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SCANNED JAN 0 & 2010

### **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)

			nue Service			have to use a copy of		sfy state rep	orting requires	nents.	
:	Ā	For th	ne 2008 ca	alendar	year, or tax year be-	ginning February	3 <b>, 2008, a</b>	nd ending	January 3	1	<b>, 20</b> 09
	В	Check if	applicable	Please	C Name of organization	Foot Locker Fo	oundation,	Inc.	Q	Employ	er identification number
- 1	$\Box$	Address	s change	use IRS label or	Doing Business As					52-2	348625
	=	lame c	•	print or	Number and street (or P	O box if mall is not delivered to	to street address)	Room/suite	E	Telepho	one number
	=	nitial re	•	type. See	112 W. 34th	Street			1	(212	) 720-3961
ľ	=	Termina		Specific Instruc-	City or town, state or	country, and ZIP + 4					
	7		ed return	tions.	New York NY	10120			G	Gross re	ceapts \$ 1,196,485.
	_		on pending	F Nar	me and address of princi	pal officer.					
,		фрикац	or bearing	м.	Serra. President	, 112 W. 34th Stre	et New York.	NY 10120	H(a) is this a gro H(b) Are all at	•	===
•	1	Tax-ex	cempt status		501(c) (3 ) ◀ (Insert no.)		527	10100	1 ''		included? [ Yes No list. (see instructions)
	J	Webs	ite: ▶			· · · · · · · · · · · · · · · · · · ·			H(c) Group exer		•
	K	Type of	organization.	Х Согро	ration Trust Associ	ation Other >	L Year	of formation			legal domicileDE
	•		Summ	ary							
		1	Briefly de	escribe	the organization's	mission or most sign	oificant activities	.The Found	dation is co	onmitt	ed to supporting
	_		youth, a	thlet	ics, education, a	mission or most sign nd the communities	in which Foot	Locker	inc has open	ration	is. The
	2	ļ	Foundati	on hol	lds an annual "On	Our Feet" event t	o benefit a s:	ingle tax-	exempt bene	eficia	ry. In addition,
	Ē		che rout	IGALIDI	I makes concilibut	ions to other orga	nizations iune	ged by do	ations from	n 1000	Locker, Inc.
	Activities & Governance	2	Check this	hov Þ	if the organization	discontinued its operation	one or disposed of	more than 2	5% of its assets		
	Ü				——·	governing body (Part	-			3	3
	2					mbers of the governing				4	0
	\$					/, line 2a)				5	0
	PC#					te if necessary)				6	20
	•					enue from Part VIII, li				7a	0.
		Ь	Net unre	ated b	usiness taxable inc	ome from Form 990-	T. line 34			7b	
					,				Prior Year		Current Year
	_	8	Contribut	ions ar	nd grants (Part VIII	line 1h)			1,284,6	539.	1,155,009.
	Revenue					line 2g)					0.
	Ş					nn (A), lines 3, 4, and					0.
	æ					A), lines 5, 6d, 8c, 9c,			-56,2	234.	41,476.
						1 (must equal Part VIII			1,228,4		1,196,485.
		13	Grants a	nd simi	lar amounts paid (F	Part IX, column (A), lir	nes 1–3)		983,3		1,307,423.
						art IX, column (A), lin	•				0.
	Expenses					ee benefits (Part IX, co	•	- 1			0.
	9					(, column (A), line 11e	, ,,	,			0.
	2					column (D), line 25) ▶		588.			
						A), lines 11a–11d, 11i			282,1	51.	256,888.
						nust equal Part IX, co			1,265,4	98.	1,564,311.
≥ .		19				e 18 from line 12			-37,0	93.	-367,826.
2	bs or nces					RECEI\	/FD		Beginning of Ye	ar	End of Year
•	38ta		Total ass	ets (Pa	art X, line 16)		<del>္မ</del> ာ္မြင္ဟု	🗀	521,6	49.	674,773.
>	2 E	21	Total liab	ilities (1	Part X line 26)				20,4	76.	14,175.
	충	22	Net asse	ts or fu	ind balances. Subtr	actine 2 From line	3003 O		501,1		660,598.
	į.			ature							
			Under pe	naities of	perjury, I declare that I h	nave examined this return in	nouding accompany	ring schedules	and statements	, and to	the best of my knowledge
			and beat	ı, it is ru	e, correct, and complete	rectaration of anguarents	mer than onicer) is	pased on all	intormation of w	nich pre	parer has any knowledge.
;	Sig	n		Tell	cently per the	<u> </u>			_ \ \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	e. 19	2009
1	He	re	Sign	sture of a	officer				Date		,
			Je.	remy	L. Nowak			Vice Pr	esident		
			Туре	or print	name and title						
	Da!a		Preparer's	5	3 4 4		Date	Check	[		lentifying number
	Paid		signature	<u> </u>	4.35			self- emplo	yed ▶ [ (see	instructi	ons)
	•	oarer's	Firm's nar		ours				EIN >		
_		Only	address, a	nd ZIP +					Phone no ▶		
M	lay	the II	RS discus	s this	return with the prep	parer shown above? (	see instructions	;)	T. none no		T, T
Fo	y P	rivacy	Act and	Paperw	ork Reduction Act A	lotice, see the separat	o inetrost	7	• • • • • • • • • • • • • • • • • • • •	• • • • • •	. Yes No
Ы	KA				/ 101 11	aee the separat	e instructions.				Form 990 (2008)

Form 990 (2008)

11	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission. Receive, maitain, and disburse funds for sponsoring and encouraging charitable, educational and athletic activites.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. 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
4a	(Code) (Expenses \$1,420,832. including grants of \$897,987. ) (Revenue \$1,447,943. )
	Foot Locker Foundation holds an annual "On Our Feet" event for a single beneficiary. The beneficiary of the 2008 event was the United Negro College Fund. In addition, the Foundation made contributions to other tax exempt organizations, which were funded by donations from Foot Locker, Inc.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Other program services. (Describe in Schedule O ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ \$ 1,420,832. (Must equal Part IX, Line 25, column (B).)

