization
The balance paid to them were for reimburse	ment of expense	contrib	ol of utions?		col. (i)	
		Yes	No			
HUDSON BAY						
	TELECANVAS		х	117,545	125,462	-7,917
AB DATA	FUNDRAISIN	х		244,721	42,000	202,721
sagaterns. ig in			190020m			
			3			
		<u> </u>				
			l			
		├	<del> </del>			
			1			
		<b>-</b>	├			
					:	
		t	<del> </del>			
		<b>†</b>				
			<b>&gt;</b>	362,266	167,462	194,804
Total  3 List all states in which the organization is registered or lie				·	I	
registration or licensing.	5011000 10 0011011 10111					
*						

52	-1	34	13	9	2	4
----	----	----	----	---	---	---

Pa	art I	more than \$15	vents. Complete if the organ	Sa. List events with gross re	ceints greater than \$5.0	)00.
		THORE than \$13,	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue						
Seve	1	Gross receipts				
_	2	Less: Charitable				
	3	contributions Gross revenue (line 1				
$\dashv$		minus line 2)	Manager Control of the Control of th			
	4	Cash prizes				
ses	5	Non-cash prizes				·
Direct Expenses	6	Rent/facility costs				
Direct	7	Other direct expenses				
	8			)		
	9 art	Net income summary. Com  Raming. Comr	nbine lines 3 and 8 in column (a) blete if the organization ans	wered "Yes" to Form 990, F	art IV, line 19, or repor	ted more
	41.6	than \$15,000 o	n Form 990-EZ, line 6a.			
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Reve	1	Gross revenue			e e e	
S	2	Cash prizes		11006	) \/	
Direct Expenses	3	Non-cash prizes		·3		
Direct E	4	Rent/facility costs				
u	5	Other direct expenses				
_			Yes %	Yes%	Yes %	
	6	Volunteer labor	No	No		
	7	Direct expense summary.	Add lines 2 through 5 in column (d	)	·····	)
	8	Net gaming income summ	nary. Combine lines 1 and 7 in colur	mn (d)	<b>&gt;</b>	
						Yes No
9				rities: f these states?		
a b		tne organization licensed to "No," Explain:	operate gaming activities in each o	Titlese states:		
_						
				de de as to mineted during the tay year	 	10a
10a b		"Yes," Explain:		ded or terminated during the tax yea		
11	D	oes the organization operate		s?		
12	ls	the organization a grantor, I	beneficiary or trustee of a trust or a	member of a partnership or other er	tity	
_	- 10	sa to daminiotor orientable	- J	And the second s	Schedule G (I	Form 990 or 990-EZ) 2008

Sche	dule G (Form 990 or 990-EZ) 2008	Government	Accountability	Project	52-134392	4	Page	: 3
00110	date of (Ferri see of the Lar)					Y	es No	<u>o</u>
13	Indicate the percentage of gaming activ	rity operated in:						
а	The organization's facility			13	a %		İ	
b	An outside facility			13	b %			
14	Provide the name and address of the p	erson who prepares the or	ganization's gaming/special eve	ents books				
	and records:						:	
	Name ▶							
	Address >							
15a	•					15a		
	revenue?				d the	134	_	—
þ	If "Yes," enter the amount of gaming re			an	u me	1	1	
	amount of gaming revenue retained by	the third party ► \$						
С	If "Yes," enter name and address:							
	Name ►							
	Address ►							
16	Gaming manager information:							
	Name ►							
	Gaming manager compensation >	\$						
	Description of services provided ▶		······					
	Description of services provided ▶  □ Director/officer □ En	nployee	ndependent contractor	DY -				
17	Mandatory distributions:			4 72				
а	Is the organization required under state	e law to make charitable d	istributions from the gaming pro	ceeds to				
	retain the state gaming license?					17a		
b	Enter the amount of distributions requi	red under state law distribi	uted to other exempt organization	ons or spent			1	
	in the organization's own exempt activi	ties during the tax year 🕨	\$					

#### SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered 
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047 Open To Public

