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A For the 2008 calendar year, or tax year beginning 10-01-2008 and ending 09-30-2009

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2008

OMB No 1545-0047

Open to Public Inspection

B Che	eck if a	pplicable	Please	C Name of organization			D Employer ide	entification number
	tress cl		use IRS	INTERNATIONAL FOUNDATION FO SYSTEMS	OR ELECTORAL		52-152783	5
┌ Nai	me cha	nge	label or print or	Doing Business As			E Telephone nu	ımber
┌ Init	ıal retu	rn	type. See Specific	Number and street (or P.O. boy	ıf maıl ıs not delivered to street addre	see) Doom/suite	(202) 350-6	
Г тег	mınatı	on	Instruc- tions.	1850 K STREET NW	ii maii is not delivered to street addre	.33) ROOM, suite	G Gross receipt	t s \$ 69,528,567
_	ended			City or town, state or country, ai	nd ZIP + 4			
		n pending		WASHINGTON, DC 20005				
			F Nan	Lond address of Principal O	fficer	W/a) Takk		£
			WILLIA	AM R SWEENEY JR		affilia	s a group return tes?	Yes V No
				(STREET NW 5TH FLOOR NGTON,DC 20005				
I Ta	x-exen	npt status	•) (3) 4 (insert no)	(1) or		l affiliates include	ed?
J W	eb sit	e: ► HT	TP //WWW	IFES ORG		-	p Exemption Nu	
<u>к</u> Тур	e of or	ganızatıon	▽ Corporat	ion trust association other	· F	L Year of For	rmation 1905 M	State of legal domicile DC
Pa		Sum						
	1	•		e organization's mission or m	ost significant activities CRACY WORLDWIDE THROUG	CH DDOVIDIN	IC TECHNICAL	A CCICTA NCE IN
စ္		VOTER	EDUCATI		RATION, CIVIL SOCIETY, GO			
Œ		PROCE	SSES					
ē			_				_	
Governance	2		•		ed its operations or disposed o			
26	3				ly (Part VI, line 1a)		_	2 <u>4</u> 24
Activities	4		•	-	overning body (Part VI, line 1	b)	_	24 225
<u> </u>	5			nployees (Part V, line 2a) .			5 _	0
ခု	6			olunteers (estimate if necessa ted business revenue from Pa		о _ 7а		
		_		ness taxable income from Fo	•	7a _ 7b	<u> </u>	
					Prio	or Year	Current Year	
	8	Contri	butions and	d grants (Part VIII, line 1h)			57,830,088	69,010,637
≗	9			revenue (Part VIII, line 2g)		, ,	0	
Raveni	10	Invest	tment incor	me (Part VIII, column (A), lın		89,823	17,272	
芒	11	Other	revenue (P	art VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e)			0
	12		revenue—a	dd lınes 8 through 11 (must e	qual Part VIII, column (A), lın	е	F7.010.011	60.037.000
-	12	12)	d l -	ar amounts paid (Part IX, colu	(A.) lines 1 3)		57,919,911	69,027,909
	13 14			or for members (Part IX, colu			12,896,268	3,546,876
	15				its (Part IX, column (A), lines	5-		
82		10)	es, other ee	ompensation, employee belief	<u> </u>	17,589,962	23,891,218	
Expenses	16a	Profes	sional fund	raising fees (Part IX, column	(A), line 11e)			0
ਡੌ	ь	(Total f	undraising exp	penses, Part IX, column (D), line 25	0)			
	17	Other	expenses ((Part IX, column (A), lines 11	a-11d, 11f-24f)		26,984,971	40,356,085
	18				Part IX, line 25, column (A))		57,471,201	67,794,179
. 07	19	Reven	ue less exp	penses Subtract line 18 from	line 12		448,710	1,233,730
8 0 9 0 10 0						Beginni	ng of Year	End of Year
SS el	20		•	rt X, line 16)			14,884,008	19,738,081
Net Assets or Fund Balances	21	Totall	liabilities (F	Part X, line 26)			10,764,843	14,378,298
	22			d balances Subtract line 21	from line 20		4,119,165	5,359,783
Pai	rt II		ature Blo					
					ed this return, including accompanying if preparer (other than officer) is base			
Plea	se	lk –				2010-	-08-13	
Sign		Sıgn	ature of office	er		Date		
Here	e			BRYAN VP/CFO				
		Тур	e or print nam	e and title				
		Preparer		J TRIMNER		Check if self-	Preparer's PTIN ((See Gen Inst)
Paid		signature	e P DAVID	2 TATABLE		empolyed 🕨 🦵		
•	arer's	1	ame (or yours	ARGY WILTSE & ROBINSON PC			EIN Þ	_
Use (Only		mployed), and ZIP + 4	8405 GREENSBORO DRIVE 7TH	I FLOOR			
				MCLEAN, VA 22102			Phone no 🕨 (7	03) 893-0600
May	the IR	S discus	s this retu	·	ove? (See instructions)			✓ Yes No