Page 3

	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	4		х
5	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	5_		х
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IIX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
ь	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		х
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 18	Х	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19		X
19	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	20		X
20 21	Did the organization operate one of more hospitals * II * res, * complete Schedule I *	21	X	<del></del>
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		х
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		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del></del>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
U	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	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		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		х

Page 4

	Checklist of Required Schedules (continued)			
	,		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,			Х
	Part IV	28a	<del> </del>	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Х
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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30_		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			

Form **990** (2008)

1	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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2.00		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<b>├</b> ─
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	4a		X
h	account)?			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	<u>6a</u>		X
b	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		7a	X	والمالة
	\$75?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	Too, malada die namber of forme deed mad daring the year.			
_	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<b></b> -	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del>  ^-</del>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Х
8	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		Х
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		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
<b>a</b>	Cross modific from members of shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			

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

Section 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				
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	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct	1		
	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
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		X
6	Does the organization have members or stockholders?	6_		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a_		X
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1 (18) - 11	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		X	
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b 9a		Х
9a		9a		
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	9b		
40	affiliates, and branches to ensure their operations are consistent with those of the organization?	30		
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		Х
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		Х
Sec	tion B. Policies			
			Yes	No
12a	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	Х	
С	rise to conflicts?			
	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	х	
13	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?	12c	X X	
13 14	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	12c	х	
13	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	12c	X X	
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	12c 13 14	X X	X
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?	12c	X X	X X
13 14 15	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?	12c 13 14	X X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)	12c 13 14	X X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	12c 13 14	X X	
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12c 13 14 15a 15b 16a	X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	12c 13 14 15a 15b	XXXX	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	12c 13 14 15a 15b	XXXX	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure	12c 13 14 15a 15b	XXXX	X
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed New York	12c 13 14 15a 15b	X X X	X
13 14 15 a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed New York  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50)	12c 13 14 15a 15b	X X X	X
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed Mew York  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50 available for public inspection. Indicate how you make these available. Check all that apply	12c 13 14 15a 15b	X X X	X
13 14 15 a b 16a b Sec 17	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed ▶ New York  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50 available for public inspection Indicate how you make these available Check all that apply  Own website ※ Another's website ※ Upon request	12c 13 14 15a 15b 16a	X X X	X X ly)
13 14 15 a b 16a b	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed ▶ New York  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50 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, confil	12c 13 14 15a 15b 16a	X X X	X X ly)
13 14 15 a b 16a b Sec 17 18	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ New York  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50 available for public inspection. Indicate how you make these available. Check all that apply  Own website X Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflipolicy, and financial statements available to the public.	12c 13 14 15a 15b 16a 16b	X X X )s on	X X dy)
13 14 15 a b 16a b Sec 17	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  List the states with which a copy of this Form 990 is required to be filed ▶ New York  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50 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, confil	12c 13 14 15a 15b 16a 16b	x x x x )s on	X X dy)

### 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.

X Check this box if the organization did not co		ally t	JIIIC		_	Clor,	iius			
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	a 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
			6			ated				
Matthew D. Serra		]			Ì			]		
Director and President	1	Х	<u></u>	X	<u></u>	<u>L</u>	_			
Robert W. McHugh		}			}					
Senior Vice President	1	Х		Х						
Laurie J. Petrucci			Ţ							
Senior Vice President	1			Х				]		
John Maurer			Γ		Γ		ľ			
Vice President and Treasurer	1			Х		1				
Giovanna Cipriano										
Vice President	1	l I		X						
Jeremy L. Nowak										
Vice President and Assistant Treasurer	1		_	Х		<u> </u>	L	_		
Sheilagh M. Clarke										
Secretary	1	1		Х			ļ			
Larisa Love										
Assistant Secretary	1			Х						
Peter D. Brown										
Senior Vice President and Director	1	Х	<u> </u>	Х						
			_							
		<b> </b>								
			]	]		]		Ì	Ì	
			$\vdash$			T				
	}	<b>\</b>				1	1			
		<b> </b>	<del>                                     </del>			<b>†</b>	_			
	ļ					<b>!</b>			ļ	
		<u> </u>	<del>                                     </del>	<del>                                     </del>		<del> </del>				
	İ									

	Section A. Officers, Directors, Tru	stees, Key	Emp	loye	ees,	an	d Higi	hest	t Compensated	l Employees (co	ntinued)
	, (A)	(B)			((	C)	-		(D)	(E)	(F)
	Name and title	Average hours per week				_	that ap		Reportable compensation from	Reportable compensation from related	Estimated amount of other
		<b>W</b> OOK	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
			_								
				-							
			i	_		_					
-											
			:								
	,								,		
				-				-			
				_							
4 h	Total								0.		
1b 2	Total number of individuals (including those							\$1		0. rtable compens	ation from the
3	Did the organization list any former office	r director	or tri	ıcto		(AV	emple		or highest of	ompaneated	Yes No
	employee on line 1a? If "Yes," complete Se	chedule J f	for su	ch i	indi	vidu	al				3 X
4	For any individual listed on line 1a, is the state organization and related organizations individual.	greater tha	n \$15	0,0	00?	If "	'Yes,"	cor	mplete Schedu		4 X
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue	comp	ens	satio	on f	rom a	any	unrelated orga	anization for	5 X
Sec	tion B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization.	ompensate	d inde	epe	nde	nt c	ontra	ctor	s that received	I more than \$10	00,000 of
	(A) Name and business add	ress						- -	(B) Description of se	ervices	(C) Compensation
Pai	nt the Town Red 62 W. 45th Str	eet New	York	۲,	NΥ	10	022	Cat	ering and Ente	rtainment	224,665.
Van	Wagner Sports and Entertainment 800 This	d Avenue l	New Y	ork	, N	10	0022	At	hletes / Cele	ebrities	125,000.
2	Total number of independent contractors ( compensation from the organization ▶	including th	nose	in 1	) w	ho i	receiv	ed	more than \$10	0,000 in	