Internal Revenue Service

Inspection

lame of the organization Go	vernment Accoun	tab	ili	ty Pr	oject		52-	•			i di i i di	<i>3</i> 1	
Part I Excess Be	nefit Transactions (sectioned by organizations that answere	n 501(d	c)(3) a	nd section	501(c)(4) organ	nizations only). or 25b. or Form 9	90-EZ. Pa	rt V. li	ne 40	b.			
	Name of disqualified person	100	OIL	01111 000,	4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Description of t		<u> </u>				Correct	
1 (-)											Yes	1	10
								_					
under section 4958	mposed on the organization man							<b>▶</b> \$					
	f any, on line 2, above, reimburse nd/or From Interested P			anization				Ψ					
To be complet	ed by organizations that answere	ed "Yes	on f	Form 990,	Part IV, line 26,	or Form 990-EZ, I	Part V, line	38a.		,			
(a) Name of intereste	ed person and purpose	(b) Lo or fro	m the		Original ipal amount	(d) Balance	due	(e) In	default?	lefault? (f) Approve by board or committee?		r agreement	
		To	From				Yes	No	Yes	No	Yes	No	
Louis Clark Working Capital		x			40,000 2		5,500		x	x			х
,													
A			Y		$\langle                   $								
			A COMM										
		-											
Total					<b>•</b>	<u> </u>	5,500	)			<u> </u>		Щ.
Part III Grants or	Assistance Benefitting I	ntere	sted	Persor	ıs.		, , , , , , , , , , , , , , , , , , , ,						
	ted by organizations that answere ame of interested person	ea yes	s on r		Relationship betwe	en interested person	and the	(0	) Amo			r type	of
				-	or	ganization				assis	tance		
-													
								-					
Part IV Business	Transactions Involving I ted by organizations that answer	ntere	stec	Person	<b>1s.</b> Part IV, line 28a	a, 28b, or 28c.		.1					
,	terested person	(b)	Relatio	nship betwe person and	een (c) A	Amount of insaction	(d) Descr	iption (	of trans	action		of	Sharing f org. enues?
			org	anization							-	Yes	No.
												_	#
												+	+

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

#### SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Part I

Types of Property

Scientific specimens

Archeological artifacts .....

Other ►(

Other ► ( )
Other ► ( )

NonCash Contributions

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

Government Accountability Project

Attach to Form 990.

OMB No. 1545-0047

2008

Open To Public Inspection

Employer identification number

52-1343924

(d) (b) (c) (a) Method of determining Number of Contributions Revenues reported on Check if Form 990, Part VIII, line 1g revenues applicable Art—Works of art Art—Historical treasures ...... Art—Fractional interests ...... 3 Books and publications ..... 4 Clothing and household 5 goods ..... Cars and other vehicles 6 Boats and planes ..... 7 Intellectual property ..... 8 51,631 Date of Gift X 5 Securities—Publicly traded ...... 9 Securities—Closely held stock .... 10 Securities—Partnership, LLC, 11 or trust interests Securities—Miscellaneous ...... 12 Qualified conservation 13 contribution (historic structures) ..... Qualified conservation 14 contribution (other) Real estate—Residential ..... 15 Real estate—Commercial 16 Real estate—Other 17 Collectibles 18 Food inventory ..... 19 Drugs and medical supplies ..... 20 Taxidermy 21 Historical artifacts ..... 22

which the organization completed Form 8283, Part IV, Donee Acknowledgement 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 X used for exempt purposes for the entire holding period? If "Yes," describe the arrangement in Part II. b Does the organization have a gift acceptance policy that requires the review of any non-standard 31 X 31 contributions? Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash 32a X 32a contributions? If "Yes." describe in Part II. b If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, 33

Number of Forms 8283 received by the organization during the tax year for contributions for

