Department of the Treasury

For the 2008 calendar year, or tax year beginning

May the IRS discuss this return with the preparer shown above For Privacy Act and Paperwork Reduction Act Notice, see the sepa

### 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

2008, and ending

February 28

March 1

OMB No 1545-0047

Open to Public Inspection

, 20 09

C Name of organization Information Technology and Innovation Foundation D Employer identification number Please Check if applicable use IRS Doing Business As 20 4403497 Address change label or print o Number and street (or PO box if mail is not delivered to street address) Room/suite Telephone number Name change type. 1101 K Street, NW 202) 626-5732 Initial return Specific City or town, state or country, and ZIP + 4 ☐ Termination Washington, DC 20005 G Gross receipts \$ Amended return F Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Yes **Robert Atkinson** H(b) Are all affiliates included? ☐ Yes Tax-exempt status 4947(a)(1) or **527** If "No," attach a list (see instructions) Website: ► www.innovationpolicy.org H(c) Group exemption number ▶ Type of organization. ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 2006 M State of legal domicile DE Summary Briefly describe the organization's mission or most significant activities: ITIF is a non-partisan research and educational institute whose mission is to formulate and promote public policies to advance technological Activities & Governance innovation and productivity internationally, in Washington, and in the states. Recognizing the vital role of technology in ensuring American prosperity, ITIF focuses on innovation, productivity, and digital economy issues. Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its assets. Number of voting members of the governing body (Part VI, line 1a), 15 4 14 Number of independent voting members of the governing body (Part VI, line 1b) Total number of employees (Part V, line 2a) . . . . . . . . . . . . 5 0 Total number of volunteers (estimate if necessary) 6 0 7a 0 7a Total gross unrelated business revenue from Part VIII, line 12, column (C). b Net unrelated business taxable income from Form 990-T, line 34 0 Current Year SCANNED 748,000 903,106 Contributions and grants (Part VIII, line 1th) Program service revenue (Part VIII, line 25) 845 Investment income (Part VIII, column (A), lines 3, 4, and 6d)2(109 ).

Other revenue (Part VIII, column (A), lines 5 6d, 8c, 9c, 10c, and 11 11.106 5.218 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 759.951 908,324 JAN Grants and similar amounts paid (Part IX, column-(A), Jines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) . 503.605 668,590 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 8 44,219 20,420 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶ .... 196,672 327.547 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . . . Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 744,496 1,016,557 Revenue less expenses Subtract line 18 from line 12 15.455 (108.233)Beginning of Year **End of Year** 778,773 978,076 20 Total assets (Part X, line 16) . 410,943 843,478 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 367,830 134,598 Part II Signature Block have examined this return, including accompanying schedules and statements, and to the best of my knowledge Under penalties of penury, I declare that claration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Atkinson Type or print name and title Preparer's signature Paid Preparer's Firm's name (or yours Use Only if self-employed), address, and ZIP + 4

4e	Total program service expenses ▶ \$ 876,601 (Must equal Part IX, Line 25, column (B))
4d	Other program services. (Describe in Schedule O ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	7
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	economy issues.
	to advance technological innovation and productivity internationally, in Washington, and in the states. Recognizing the vital role of technology in ensuring American prosperity, ITIF focuses on innovation, productivity, and digital
	ITIF is a non-partisan research and educational institute whose mission is to formulate and promote public policies
<u>4</u> a	(Code. ) (Expenses \$ 876,601 including grants of \$ 0 ) (Revenue \$ 0 )
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
	services?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	the prior Form 990 or 990-EZ?
2	economy issues.  Did the organization undertake any significant program services during the year which were not listed on
	the vital role of technology in ensuring American prosperity, ITIF focuses on innovation, productivity, and digital
	ITIF is a non-partisan research and educational institute whose mission is to formulate and promote public policies to advance technological innovation and productivity internationally, in Washington, and in the states. Recognizing
1	Briefly describe the organization's mission:
	Statement of Program Service Accomplishments (see instructions)

Form	990 (2008)		F	age :
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1_1_	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?.	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	✓	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	12		<b>✓</b>
13	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>▼</b>
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<u>√</u>
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<del></del>
19 20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H.	19 20		<del></del>
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		Ţ
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		<b>√</b>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	<b>√</b>	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K If "No," go to question 25.	24a		✓_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		✓_
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Part IV	<b>△</b> I	_1.1'_4 _		Required	A - I I	1 .		41
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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an 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		✓
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		1
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		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<b>✓</b>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	<u>VI</u>	37		✓