Page 9

	عني	Statement of De			<del></del> -		<del></del>	rage s
() in		Statement of Re			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns						ar ar
g S	b	Membership dues	1b					} } . I .
ifts,	C	Fundraising events		777,383.				E.C.
nia	d	Related organizations	1 <u>d</u>	<del></del>				
Sin	e	Government grants (con						
buti ber	t	All other contributions, gifts, and similar amounts not include:		377 696				
<u>i</u> <u>i</u>		Noncash contributions include	A (n. )	<u>377,626.</u>				
a Co	h	Total. Add lines 1a-1f.		<b>—</b>	1,155,009.			1
	<del>                                     </del>	TOWN FIRM THE TOWN TO THE TENT		Business Code				
ě	2a				0.		Security of the second	
Rev	b				0.		<del> </del>	
3	C				0.			
Program Service Revenue	ď				0.			
Ē	e				0.			
ogra	f	All other program service	ce revenue		0.			
Ž	g	Total. Add lines 2a-2f	<i></i> .		0.			
	3	Investment income (inc						
		other similar amounts)			0.			
	4	Income from investment			0.			
	5	Royalties			0.			
			(ı) Real	(ii) Personal	明确 电分子			
	6a	Gross Rents · · · ·						1
	b	Less rental expenses						
	С	Rental income or (loss)	0.	0.				
	d	Net rental income or (lo	ss)	<u> </u>	0.	enter of the second state of	an in the same of the same of the same of	 
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis					1. 自然自然 1858.	
		and sales expenses						
	C	Gain or (loss)	0.	0.		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
	a	Net gain or (loss)		·····	0.			
Other Revenue	8a	Gross income from						
Ϋ́		events (not including \$						
Re	ļ	of contributions reported See Part IV, line 18		226,600.				
ē	<b>.</b>	Less. direct expenses.	_	185,124.				5. 4 7
ŧ		Net income or (loss) from			41,476.	41,476		
_	ŀ		_				ক্রিক্রিক্র	
	9a	Gross income from gam						· · · · ·
	b	See Part IV, line 19 Less direct expenses					***	
		Net income or (loss) from		ities ▶	0.			
	l	Gross sales of inve	-					
		returns and allowances						*
	b	Less cost of goods so						
		Net income or (loss) from		ory <b>&gt;</b>	0.			
		Miscellaneous Reve	enue	Business Code				
	11a				0.			
	ь	***************************************			0.	 		
	С				0.			
	d	All other revenue		L	0.			
	е	Total. Add lines 11a-11		▶	0.			
	12	Total Revenue. Add lir						
	l	9c, 10c, and 11e			1,196,485			

### 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). (B) Program service (C) Management and Do not include amounts reported on lines 6b. Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 1,307,423. 1,307,423. organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 0. the U.S. See Part IV. line 22 ..... 3 Grants and other assistance to governments, organizations, and individuals outside the 0. U.S See Part IV, lines 15 and 16 ..... Ō. 4 Benefits paid to or for members ..... Compensation of current officers, directors, 0. trustees, and key employees ....... 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and 0. persons described in section 4958(c)(3)(B) ..... 0. 7 Other salaries and wages ..... Pension plan contributions (include section 401(k) 0. and section 403(b) employer contributions) ..... 0. 9 Other employee benefits ..... 0. 10 Payroll taxes ..... 11 Fees for services (non-employees) 0. a Management ..... 0. **b** Legal ..... 14,000. 14,000. c Accounting ... ..... 0. 0. e Professional fundraising services See Part IV, line 17 0. Investment management fees ..... 236,347. 236,347. **g** Other ..... 0. 12 Advertising and promotion ....... 0. 13 Office expenses ..... 0. Information technology ... ..... 14 0. 15 Royalties ..... 0. 16 Occupancy ..... 0. 17 Travel ..... 18 Payments of travel or entertainment expenses 0. for any federal, state, or local public officials 0. 19 Conferences, conventions, and meetings 0. 20 Interest ....... 0. 21 Payments to affiliates ..... 0. 22 Depreciation, depletion, and amortization 0. 23 Insurance ..... 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.) 185. NYS Tax 185. 115. 115. CT Corp 6,131. Miscellaneous 6,131. С 110. 110. Freight For TShirts d 0. 0. All other expenses 1,564,311. 14,300. 1,307,423. 242,588. Total functional expenses. Add lines 1 through 24f 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 ..... 0.

Form 990 (2008)

2	1	Balance Sheet					
			(A) Beginning of year		Enc	(B) d of yea	r
	1	Cash-non-interest-bearing	466,149.	1		561,	573.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	35,500.	4		113,	200.
	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			
ঠ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
ĕ	9	Prepaid expenses and deferred charges	20,000.	9			0.
	10a	Land, buildings, and equipment cost basis 10a					
	b	Less accumulated depreciation Complete Part VI of Schedule D		10c			0.
	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)		16		674,	773.
	17	Accounts payable and accrued expenses	1	17		14,	175.
	18	Grants payable	1	18			<u> </u>
	19	Deferred revenue	1	19			
	20	Tax-exempt bond liabilities	1	20			
es	21	Escrow account liability Complete Part IV of Schedule D		21	and one are the	e 2	For the same
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		22		· 清明	<b>金金</b>
	23	persons Complete Part II of Schedule L		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D	20,000.	25			0.
	26	Total liabilities. Add lines 17 through 25	20,476.	26		14,	175.
ses		Organizations that follow SFAS 117, check here ▶		( : : e* ≥ ± [			
an	27	Unrestricted net assets	12,500.	27		39,	611.
Ba	28	Temporarily restricted net assets	488,673.	28		620,	987.
פ	29	Permanently restricted net assets	S. Santa and S. Sa	29			
or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				1	
	30	Capital stock or trust principal, or current funds		30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<del></del>		
t A	32	Retained earnings, endowment, accumulated income, or other funds	501 170	32	<del></del>	660	500
Š	33	Total net assets or fund balances	501,173.	33		660,	
11.D	34	Total liabilities and net assets/fund balances	521,649.	34		674,	<u>773.</u>
Re	n A	Financial Statements and Reporting					<del></del>
1	Acco	ounting method used to prepare the Form 990. ☐ Cash 🗓 Accrua	l Other		8.7	Yes	1
2a		e the organization's financial statements compiled or reviewed by an in					X
b		e the organization's financial statements audited by an independent acc				<u> </u>	<del> </del>
С		es" to lines 2a or 2b, does the organization have a committee that assume					
_		udit, review, or compilation of its financial statements and selection of an inde				; X	├
3a		result of a federal award, was the organization required to undergo an					
h		Single Audit Act and OMB Circular A-133?					X
U		oo, ala ino digamzadon unuciyo tilo requiled addit of addito" ,			. 13n	/ I	1