23

24 25

26

27 28

Schedule M (For	m 990) 2008	Gover	nment Ad	ccountab	ility E	Project	52-	-1343924		Page 2
Part II	Supplen	nental Info	ormation. Co	omplete this is part for an	part to pro	ovide the in	nformation	required by P	art I, lines 30	b,
Part I	, Line	32b -	Third I	Party Us	ed to 1	Process	Nonca	sh Contri	butions	
We hav	re a br	oker t	hat all	stock g	ifts a	re tran	sfered	to and t	hen the	stocks
are im	nmediat	ely so	1d.							
						. ,				
			.,							
										, , , , , , , , , , , , , , , , , , , ,
			_notifies.							
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, , , , , , , , , , , , , , , , , , , ,										
							, , , , , , , , , , , , , , , , , , , ,			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			. ,	. , , ,					

## SCHEDULE O

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

Attach to Form 990. To be considered additional information for responsible to the Treasury

Government Accountability Project

#### 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. OMB No. 1545-0047

2008
Open to Public Inspection

Employer identification number 52-1343924

Form 990 - Organization's Mission
empowering citizen activists. We pursue this mission through our Nuclear
Safety, International Reform, Corporate Accountability, Food & Drug Safety,
and Federal Employee/HomelandSecurity programs. GAP is the nation's leading
whistleblower protection organization
Form 990, Part III, Line 4a - First Achievement
o In November, the Index on Censorship, a journal based in
London, UK, published our 3,000-word article,   Breaking
the Silence, ☐ in a special issue devoted to the Bush
administration and censorship.
o In July, the EPA released a major report identifying
significant climate change consequences. We called on the
White House to embrace the report, held interviews on
radio and were quoted in USA Today.
o In May, the Bush administration reluctantly issued a
long overdue climate change report in response to a
federal court order following a critical case Piltz
supported with a 12,000-word Declaration and 25 exhibits.
o Using information we presented in hearing testimony and
documentation, the House Oversight and Government Reform
Committee released a report on Bush administration
interference with climate science
Overseeing the Food Industry:

Employer identification number Name of the organization 52-1343924 Government Accountability Project o GAP and the Safe Food Coalition are working to promote interventions that can help reduce or eliminate the presence of E. coli and other pathogens, like Salmonella, that threaten our nation s food supply. GAP is currently aiding a whistleblower who blew the whistle on the unsanitary conditions responsible for a major salmonella outbreak in 2008. o GAP also worked with: an FDA Chemist to uncover FDA□s food sampling data with chlorinated dioxins, one of the planet∃s most toxic contaminants. Overseeing the Drug Industry: o GAP also assisted clients exposing significant drug saftey risks, such as: batches of eye solutions and ear drops which failed to meet FDA quality standards and a possible compromise of the drug study for a leading Fibromyalgia drug. o GAP also worked with a FDA Safety officer who, because of her negative review of a drug, was wrongly removed from her work and suffered a groundless criminal investigation. Defense Contractors: Corporate Wrongdoing

o A GAP client exposed significant and unnecessary delays

Name of the organization  Government Accountability Project	Employer identification number 52-1343924
in the U.S. Marines Corps (USMC) securing of armor	
vehicles, costing the lives of countless American troops.	
Our client is a senior civilian science advisor to the	
USMC, who while serving in Iraq saw first hand the	
consequences of the USMC bureaucracy s failure to respond	·
to urgent need requests submitted by general officers on	
Mine Resistant Ambush Protected vehicles. We worked with	
our client to raise these issues with Congress and the	
media.	
Corporate Report:	
o In September GAP released a report which surveys the	
landscape of corporate whistleblower laws, and recommends	E.,
strategies for corporate whistleblowers to best protect	
themselves from future retaliation. We have published thi	.s
report to serve as a corporate whistleblower guidebook for	or
whistleblowers and their attorneys.	
Corporate Whistleblower Rights, Public Education &	
Preparation for Test Litigation:	
· · · · · · · · · · · · · · · · · · ·	
o On June 23, GAP s new National Whistleblower Rights	
Implementation Campaign organized a high profile	
conference with American University, Washington College of	of
Law on the new whistleblower laws which resulted in an	
increase in the momentum for public and congressional	