Form **990** (2008)

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			ļ
	gaming (gambling) winnings to prize winners?	1c	✓	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ĺ	]
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	<del> </del>		ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar 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			_ ا
	account)?	4a	<b></b>	<b>✓</b>
b	If "Yes," enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			<u></u> _
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		1
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
~	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75°	7a		<b>/</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-		,
ب ـ	required to file Form 8282?  If "Yes" indicate the number of Forms 8282 filed during the year.	7c	_	<b>-</b>
	in res, indicate the number of Forms 6252 filed during the year	i	, ,	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>✓</b>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g	$\dashv$	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			l
_	required?	7h		<del> </del>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	1		ĺ
	<b>509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		j
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		1	
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			İ
a	Gross income from members or shareholders		ľ	
þ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )		ŀ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	🗸		

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

Sec	ction 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.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		✓
b		7b		✓_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	<b>√</b>	
9a	Does the organization have local chapters, branches, or affiliates?	9a		✓
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		✓
Sec	etion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<b>✓</b>	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	<b>✓</b>	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		.	
	describe in Schedule O how this is done	12c	<b>✓</b>	
13	Does the organization have a written whistleblower policy?	13	<b>√</b>	
14	Does the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15 <u>a</u>	<b>✓</b>	
Ь	Other officers or key employees of the organization?	15b		<b>√</b>
	Describe the process in Schedule O (see instructions)			
16a	Describe the process in schedule of (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	·	16a		✓
b	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
b	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			<b>✓</b>
	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?	16a 16b		✓
Sec	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?  Stion C. Disclosure			<b>✓</b>
Sec 17	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 DC	16b		<b>✓</b>
Sec	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 DC  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)	16b	only)	<b>✓</b>
Sec 17	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 DC  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available.	16b	only)	<b>✓</b>
Sec 17 18	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?  Ition C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶DC  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection Indicate how you make these available Check all that apply.  □ Own website □ Another's website ☑ Upon request	16b		<b>✓</b>
Sec 17	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 ▶DC  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c 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 or	16b		<b>✓</b>
<u>Sec</u> 17 18	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 ▶DC  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c 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 or policy, and financial statements available to the public	16b	erest	<b>✓</b>
Sec 17 18	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 DC.  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c available for public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website Dupon request.  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict or policy, and financial statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and record	16b	rest	
<u>Sec</u> 17 18	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 ▶DC  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c 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 or policy, and financial statements available to the public	16b	rest	

# 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 organization did not co	ompensate	any o	offic	er,	dıre	ctor,	trus	itee, or key em	ıployee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	Positi	on (d	chect	k all	that ap	ply)	Reportable	Reportable	Estimated
	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)	amount of other compensation from the organization and related organizations
Robert Atkinson	40							226,356	اه	
President	40			1	✓	✓		220,336	· · · · · ·	
					<u> </u>					
	_									
								·		
			_							<u> </u>
								_		<u> </u>
	_									

Pa	Part VII Section A. Officers, Directors, Truster			<del></del>						d Employees (co	es (continued)			
	(A) Name and title	( <b>B</b> ) Average			•	C)			(D)	(E)	(F)			
			Individual trustee	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations			
		·					1							
										-				
										···				
<u>1b</u>	Total							<u> </u>						
2	Total number of individuals (including those organization ► 1	e in 1a) wh	o rec	eive	ed n	nore	thar	\$10	00,000 in repo	rtable compens				
3	Did the organization list any former office employee on line 1a? If "Yes," complete So							oyee	e, or highest c	ompensated	Yes No			
4	For any individual listed on line 1a, is the s the organization and related organizations individual										4 🗸			
5	Did any person listed on line 1a receive services rendered to the organization? If ")	or accrue /es," comp	comp lete s	ens Sch	satio edu	on f le J	rom a	any <i>uch</i>	unrelated org		5 🗸			
<u>Se</u>	ction B. Independent Contractors													
1	Complete this table for your five highest cocompensation from the organization.	mpensate	d indi	ере	nde	nt c	ontra	ctor	s that received	d more than \$1	00,000 of			
	(A) Name and business add	ress							(B) Description of se	ervices	(C) Compensation			
							_		<del> </del>					
		<del></del>												
2	Total number of independent contractors (compensation from the organization ▶ 0		hose	ın 1	1) w	ho	receiv	/ed	more than \$10	00,000 in				