Employer identification number

### 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

Department of the Treasury Internal Revenue Service Name of the organization

100	£ 1	Locker Fo	undation, ir	1C.					52-2.	348625		
		Reasor	for Public Ch	arity Status (All or	ganızatı	ons must	comple	te this p	art ) (see	e instruct	ions)	
The	orga	anization is n	ot a private found	lation because it is. (I	Please ch	neck only	one orga	anization	)			
1	$\prod$	A church, co	onvention of churc	ches, or association o	of church	es descri	oed in se	ction 170	, )(b)(1)(A)	)(i).		
2	П			n 170(b)(1)(A)(ii). (At						•		
3	П			ospital service organi				170(b)(1	I)(A)(iii).	(Attach So	chedule I	H )
4	Ħ			tion operated in conj								
	_		ame, city, and sta									
5	П		•	the benefit of a colle	ae or un	iversity o	wned or o	operated	by a gov	ernmenta	l unit des	scribed in
			(b)(1)(A)(iv). (Co		<b>J</b>				-, - 3			
6	$\Box$			rnment or governmen	ntal unit d	described	ın sectio	n 170(h)	(1)(A)(v)			
7	H			receives a substanti							ho gono	ral public
•	Ш	-	•	1)(A)(vi). (Complete l		no suppo	nt itolli a	governin	iciliai uni	t of front t	ne gene	rai public
8	$\Box$			ın section 170(b)(1)(		Complete	Part II \					
9			-	receives: (1) more th		-	•	m contrib	uitione m	amharch	n foos	and arose
Ū	△			d to its exempt funct								
				ent income and unre								
				after June 30, 1975								
10	П		•	d operated exclusive		•		•	•	\/ <b>/</b> \ /coo	instruction	ane)
11	H			nd operated exclusive								
••	Ш			licly supported organi								
				it describes the type								
		a ∏ Type		• •		oe III–Fur			•		Type II	
•	П			ify that the organiza							, ,,	
е	Ш			ny that the organizati n managers and othe								
		•	section 509(a)(2)	_	i dian on	c or more	publicity	oupporte	a organiz	alions dec	ochbed ii	1 3600011
f			, , , ,		f	45 DC 4		a Tua l	Time II	T	111	
•		_	check this box	a written determinati	on nom	uie iko i	mat it is	атурет	, Type II,	or Type	iii suppi	orung $\Box$
~		· ·	•	the organization acc	ented an	v aift or c	ontributio	on from a	ny of the		• • • • • • • •	· · □
g		following per		the organization aco	cpicu an	y giit oi c	one, ibutio	יווטווו נ	any or the	•		
				indirectly controls, e	other alo	ne or ton	ether wit	h nerson	e describ	ed in (ii)	[·	Yes No
				ning body of the sup							11g(i)	
		, ,	· -	son described in (i) al		-					11g(ii)	
				f a person described							11g(m)	
h				ition about the organ							<u> </u>	<del></del>
(i) I	 Vame	of supported	(ii) EIN	(iii) Type of organization		organization		ou notify	(vi)	Is the	(vii) An	nount of
• • •		anization	\	(described on lines 1-9		sted in your		ization in	organiza	tion in col		port
			1	above or IRC section (see Instructions))	governing	document?		of your port?		zed in the		
				(,	Yes	No	Yes	No	Yes	No		
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Tota	ſ									***		0.

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<u> </u>	(Complete only if you check	ked the box	on line 5. 7. d	or 8 of Part I	) )	and iro(b)(i	)(A)(VI)
Sec	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")						0.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			<del></del>			0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1-3	0.	0.	0.	0.	0.	<u> </u>
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
_6	Public support. Subtract line 5 from line 4				Salezie. A		0.
	tion B. Total Support		···			<del></del>	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	0.	0.	0.	0.	0.	0.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carned on			-	,		0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		and the facility when the second of				0.
11	Total support. Add lines 7 through 10						0.
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for organization, check this box and stop he	the organization	on's first, secon	d, third, fourth	or fifth tax ye		
Sec	tion C. Computation of Public Sur						
14	Public support percentage for 2008 (line 6			column (ft)		14	0.0000%
15	Public support percentage from 2007 Sche				i	15	%
16a	331/3% support test—2008. If the organization qualifies	zation did not c s as a publicly	heck the box of supported orga	n line 13, and land land	ine 14 is 331/3 9		▶ 📋
b	33%% support test—2007. If the organization q						
17a	10%-facts-and-circumstances test—200 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	acts-and-circum	istances" test, c	heck this box a	and stop here.	Explain in Part I	V how the
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumstances test—2007 private foundation. If the organization did	acts-and-circum ances" test The	istances" test, c organization qu	theck this box a ralifies as a pub	and <b>stop here.</b> I blicly supported	Explain in Part I	V how the ······▶

### Schedule A (Form 990 or 990-EZ) 2008 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (

360	doli A. Public Support							
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,352,220.	1,323,316.	1,106,255.	1,374,120.	1,04	7,394.	6,203,305.
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	230,750.	247,250.	236,500.	219,750.	209	,500.	1,143,750.
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0.
6	<b>Total.</b> Add lines 1-5	1,582,970.	1,570,566.	1,342,755.	1,593,870.	1,256	<u>,894.</u>	7,347,055.
	Amounts included on lines 1, 2, and 3 received from disqualified persons							0.
D	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							0.
8 8	Add lines 7a and 7b	0.	0.	0.	0.		0.	7,347,055.
Sec	tion B. Total Support	real results and the contract of the contract	Virter Charles Elevis			THE PERSON NAMED IN		7,347,035.
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2	2008	(f) Total
9	Amounts from line 6		1,570,566.					
-								0.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							0.
с 11	Add lines 10a and 10b	0.	0.	0.	0.		0.	0.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					<del>-</del>		0.
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)							7,347,055.
14	First five years. If the Form 990 is for organization, check this box and stop	. •	n's first, secon		•			, , , , , , , ,
Sec	tion C. Computation of Public Sup							
15 46	Public support percentage for 2008 (line					15		0.0000 %
16 Sect	Public support percentage from 2007 Setion D. Computation of Investmen			<u> </u>	<u></u>	16	4	8.3925 <b>%</b>
<u>360</u> 17	Investment income percentage for 2008			by line 13, colu	ımn (fl)	17		0.0000 %
18	Investment income percentage from 20	•	• •	-	•••	18		%
19a	331/3 % support tests—2008. If the org						ın 33 1⁄4	
	17 is not more than 331/3%, check this b							
b	33 1/3 % support tests—2007. If the organ line 18 is not more than 33 1/3 %, check this	nization did not	check a box on	line 14 or line	19a, and line 1	6 is mo	re than	331/3%, and
20	Private foundation. If the organization						_	
								0 or 990-EZ) 2008

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12 Provide any other additional information. (see instructions)

Notes to Financial Statements
January 31, 2009 and February 2, 2008

### (5) Related-Party Transactions

The Foundation's Board of Directors is comprised of three members of FLI management. FLI donated \$323,111 and \$271,250 in 2008 and 2007, respectively, to the Foundation. These donations were distributed to various organizations.

### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

OMB No 1545-0047
2008

Department of the Treasury Internal Revenue Service 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.