Name of the organization  Government Accountability Project	Employer identification number 52–1343924
support to strengthen whistleblower rights. The Campaign	
also held a webinar, co-sponsored by the National	
Employment Lawyers Association. The webinar offered basi	c
training for employment attorneys in effectively	
litigating corporate whistleblower claims under the new	
Consumer Product Safety Improvement Act.	
o Over the last year there has been a revolution in	
whistleblower protection for corporate employees directl	<b>Y</b>
resulting from GAP s work. We have begun testing these n	ew
laws and to ensure their proper implementation. These	
laws include whistleblower protections for all corporate	
employees who work: (i.) on the sale and manufacturing o	<b>f</b>
the 14,000 products regulated by the Consumer Product/	
Safety Commission (an estimated 20 million employees);	
(ii.) for defense contractors (over 1 million employees)	<i>i</i>
and (iii.) for ground transportation and trucking	
companies (over half a million employees).	
Form 990, Part III, Line 4b - Second Achievement	
staff associations/unions from organizations belonging t	o
the United Nations common system, including the United	
Nations Educational, Scientific and Cultural Organization	n
(UNESCO).	
GAP became part of the internal campaign to adopt a new	
whistleblower protection policy as a consequence of the	

ame of the organization  Government Accountability Project	Employer identification number 52-1343924
role we played in former World Bank President Paul	
Wolfowitz□s resignation in 2007. As a result of our	
consultation with the Bank on a final version of the	
policy, the Executive Board of Directors has approved a	
new whistleblower protection policy as Staff Rule 8.02.	
GAP continues to pursue the case of a World Bank	
whistleblower involving defective HIV test kits in India	
that report high rates of false negatives. Our challenge	
has now expanded to include our own Center for Disease	
Control (CDC) which was pulled into the controversy by th	<b>e</b>
World Bank to question our finding.	
We have played a key role in exposing corruption at a	
prominent computer services company with contractual ties	
to 185 Fortune 500 companies, the World Bank, the United	
Nations, and the U.S. Government.	
······································	
Form 990, Part III, Line 4c - Third Achievement	
U.S. government agency unprecedented access to every	
communication connected with mobile phones, for which GAP	
released our client⊡s affidavit to all 435 House of	.,
Representatives members resulting in a decisive vote	
later reversed against providing the telecommunication	.s
industry retroactive immunity; the U.S. Navy making	
improper repairs on high-performance military aircraft;	
and other deeply questionable practices undermining the	

ame of the organization  Government Accountability Project	Employer identification number 52-1343924
Federal Air Marshal Service's mission and the safety	of
its personnel.	
Form 990, Part III, Line 4d - All Other Achievements	
Environmental Oversight, Nuclear Oversight,	
Form 990, Part VI, Line 10 - Organization's Process U	Sed to Review Form 990
The draft 990 was sent to the Board of Directors and	all comments and
changes were incorporated into the final version before	ere efiling with IRS.
Form 990, Part VI, Line 12c - Enforcement of Conflict	s Policy
Annually the board of directors is requested to update	e our conflict of
interest quesionnaire.	
Clent Coox	<i>[</i>
Form 990, Part VI, Line 15a - Compensation Process for	r Top Official
The board chair and Director supervised an independen	nt written and oral
performance evaulation of Executive Director, and tog	ther they approve the
salary increase.	
Form 990, Part VI, Line 15b - Compensation Process for	or Officers
Annual performance evaluations are performed by their	supervisors and then
reviewed by the Executive Director.	
Form 990, Part VI, Line 17 - Other States Where Copy	of Return is Filed
Maine, Maryland, Massachusetts, Michigan, Minnesota,	Missouri,
Mississippi, New Hampshire, New Jersey, New Mexico, N	lew York,
North Carolina, North Dakota, Ohio, Oklahoma, Oregon,	Pennsylvania,