Part III Statement of Program Service Accomplishments (See the instructions.)

the proof promised on undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? 11 "Yes No If "Yes Secribe these may services on Schedule O 3 Did the organization cease conducting or make significant changes in how it conducts any program services by expenses services? 11 "Yes No If "Yes Secribe these changes on Schedule O 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501 (c)(3) and (4) organizations and 4947 (a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4 (Code) (Expenses 1 10,341,767 including grants of 3) (Revenue 3) FES provides technical election support 10 IHEC (International High Elections Commission) their provides education, and tracking of post election violence 4 (Code) (Expenses 1 17,716,559 including grants of 3) (Revenue 3) FES provides technical election support ANO EDUCATION to the Afghamistan Elections commission 4 (Code) (Expenses 1 2,398,369 including grants of 3 31,633) (Revenue 5) PES provides technical election support ANO EDUCATION to the Fakstain Elections commission		Briefly describe the organization IFES IS DEDICATED TO EXTENI ADMINISTRATION, CIVIL SOCIE	DING DEMOCRACY WO	RLDWIDE THROUGI LE OF LAW, AND PO	H PROVIDING TECHNICAL AS DLITICAL PROCESSES	SISTANCE IN THE AREAS OF VOTI	ER EDUCATION, ELECTION
3 Did the organization cease conducting or make significant changes in how it conducts any program services? 17 Yes No 17 Yes No 18 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 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 \$ 10,341,767 including grants of \$) (Revenue \$) IPES provides technical election support TO INEC (International High Elections Commission) their provides education, and tracking of post election volence. 4b (Code) (Expenses \$ 17,216,529 including grants of \$) (Revenue \$) IPES provides technical election support AND EDUCATION to the Alghamistan Elections commission 4c (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) PES provides technical election support AND EDUCATION to the Pakestan Elections commission 4d Other program services (Describe in Schedule O)	2			ant program se	rvices during the year v	which were not listed on	┌ Yes ┌ No
services?		If "Yes," describe these	new services on S	chedule O			
Section 501 (c)(3) and (4) organizations and 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 (Code) (Expenses \$ 10,341,767 including grants of \$) (Revenue \$) (FES provides technical election support To THEC (International High Elections Commission) lines provides education, and tracking of post election violence (Code) (Expenses \$ 17,216,529 including grants of \$) (Revenue \$) (FES provides technical election support AND EDUCATION to the Afghanistan Elections commission (Code) (Expenses \$ 17,216,529 including grants of \$) (Revenue \$) (Code) (Expenses \$ 17,216,529 including grants of \$) (Revenue \$) (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$)	3	services?			changes in how it cond	lucts any program · · · · · · ·	┌ Yes ┌ No
Section 501(c)(3) and (4) organizations and 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 \$ 10,341,767 including grants of \$) (Revenue \$) If Expenses \$ 10,341,767 including grants of \$) (Revenue \$) If Expenses \$ 17,216,529 including grants of \$) (Revenue \$) If Expenses \$ 17,216,529 including grants of \$) (Revenue \$) If Expenses \$ 17,216,529 including grants of \$) (Revenue \$) If Expenses \$ 17,216,529 including grants of \$) (Revenue \$) If Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) If Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) If Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) If Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$)		If "Yes," describe these	changes on Sched	ule O			
### TES provides technical election support TO IHEC (International High Elections Commission) their provides education, and tracking of post election violence ##################################	4	Section 501(c)(3) and (4	4) organızatıons ar	nd 4947(a)(1) t	rusts are required to re	port the amount of grants a	
### IFES provides technical election support AND EDUCATION to the Afghanistan Elections commission #### (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) ### IFES provides technical election support AND EDUCATION to the Pakistan Elections commission ###################################	4a	•				, ,	,
4c (Code) (Expenses \$ 2,308,369 including grants of \$ 31,633) (Revenue \$) IFES provides technical election support AND EDUCATION to the Pakistan Elections commission 4d Other program services (Describe in Schedule O)	4b	(Code) (Expenses \$	17,216,529	ıncludıng grants of \$) (Revenue \$)
IFES provides technical election support AND EDUCATION to the Pakistan Elections commission Other program services (Describe in Schedule O)							
	4c	•	, , , , ,			31,633) (Revenue \$)
/Evnances # 20.722.007 including grants of # 2.546.076 \/ /Pairania #	4d	· -	· ·	•	£¢ 2.545.0	7.6. \/ Payanus #	
(Expenses \$ 29,722,907 including grants of \$ 3,546,876) (Revenue \$) 4e Total program service expenses \$ 59,589,572 Must equal Part IX, Line 25, column (B).		(Expenses \$)