Name of the organization Employer identification number Foot Locker Foundation, Inc. 52-2348625 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts Total number at end of year ..... 2 Aggregate contributions to (during year) Aggregate grants from (during year) ... Aggregate value at end of year ...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ...... Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other ımpermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements ..... 2b Total acreage restricted by conservation easements ...... 2c Number of conservation easements on a certified historic structure included in (a) ........ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located ▶ \_\_\_ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ \_\_\_\_ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ...... In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Te grath Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide the following amounts relating to these items. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 ...... 

Sche	dule D (Form 990) 2008				Page 2
	Organizations Maintainin	g Collections of Art, I	Historical Treasure	es, or Other Similar A	ssets (continued)
3	Using the organization's accession a items (check all that apply)	nd other records, check	any of the following	g that are a significant i	use of its collection
а	Public exhibition	(	Loan or exc	hange programs	
b	Scholarly research		<del></del>		
С	Preservation for future generation	ns `	,		
4	Provide a description of the organiza Part XIV.		xplain how they furt	her the organization's ex	xempt purpose in
5	During the year, did the organization so assets to be sold to raise funds rather to	licit or receive donations han to be maintained as	of art, historical treas	sures, or other similar on's collection?	Yes No
1. 1	Trust, Escrow and Custod Part IV, line 9, or reported a			on answered "Yes" to F	orm 990,
	Is the organization an agent, trustee, included on Form 990, Part X?			utions or other assets no	ot Yes No
b	If "Yes," explain the arrangement in Pa	art XIV and complete the	following table		nount
					lount
C	Beginning balance				
d	Additions during the year			1 . 1	
е	Distributions during the year				
f	Ending balance				<del></del>
2a b	Did the organization include an amount of "Yes," explain the arrangement in Page 1997.		ine 21?		☐ Yes ☐ No
1	Endowment Funds. Com	plete if organization a	nswered "Yes" to F	Form 990, Part IV, line	10
				ars back (d) Three years back	(e) Four years back
1a	Beginning of year balance				(e) Four years back
1a b	Beginning of year balance				(e) Four years back
					(e) Four years back
b	Contributions				(e) Four years back
b c	Contributions				(e) Four years back
b c d	Contributions				(e) Four years back
b c d e	Contributions				(e) Four years back
b c d e	Contributions				(e) Four years back
b c d e f g	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance				(e) Four years back
b c d e f g	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the	ne year end balance held			(e) Four years back
b c d e f g 2 a	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment	ne year end balance held			(e) Four years back
b c d e f g 2 a b	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment	ne year end balance held			(e) Four years back
b c d e f g 2 a b	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Permanent endowment Term endowment	ne year end balance held	d as.		(e) Four years back
b c d e f g 2 a b c	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Permanent endowment Term endowment  Are there endowment funds not in the porganization by	ne year end balance held  >	d as.	d administered for the	(e) Four years back
b c d e f g 2 a b c 3a	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Term endowment   Are there endowment funds not in the porganization by  (i) unrelated organizations  (ii) related organizations	ne year end balance held	d as.	d administered for the	(e) Four years back
b c d e f g 2 a b c 3a	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Term endowment   Are there endowment funds not in the porganization by  (i) unrelated organizations  (ii) related organizations	ne year end balance held	d as.	d administered for the	Yes No
b c d e f g 2 a b c 3a	Contributions	ne year end balance held	d as.	d administered for the	Yes No  3a(i)  3a(ii)
b c d e f g 2 a b c 3a	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Permanent endowment Term endowment \( \bigsim \) Are there endowment funds not in the porganization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organication because in Part XIV the intended uses	ne year end balance held  ———————————————————————————————————	d as.  d on Schedule R?	d administered for the	Yes No  3a(i)  3a(ii)
b c d e f g 2 a b c 3a	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Permanent endowment Term endowment  Are there endowment funds not in the porganization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organication bescribe in Part XIV the intended uses	ne year end balance held  ———————————————————————————————————	d as.  d on Schedule R?	d administered for the	Yes No  3a(i)  3a(ii)
b c d e f g 2 a b c 3a b 4	Contributions Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Term endowment   Are there endowment funds not in the porganization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organication be in Part XIV the intended used investments—Land, Buil	ne year end balance held	d as.  d on Schedule R?  ndowment funds  nt. See Form 990,  (b) Cost or other	d administered for the Part X, line 10.	Yes No  3a(i)  3a(ii)  3b

Schedule D (Form 990) 2008			Page 3
Investments — Other Securities	s. See Form 990, Part X	ine 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	ation rket value
Financial derivatives and other financial products	! 		
Closely-held equity interests			
Other			
		<del> </del>	
***************************************	<del></del>		<del></del>
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12)	0.		
Investments—Program Relate	d. See Form 990, Part	X, line 13	adiculation and the same and the data and and and and and and and and and an
(a) Description of investment type	(b) Book value	(c) Method of valu	ation
		Cost or end-of-year ma	rket value
		<del> </del>	
		<del> </del>	
		<del>                                     </del>	
	<u> </u>		· <del></del>
		<del></del>	
		<del> </del>	
Total (Column (b) should equal Form 990, Part X, col. (B) line 13)	0.		
Other Assets. See Form 990, Pa		All the second of the second o	to state (tage) to cape to be an equipped (in
	(a) Description		(b) Book value
		· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·			
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)			0.
Other Liabilities. See Form 990,			
(a) Description of liability	(b) Amount		
Federal income taxes			
Other Liabilities Due to Foot Locker Inc.	20,000.		
		<del></del>	
			No.
			4
Total (Column (h) phould agual Four 200 D-4 V and (f) 5-2 05 1	20,000.		21
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	20,000.	the second secon	The second of the second

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scne	aule D (Form 990) 2008				Page 4
	Reconciliation of Change in Net Assets from Form 990	to Fin	ancial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,196,485.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	1,564,311.
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-367,826.
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	80,834.
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	80,834.
10	Excess or (deficit) for the year per financial statements. Combine lines 3			10	-286,992.
1	Reconciliation of Revenue per Audited Financial State	ement	s With Revenue		
1	Total revenue, gains, and other support per audited financial statements			1	443,960.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a	<u>-</u>		
b	Donated services and use of facilities	2b	80,834.		
C	Recoveries of prior year grants	2c	<del></del>		
d	Other (Describe in Part XIV)	2d	185,124.		
е	Add lines 2a through 2d			2e	265,958.
3	Subtract line 2e from line 1			3	178,002.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 010 400		
b	Other (Describe in Part XIV)	4b	1,018,483.	_	
_	Add lines 4a and 4b			4c	1,018,483.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 1			5	1,196,485.
	Reconciliation of Expenses per Audited Financial State	temen	ts with Expense	es per	
1	• • • • • • • • • • • • • • • • • • • •	· · · · ·			416,849.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	2-	, 00 034		
<b>a</b>	Donated services and use of facilities	2a   2b	80,834.		
b	Prior year adjustments	2c		- 1	
C	Losses reported on Form 990, Part IX, line 25	2d	185,124.		
ď	Other (Describe in Part XIV)			2e	265,958.
	Add lines 2a through 2d			3	150,891.
3	Subtract line 2e from line 1		• • • • • • • • • • • • • • • • • • • •	3	130,031.
4_	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a	1,011,423.		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4b	401,996.		
D	Other (Describe in Part XIV)	_ <del>-</del> TU_	301/330.	4c	1,413,419.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990. Part	I. line 1		5	1,564,310.