Part	VII	Statement of Revenue			_		
				(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions).  All other contributions, gifts, grants, and similar amounts not included above  Noncash contributions included in lines 1a-1f \$	903,106 52,500				
O e	h	Total. Add lines 1a–1f	<u> </u>	903,106			
Program Service Revenue	2a b c d e f	All other program service revenue .		0			
	3	Investment income (including dividen-					
	4 5	other similar amounts)	ond proceeds	5,218 0 0			
	b	Gross Rents Less rental expenses Rental income or (loss)  Net rental income or (loss)	(ii) Personal	0			
		Gross amount from sales of assets other than inventory  Less: cost or other basis	(II) Other				
	С	and sales expenses .  Gain or (loss) .  Net gain or (loss)		0			
Other Revenue		Gross income from fundraising events (not including \$	a				
Ť			b				
0		Net income or (loss) from fundraising	events . ►	0			1
	b		b				
	10a b	Net income or (loss) from gaming act Gross sales of inventory, less returns and allowances	a	0			
	112	wiscellarieous nevenue	<del></del>				
	i ia b						
	С						
		All other revenue					
		Total. Add lines 11a–11d		0			
	12	Total Revenue. Add lines 1h, 2g, 3, 9c, 10c, and 11e	4, 5, 6d, 7d, 8c,	908,324			

Part IX Statement of Functional Expenses

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

	All other organizations must complete colu	ımn (A) but are no	t required to comp	olete columns (B), (C	C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22		_		
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, trustees, and key employees	226,356	199,193	27,163	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			,,	
7	Other salaries and wages	302,126	265,871	36,255	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions).				
9	Other employee benefits	99,679	87,718	11,962	
10	Payroll taxes	40,429	35,577	4,851	
11	Fees for services (non-employees):				
а	Management				
	Legal	1,085	130	955	
С	Accounting				
	Lobbying				
	Professional fundraising services See Part IV, line 17	20,420		- "	20,420
f	Investment management fees				
	- · ·	57,113	50,259	6,854	
12	Other	,			
13	0#	3,530	424	3,106	
	Office expenses	38	33	5	
14	Information technology				
15	Royalties	78,742	69,293	9,449	
16	Occupancy	57,357	50,474	6,883	
17	Travel	31,001	30,414	0,003	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	40.705			
19	Conferences, conventions, and meetings .	42,725	37,598	5,127	· = · · · · · · · · · · · · · · · · · ·
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.				
23	Insurance				<del> </del>
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Printing	11,578	10,189	1,389	
b	Accounting & HR services, ins & equip	75,077	66,068	9,009	
c	Miscellaneous	302	265	36	
d				•	
e					_
f	All other expenses				<del></del>
25	Total functional expenses. Add lines 1 through 24f	1,016,557	876,601	119,536	20,420
<del></del> 26	Joint Costs. Check here ► ☐ if following	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3.0,031		20,720
•	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	ırt X	Balance Sheet	·				<u> </u>
			(A) Beginning of year		End (	<b>B)</b> of year	
	1	Cash—non-interest-bearing	422,077	1		593	3,270
	2	Savings and temporary cash investments .	176,106	2		38	1,324
	3	Pledges and grants receivable, net	<u>177,500</u>	3			
	4	Accounts receivable, net		4			2,500
	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			
Š	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
110 111 122 133 144 155 166 177	9	Prepaid expenses and deferred charges	2,114	<del>                                     </del>			
	10a	Land, buildings, and equipment. cost basis 10a 1,744			-		
	b		976	10c			976
1 1 1	11	Investments—publicly traded securities		11			
	12	Investments—other securities See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	778,773	16		978	8,076
	17	Accounts payable and accrued expenses	410,943	17			3,478
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
es	21	Escrow account liability Complete Part IV of Schedule D .		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
=		persons. Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		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	410,943	26		843	3,478
Fund Balances		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.					~
<u>la</u>	27	Unrestricted net assets		27			
Ba	28	Temporarily restricted net assets		28			
n	29	Permanently restricted net assets		29			
		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.					
Net Assets or	30	Capital stock or trust principal, or current funds .		30			
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31			_
Ą	32	Retained earnings, endowment, accumulated income, or other funds	367,830	32		134	4,598
Š	33	Total net assets or fund balances .	367,830			134	4,598
	34	Total liabilities and net assets/fund balances	778,773	34		978	3,076
Pā	rt XI	Financial Statements and Reporting	- <del></del>				
			_			Yes	No
1		ounting method used to prepare the Form 990.   Cash   Accrual	☐ Other				-
		e the organization's financial statements compiled or reviewed by an inde		?	2a	<b>  </b>	<b>✓</b>
		e the organization's financial statements audited by an independent acco		•	2b		<b>✓</b>
С		es" to lines 2a or 2b, does the organization have a committee that assumes		•			,
_		audit, review, or compilation of its financial statements and selection of an inc	•		2c		<b>✓</b>
Зa		i result of a federal award, was the organization required to undergo an a Single Audit Act and OMB Circular A-133?	audit or audits as set	torth in			,
h		es," did the organization undergo the required audit or audits?		. ,	3a 3b	$\vdash \vdash \vdash$	<b>✓</b>
~		, are erganication andorgo the required dualt of dualts.			I SD	1 ,	