Name of the organization Government Accountability Project	52-1343924
Rhode Island, South Carolina, Tennessee, Utah, West Virginia, Wisconsin	Virginia, Washington,
Form 990, Part VI, Line 19 - Governing Document	s Disclosure Explanation
Public Disclosure copies of the audited financi	al statements and the IRS
Form 990 and Form 1023 are kept in the office of	of the Director of Finance.
Upon request copies are made and sent out to an	yone that requests.
Sch G, Part I, Line 2b, Col (v) - Fundraising v	rs. Reimbursement Explanation
HOURLY FEE	
AB DATA  MONTHLY RETAINER	) О У
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Forms 990 / 990-PF

## Loans from Officers, Directors, Trustees, and Key Employees or Other Disqualified Persons

For calendar year 2003, or tax year beginning

, and ending

2008

Name

Employer Identification Number

Government Accoun	ntability Pa	roject		52-1343924
Form 990, Part X	<u>, Line 22 -</u>	Additional	Information	
N				Title
	e of lender		President	Title
1 .//			1133143113	
(2) (3)				
(4)				
(5)				
(6)				
(7)				
(8)				and the second s
(9)				
(10)	·			
		1		
Original amount		Maturity		Interest
borrowed	Date of loan	date	Repayment terms Upon request	rate 0.000
(1) 40,000	1/01/98		Opon request	0.000
(2) (3) (4) (5)				
(3)				
(4)				
(6)				
(7)	/** \	A	7 3 mm 3 mm 3	
(8)				
(9)	No. of I			
(10)			3	
	ovided by borrower		Purpose	of loan
(1) None			Working Capital	
(2)			1	
(3)				
(4)				
(5)				
(6) (7)				
(8)		<u> </u>		
(9)	······································			
(10)				
			Balance due at	Balance due at
Consideration for	urnished by lender		beginning of year 25,500	end of year
(1) None			25,500	25,500
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
Totals			25,500	25,500

CGAPREV Government Accountability Project
52-1343924 Federal Statements

52-1343924

FYE: 12/31/2008

Total

**Taxable Interest on Investments** 

Amount Description 7,848

Unrelated Business Code

Exclusion Code

9/14/2009 12:13 PM

Postal Code

Client Copy

CGAPREV Government Accountability Project

52-1343924 FYE: 12/31/2008 **Federal Statements** 

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Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	nagement & General	 Fund Raising
Equipment Rental & Repair Lobbying Expenses Postage Dues & Subscriptions Miscellaneous Deposition and Arbitratio	\$ 17,424 10,555 6,501 5,939 1,690 1,015	\$ 15,262 10,454 5,412 5,543 1,548 924	\$ 1,384 41 219 241 100 47	\$ 778 60 870 155 42 44
Total	\$ 43,124	\$ 39,143	\$ 2,032	\$ 1,949

Client Copy

# CGAPREV Government Accountability Project 52-1343924 Federal Statements

FYE: 12/31/2008

### Schedule A, Part II, Line 5 - Excess Gifts

Donor Name	Total		Excess
Alida Messinger	\$ 45,0	00 \$	
Tamarin Foundation	717,0		506,186
Deer Creek Foundation	150,0	00	
Helaine Lerner Phiol	229,4		18,518
John Merck	145,0		
Ploughshares Fund	160,0		
Vanguard	25,0		
Bullitt Foundation	35,0		
United States Institute for Peace	19,8		
Jewish Commual Fund	315,7		104,838
American Foundation	5,0		
Garfield Foundation	5,0		
Barbara Streisand Foundation	7,5		
Herb Block Foundation	10,0		
Rockefeller Family Fund	170,8		
Columbe Foundation	100,0		
Normandie Foundation	25,0		
The Energy Foundation	30,0 129,0		
Trust for Mutual Understanding	125,0		
Cohen Foundation Scherman Foundation	120,0		
Winslow Foundation	45,0		
Fund for Constiutional Government	52,2		
New York Community Trust	75,0		
Carnagie Foundation	75,0		
Nathan Cummings	475,0		264,088
Ford Foundation	700,0		489,088
Zodiac Fund	1,225,7		1,014,819
Schab Foundation	255,0		44,088
T Rowe Price Program	205,0		,
Open Society	365,0		154,088
Total	\$ 6,042,5	12 \$	2,595,713