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Supplemental Information

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

Department of the Treasury Internal Revenue Service

### Supplemental Information Regarding

Fundraising or Gaming Activities

Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization Foot Locker Foundation, In	nc.				Employer identifit 52-234862	
Fundraising Activitie	s. Complete if	the orga	nızation a	answered "Yes"	to Form 990, Part	IV, line 17.
<ul> <li>Indicate whether the organization mail solicitations email solicitations phone solicitations in-person solicitations</li> <li>Did the organization have a writte or key employees listed in Form</li> <li>If "Yes," list the ten highest paid to be compensated at least \$5,0</li> </ul>	en or oral agreer 990, Part VII) or I individuals or	nent with a entity in c	solicita solicita solicita special any individi connection undraisers	tion of non-goveri tion of governmer I fundraising event ual (including office with professional ) pursuant to agre	nment grants  at grants  as  ars, directors, trustee fundraising activities  aments under whic	es s?
(i) Name of individual or entity (fundraiser)	(ii) Activity	custody or	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
,	<del> </del>			,	,	
	· · · · · · · · · · · · · · · · · · ·					
'					,	
	<u>-</u>					
Total		<u> </u>		0.	0.1	0.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Page 2	
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Sch	edule	G (Form 990 or 990-EZ) 2008				Page 2
		Fundraising Events. C more than \$15,000 on F	omplete if the organization 990-EZ, line 6a 1	ation answered "Yes" t ist events with gross i	o Form 990, Part IV, lir receipts greater than \$	ne 18, or reported 5,000
			(a) Event #1 On Our Feet (event name)	(b) Event #2	(c) Other Events (total number)	(d) Total Events (sum of (a)-(c))
Revenue	1	Gross receipts	1,003,983.			1,003,983.
æ	2	Less (Charitable contributions)	777,383.			777,383.
	3	Gross revenue (line 1 minus line 2)	226,600.	0.	0.	226,600.
	4	Cash prizes			<u> </u>	0.
nses	5	Non-cash prizes				0.
Direct Expenses	6	Rent/Facility costs				0.
Direc	7	Other direct expenses	185,124.			185,124.
	8 9	Direct expense summary (Su Net Income Summary. (Enter Gaming. Complete if	the difference between	lines 3(d) and 8(d)) .		185, 124. 41, 476. or reported more
		than \$15,000 on Form		(b) Pull tabs/instant		(d) Total gaming (sum
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	of (a)-(c))
 	1	Gross Revenue				0.
ses	2	Cash Prizes				0.
Direct Expenses	3	Non-Cash Prizes				0.
Direct	4	Rent/Facility Costs				0.
	5	Other Direct Expenses	Yes %	Yes %	Yes %	0.
	6	Volunteer Labor	Yes% No	Yes%	Yes%	
	7	Direct expense summary (Su	ım lines 2-5, column (d))			0.
	8	Net gaming income summary	(Enter the difference be	etween lines 1(d) and 7(	(d))▶	0.
9 a b	Is If '	nter the state(s) in which the control the organization licensed to control the explain.  The ere any of the organization's explain the organization's explain.	operate gaming activities	s in each of these state		Yes No 9a 10a
	If '	Yes," Explain.  Des the organization operate of the organization a grantor, be med to administer charitable	gaming activities with no eneficiary or trustee of a	onmembers?	a partnership or other o	11
			_		Schodula C (E	orm 900 or 900 EZ\ 2009

Dago	•
Page	•

			Yes	No
13	Indicate the percentage of gaming activity operated in			
а	The organization's facility			
	An outside facility			
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records			
	Name			
	Address:			1.075
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address:			
	Name.			
	Address			h
16	Gaming Manager Information			
	Name			
	Gaming Manager Compensation \$			
	Description of Services Provided.			
	☐ Director/Officer ☐ Employee ☐ Independent Contractor			
17 a	Mandatory Distributions  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$			

Schedule G (Form 990 or 990-EZ) 2008

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Foot Locker Foundation, Inc.

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

OMB No 1545-0047

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

► Attach to Form 990.

Employer identification number 52-2348625 **2** □

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ....... General Information on Grants and Assistance

X Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Schedule I-1 (Form 990) if additional space is needed

	do 15110111111111111111111111111111111111						
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Negro College Fund	13-1624241		1,036,423.				
American Cancer Society	16-0743902		.000,000				
American Heart Association	13-5613797		30,000.				
American Jewish Committee	13-5563393		10,000.				
Arthur Ashe Foundation	11-3185372		9,000.				
Big Brother Big Sister	13-5600383		10,000.				
вкас	13-3350163		15,000.				
Fresh Air Fund	13-1656653		10,000.				
							15 15 15 15
NIAF East Coast Gala	52-1071723		10,000.				
St Francis Hospital Foundation	11-2050523		17,000.				
The ARC of Palm Beach County	59-0883386		. 15,000.				
2 Enter total number of section 501(c)(3) and government organizati	01(c)(3) and gover	nment organization	lons			•	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations ......

Schedule I (Form 990) 2008

Page 2

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Schedule I (Form 990) 2008

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. 

	(f) Description of non-cash assistance					Itional information
	(e) Method of valuation (book, FMV, appraisal, other)					provide the information required in Part I, line 2, and any other additional information
	(d) Amount of non-cash assistance					required in Part I, III
gea.	(c) Amount of cash grant	,				ide the information
nai space is nee	(b) Number of recipients					this part to prov
Use ochedule I-1 (nomi 990) il additional space is needed.	(a) Type of grant or assistance					Supplemental Information. Complete this part to
						1

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SCHEDULE 1-1 (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

Employer identification number

Schedule I-1 (Form 990) 2008 (h) Purpose of grant or assistance 52-2348625 (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II (f) Method of valuation (book, FMV, appraisal, other) (c) IRC Code section (d) Amount of cash grant (e) Amount of non-cash if applicable : 20,000. 10,000. 15,000. Enter total number of Section 501(c)(3) and government organizations 22-2579809 65-0282384 23-7380557 (p) EIN Enter total number of other organizations Foot Locker Foundation, Inc. (a) Name and address of organization Two Ten Footwear United Community or government Women's Sports Foundation Foundation Centers

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

BKA WK8 P FDY192-001 1

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Schedule 1-1 (Form 990) 2008

Page 2 Schedule I-1 (Form 990) 2008 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III.) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

### SCHEDULE O (Form 990)

### Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047
2008

Department of the Treasury Internal Revenue Service Name of the organization

Foot Locker Foundation, Inc.