#### **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

				ation Foundation					20 :		<u>4403497</u>		
Pa	rt I	Reason	for Public Ch	narity Status (All or	ganızatı	ons mus	st compl	ete this	part.) (se	ee instru	ictions)		
The	orga	anization is n	ot a private four	ndation because it is:	(Please	check on	ly <b>one</b> or	ganizatio	n.)				
1		A church, co	onvention of chu	irches, or association	of churc	hes desc	ribed in	section 1	70(b)(1)(	A)(i).			
2		A school de	scribed in <mark>sectio</mark>	on 170(b)(1)(A)(ii). (At	tach Sch	edule E)							
3		A hospital o	r a cooperative	hospital service organ	nization d	lescribed	ın sectio	n 170(b)	(1)(A)(iii).	(Attach	Schedule H)		
4		A medical re	esearch organiza	ation operated in conj	junction '	with a ho	spital de	scribed i	n sectior			e	
5		An organizat		the benefit of a colle						ernmenta	al unit described	ır	
6		A federal, st	ate, or local gov	ernment or governme	ental unit	describe	d in sect	ion 170(	b)(1)(A)(v	).			
7		An organizat	tion that normally	y receives a substantia (1)(A)(vi). (Complete F	al part of			-			the general publ	IC	
8	$\Box$			d in <b>section 170(b)(1)</b>		amplete	Dort II \						
9													
9	ш			y receives: (1) more that ed to its exempt funct									
				ent income and unre									
				n after June 30, 1975.						i Sii lax	, irom businesse	38	
	$\overline{}$	•	_					·	•				
10	님			nd operated exclusive									
11	ш			and operated exclusive									
				blicly supported organ								'n	
		<b>509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h <b>a</b> ☐ Type I <b>b</b> ☐ Type III <b>c</b> ☐ Type III—Functionally integrated <b>d</b> ☐ Type III—Other											
		a ☐ Type									Type III-Other		
е				tify that the organizat									
				on managers and othe	r than on	e or more	publicly	supporte	ed organiz	zations de	escribed in sectio	٦c	
		509(a)(1) or	section 509(a)(2)										
f				a written determinati	on from	the IRS	that it is	a Type	I, Type II	, or Type	III supporting		
		_	, check this box								. [	_	
g		Since Augus following pe		the organization acce	epted any	gift or c	ontribution	on from a	any of the	•			
				r indirectly controls, ending body of the supp		_	•	th persor	ns descrit	oed in (ii)	Yes No	-	
			=	erson described in (i) a							11g(ii)		
				of a person described							11g(iii)	_	
h				ation about the organ				upports	•			_	
(1)	Name	of supported	(ii) EIN	(III) Type of organization		organization		ou notify	(vi) l	s the	(vii) Amount of		
	org	anization		(described on lines 1–9 above or IRC section		sted in your document?		nization in		ion in col	support		
				(see instructions))	governing	document		of your port?		zed in the S ?			
					Yes	No	Yes	No	Yes	No			
		•									-		
							:	i					
												_	
	_											_	
												_	
	-											-	
	_											_	
				1	1	1	I	I	I				

Total

	(Complete only if you check					and 170(b)(1	)(A)(VI) 
	tion A. Public Support		-				
Ca	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.")			609,000	748,000	903,106	2,260,106
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3			609,000	748,000	903,106	2,260,106
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)				, <u>.</u>		
6	Public support. Subtract line 5 from line 4.		<u> </u>	<u> </u>			
	tion B. Total Support	(-) 0004	T #1 0005	(-) 0000	(4) 0007	(10000	(D.T.)
	lendar 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			609,000	748,000	903,106	2,260,106
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				11,106	5,218	16,324
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				845		845
11	Total support. Add lines 7 through 10 .						2,277,275
12	Gross receipts from related activities, etc	(see instructi	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	the organization	on's first, secon	nd, third, fourth,	-		n 501(c)(3) . ► ✓
	tion C. Computation of Public Sup			<del></del> .		<del></del>	
14	Public support percentage for 2008 (line to		•	1, column (f))	•	14	<u> %</u>
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f						
16a	a 33% % support test – 2008. If the organization did not check the box on line 13, and line 14 is 33% % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	33½% support test – 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circun inces" test The	nstances" test, o organization qua	check this box are alifies as a publicly	nd <b>stop here</b> y supported or	Explain in Part ganization	IV how the

	dule A (Form 990 or 990-EZ) 2008	minetions De	and in 6	)	1/01			Page 3	
	(Complete only if you check				I)( <i>2</i> ) ———				
Sec	tion A. Public Support								
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") .								
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1-5 ,					-			
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .								
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000								
С	Add lines 7a and 7b					-			
8	Public support (Subtract line 7c from					-			
<u></u>	line 6)	l. <u></u> .						[	
	tion B. Total Support	(=) 0004	(h) 0005	(=) 2000	(4) 0007	(-)	0000	(O Takal	
	alendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total	
9 10a	Amounts from line 6								
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
С	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, and 12)					<u> </u>			
14	First five years. If the Form 990 is for organization, check this box and stop	here	•	nd, third, fourth	n, or fifth tax y	ear as	a section	on 501(c)(3) ► □	
Sec	tion C. Computation of Public Su					, ,			
15	, , , , , , , , , , , , , , , , , , , ,						%		
16 Sec	Public support percentage from 2007 Stion D. Computation of Investment			/g	<del>: '</del>	16	<del></del> -	%	
	<del></del>		<del>_</del>	d by less 10 ==	alume (A)	_17			
17	· · · · · · · · · · · · · · · · · · ·	investment meeting percentage for 2000 (into 100) column (i) divided by line 10, column (ii)							
18	, ,		3316 % support tests — 2008. If the organization did not check the box on line 14, and line 15 is more than 3316 %, and line						

17 is not more than 33½%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐ 33½% support tests – 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½%, and line 18 is not more than 33½%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐ Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

schedule A (F	om 990 or 990-E2) 2008 Pai	ge 4
Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 1 Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)	0;
**********		
•		
•		
		·
		. <b></b>
••••		

#### SCHEDULE J (Form 990)

#### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

in Part III

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Information Technology and Innovation Foundation 20 4403497 **Questions Regarding Compensation** No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or 1b provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ✓ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a. 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? . . 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a a The organization?. . . **b** Any related organization? . . . . 6h If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 67 If "Yes." describe in Part III . . . . . . . Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(b) bleakdown of	VV-2 and/or 1099-10113	C compensation	(C) Deferred compensation	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ
(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation		benefits	(B)(i)(D)	
206,347	20000	226,347		23,518	249,865	200,00
						<del> </del>
						100
		• • • • • • • • • • • • • • • • • • • •				
						<del></del>
	-		-			
				-		
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}						
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Part III Supplemental Information  Joseph Ethics part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part or any additional information.	Schedule J (Form 990) 2008	Page 3
or any additional information.	Part III Supplemental Information	
	Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 0	6a, 6b, 7, and 8. Also complete this part
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