Employer Identification number 52-2348625

Part VI, Item 2 - All of the officers and directors of the Foundation are employees of Foot Locker, Inc.

Part VI, Item 7(a) - All of the directors of the Foundation are selected by the senior officers of Foot Locker, Inc.

Part VI, Item 8 - Board minutes are prepared annually.

Part VI, Item 10 - All directors sign and review the audited financial statements of the Foundation. They then require the responsible tax officer of the Foundation to prepare the Form 990 in a manner consistent with those financial statements

Part VI, Item 12 - The officers and directors of the Foundation are all employees of Foot Locker, Inc. and are all bound by the Foot Locker, Inc., Code of Conduct. Each officer and directors must review this policy every year and certify that they are in compliance with it.

Part VI, Items 13 & 14 - The Foundation's directors and officers are all bound by the whistleblower and document retention policies of Foot Locker, Inc.

Part VI, Item 15 - No director or officer receives any compensation from the Foundation and the Foundation has no employees.

### SCHEDULE R (Form 990)

Foot Locker Foundation, Inc.

Name of the organization

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ See separate instructions.

Employer identification number

52-2348625

Schedule R (Form 990) 2008 (F)
Direct controlling
entity (F) Direct controlling entity (E)
Public chanty status
(if section 501(c)(3)) (E) End-of-year assets (D) Exempt Code section (D) Total income Legal domicile (state or foreign country) Legal domicile (state or foreign country) <u></u> Primary activity Primary activity <u>@</u> For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. BKA weep FDV192-001 1 Identification of Related Tax-Exempt Organizations (A) Name, address, and EIN of related organization Identification of Disregarded Entities (A)Name, address, and EIN of disregarded entity Er are

Page 2

Schedule R (Form 990) 2008

Identification of Related Organizations Taxable as a Partnership

(J) General or managing partner?	Yes No		 		
(I) Code V—UBI Ge amount in box 20 of mis Schedule K-1 pr (Form 1065)	<b>X</b>				
(H) Disproportionate allocations?	S		 		
Disprop alloca	Yes			 	
(G) Share of end-of-year assets					
(F) Share of total income					
(E) Predominant income (related, investment, unrelated).					
(D) Direct controlling entity					
(G) Legal domicile (state or foreign country)					
(B) Primary activity					
(A) Name, address, and EIN of related organization					

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entry (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
Foot Locker, Inc. 112 W 34th Street New York, NY 10120	retailer	ÄÑ	N/A	C corp	0.	0	0.0000\$

Identification of Related Organizations Taxable as a Corporation or Trust

Schedule R (Form 990) 2008

## Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV		Å	Yes No	_
	Parts II–IV?	,	>	
a Receipt of (I) Interest (II) annuities (III) royalties (IV) rent from a controlled entity		: - <del>2</del>	<×	1
Gift, grant, or capital contribution from other organization(s)		⊢	×	1
		19	×	
		-1e	×	l
f Sale of assets to other organization(s)		16	×	
q Purchase of assets from other organization(s)		19	×	
Exchange of assets		<b>+</b>	×	
		<b>-</b>	×	
				4.2
j Lease of facilities, equipment, or other assets from other organization(s)		<b>;</b> -	×	ı
k Performance of services or membership or fundraising solicitations for other organization(s)		$\pm$	×	1
I Performance of services or membership or fundraising solicitations by other organization(s)			×	ŀ
m Sharing of facilities, equipment, mailing lists, or other assets		<b>E</b> .	×	ı
n Sharing of paid employees		- 1 <sub>n</sub>	×	
			;	
		<u>o</u> ;	<b>&lt;</b>  >	.1
p Reimbursement paid by other organization for expenses		d -	<	
		10	×	
y Ouriel transfer of dash of property from other organization(s)		? <b>-</b> =	×	.
or information on who must complete this line, including	covered relationships and transaction thresholds.	nsaction threa	sholds.	.
(A) Name of other organization(s)	(B) Transacton type (a-r)	(C) Amount involved	olved	
				ı
(1) Foot Locker Inc.	U	323	3,111	:1
(2) Foot Locker Inc.	-г	80	0,834	
(3)				
. (4)				]
(9)				
(9)				
	THE STATE OF THE S			ì

Schedule R (Form 990) 2008

Page 4

Schedule R (Form 990) 2008

# Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Primary activity	(A) (B) (D)	(8)	(C)	(a)		(E)	(F)	ı	Ξ	
Ace No Ves No Ve	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all par section 501(c)( organization		Share of nd-of-year assets	Disproporti		 General or managini partner?	ב פ
					9		Yes	9	 Yes	ام ِ
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**Financial Statements** 

January 31, 2009 and February 2, 2008

(With Independent Auditors' Report Thereon)



KPMG LLP 345 Park Avenue New York, NY 10154

### Independent Auditors' Report

The Board of Directors Foot Locker Foundation, Inc.:

We have audited the accompanying statements of financial position of Foot Locker Foundation, Inc. (the Foundation) as of January 31, 2009 and February 2, 2008, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Foundation's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Foot Locker Foundation, Inc. as of January 31, 2009 and February 2, 2008, and the changes in its net assets and its cash flows for the years then ended in conformity with U.S. generally accepted accounting principles.

KPMG LLP

August 14, 2009

### Statements of Financial Position January 31, 2009 and February 2, 2008

Assets	_	January 31, 2009	February 2, 2008
Cash Contributions receivable Prepaid expenses	\$	561,573 113,200	466,149 35,500 20,000
Total assets	\$ _	674,773	521,649
Liabilities and Net Assets			_
Liabilities: Accounts payable and accrued expenses Due to Foot Locker, Inc. Due to beneficiaries	\$ _	14,175 ————————————————————————————————————	476 20,000 488,673 509,149
Net assets – unrestricted	_	39,611	12,500
Total liabilities and net assets	\$ _	674,773	521,649

See accompanying notes to financial statements.

### Statements of Activities

Years ended January 31, 2009 and February 2, 2008

		January 31, 2009			February 2, 2008	
	Unrestricted	Temporarily restricted	Total	Unrestricted	Temporarily restricted	Total
Revenues						
Foot Locker, Inc contributions Donated goods and services	\$ 323,111 120,849		323,111 120,849	271,250 164,084	<del>-</del>	271,250 164,084
	443,960		443,960	435,334		435,334
Special event						
Contributions raised for the event	_	1,003,983	1,003,983	_	1,121,714	1,121,714
Contributions held for distribution to the beneficiaries	_	(601,987)	(601,987)	_	(647,969)	(647,969)
Contributions retained for expenses		(401,996)	(401,996)		(473,745)	(473,745)
Expenses						
Donated goods and services	120,849	_	120,849	164,084	_	164,084
Grants and awards	296,000		296,000	258,750		258,750
	416,849		416,849	422,834		422,834
Increase in net assets	27,111	-	27,111	12,500	_	12,500
Net assets at beginning of year	12,500		12,500		<del></del>	
Net assets at end of year	\$ 39,611		39,611	12,500		12,500

See accompanying notes to financial statements

### Statements of Cash Flows

Years ended January 31, 2009 and February 2, 2008

	January 31, 2009	February 2, 2008
Cash flows from operating activities:		
Increase in net assets	\$ 27,111	12,500
Adjustments to reconcile increase in net assets		
to net cash provided by operating activities:		
Change in assets and liabilities:		
(Increase) decrease in contributions receivable	(77,700)	176,080
Decrease (increase) in prepaid expenses	20,000	(20,000)
Increase (decrease) in accounts payable and		
accrued expenses	13,699	(6,409)
Increase (decrease) in due to beneficiaries	132,314	(59,027)
(Decrease) increase due to Foot Locker, Inc.	 (20,000)	20,000
Net cash provided by operating activities	95,424	123,144
Cash at beginning of year	 466,149	343,005
Cash at end of year	\$ 561,573	466,149

See accompanying notes to financial statements.

Notes to Financial Statements

January 31, 2009 and February 2, 2008

### (1) Description of Organization

Foot Locker Foundation, Inc. (the Foundation) is a Delaware not-for-profit organization, recognized under Section 501(c)(3) of the Internal Revenue Code (the Code) established on October 23, 2001 for purposes of receiving, maintaining and disbursing funds for sponsoring and encouraging charitable, educational and athletic activities.

The Foundation is committed to supporting youth, athletics, education, and the communities in which Foot Locker, Inc. (FLI) has operations. The Foundation is dependent on the continued financial and administrative support of FLI. FLI has committed that it will provide support to the Foundation sufficient for it to satisfy its obligations as they come due, until January 31, 2010, and will satisfy on a timely basis all liabilities and obligations of the Foundation that the Foundation is unable to satisfy when due, from the date of this letter through and including January 31, 2010. In addition, FLI will not require the repayment of any loans or advances that FLI (or any of its subsidiaries) may provide until subsequent to January 31, 2010.

The Foundation holds an annual "On Our Feet" event for a sole beneficiary. The beneficiary of the 2008 and 2007 events was the United Negro College Fund (UNCF). In addition, the Foundation made contributions to other organizations, which were funded by donations from FLI.

### (2) Significant Accounting Policies

### (a) Basis of Presentation

The accompanying financial statements of the Foundation have been prepared on the accrual basis of accounting. The Foundation's net assets, revenues, and expenses are classified based on the existence and absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified as follows:

- Temporarily restricted net assets net assets subject to donor-imposed stipulations that will be met either by actions of the Foundation and/or the passage of time.
- Unrestricted net assets net assets not subject to donor-imposed stipulations.

5

Unconditional promises to give cash and other assets to the Foundation are reported at fair value at the date the promise is received. In the absence of a promise, unconditional contributions are reported at fair value at the date the gift is received. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the purpose of the donated assets or impose a time restriction. The Foundation does not have any temporarily or permanently restricted assets. When a donor restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified as unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Donor-restricted contributions, whose restrictions are met within the same year as received, are reported as unrestricted contributions in the accompanying financial statements.

(Continued)

Notes to Financial Statements

January 31, 2009 and February 2, 2008

Donors' response to the request of the Foundation to the 2008 and 2007 "On Our Feet" events indicated that the proceeds of the campaign would be distributed to UNCF as the beneficiary of these events. At January 31, 2009, the Foundation owed UNCF \$620,987 for 2008 and 2007 events. At February 2, 2008, the Foundation owed UNCF \$488,673 for the 2007 and 2006 events.

Donated goods and services are recognized as revenue and expenses at the fair value of those goods and services provided to the Foundation. The fair value of the services received from FLI employees is calculated based on the employees' compensation. These services meet the criteria for recognition under Financial Accounting Standards Board Statement No. 116, Accounting for Contributions Received and Contributions Made. FLI employees performed certain administrative services, whose fair value was determined to be \$80,834 and \$74,194, in 2008 and 2007, respectively. In addition, certain third parties contributed goods for the "On Our Feet" event whose fair value was determined to be \$40,015 and \$89,890 in 2008 and 2007, respectively. The fair value ascribed to these goods was determined by calculating the difference between the market value of the goods provided and the fair value of the "On Our Feet" tickets given to the vendors in exchange for these goods.

### (b) Reporting Period

The reporting period for the Foundation is the Saturday closest to the last day in January. References to years in these financial statements relate to fiscal years rather than calendar years.

### (c) Accounting Estimates

The preparation of financial statements in accordance with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingencies at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

### (d) New Accounting Pronouncements

In June 2006, FASB issued Interpretation No. 48, Accounting for Uncertainty in Income Taxes – An Interpretation of FASB Statement No. 109 (FIN 48). FIN 48 clarifies the accounting for uncertainty in income taxes recognized in an entity's financial statements. FIN 48 requires entities to determine whether it is more-likely than-not that a tax position will be sustained upon examination by the appropriate taxing authorities before any part of the benefit can be recorded in the financial statements. FIN 48 is effective for the Foundation's January 30, 2010 financial statements. The adoption of FIN 48 is not expected to have a significant impact on the Foundation's financial statements.

### (3) Contribution Receivable

Contributions receivable are expected to be collected within 12 months of the end of each year.

### (4) Federal Income Taxes

The Foundation is recognized under Section 501(c)(3) of the Internal Revenue Code (the Code) and is therefore exempt from Federal income taxes pursuant to Section 501(a) of the Code.

6 (Continued)