Part IV	Checklist of	Required	Schedules
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
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	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
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	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d		24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
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		No
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		No

Part IV 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, Part			
		28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
c	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
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		No
36	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		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a	73		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and regaming (gambling) winnings to prize winners?	ortable 1c	Yes	
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	225		
	return	225		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	 2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by this		
	return?	3a		Νο
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other over, a financial account in a foreign country (such as a bank account, securities account, or other fin			
	account)?	. 4a	Yes	
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bar	nk and		
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action? 5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			No
Ь	If "Yes," did the organization include with every solicitation an express statement that such contribut were not tax deductible?	ions or gifts 6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 o	r 7a		Νο
	more?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa			No
d	file Form 8282?	,		NO
•	11 1es, indicate the number of forms of the daring the year 1. 1. 1.			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p			
_	benefit contract?	7e		N o
				No
g	· · · · · · · · · · · · · · · · · · ·		Yes	
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-(7h	Yes	
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(a)(a)$	′3)		
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization organization and the supporting organization or a fund maintained by a sponsoring organization.	zatıon, have		
	excess business holdings at any time during the year?	8		
9	. Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	. 9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders			
-	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	,			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	1? 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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

Section	Δ Go	verning	Rody	and	Mana	gement	
Section.	M. GU	verming	Duuy	allu	riaiia	gement	

					Yes	No		
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumstances,					
1a	Enter the number of voting members of the governing body	nter the number of voting members of the governing body 1a 24						
Ь	Enter the number of voting members that are independent	1b	24					
2	Did any officer, director, trustee, or key employee have a family relationship or a bustother officer, director, trustee, or key employee?	·	2		Νo			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?							
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
Ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νo		
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons u	ndertaken during the					
а	the governing body?			8a	Yes			
Ь	each committee with authority to act on behalf of the governing body?			8b	Yes			
9a	Does the organization have local chapters, branches, or affiliates?			9a		No		
b	If "Yes," does the organization have written policies and procedures governing the a affiliates, and branches to ensure their operations are consistent with those of the o			9b				
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the		•	10	Yes			
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section of the organization's mailing address? If "Yes," provide the names and addresses in Sc			11		Νο		

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
Ь	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?	16b		N o
		TOD		1 14 0

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed DE
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

own website another's website upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization JIM JOHNSON

1850 K STREET NW 5TH FLOOR WASHINGTON, DC 20005 (202) 350-6764

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

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

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

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees 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, or 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

The check this box in the organization and i		Posit	(C) chec	:k al				(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
							_				

Part VII Continued

			() ition that a			all			(E)	(F)
(A) Name and Title	(B) A verage hours per week	Institutional Trustee Inclinatual Trustee or Director		Officei	Key employee	Former Highest compensated employee Key employee		(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			1							
					\vdash		\vdash			
				\vdash	\vdash					
								_		
				Ш	\sqcup		\vdash			
1b Total			<u>.</u>				-	2,024,806	5 0	183,261
2 Total number of individuals (including	those in 1	2) who		u a d		a +ba:	n # 1	00 000 in renertabl	•	•

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►46

			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee						
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo			
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such						
	ındıvıdual	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person						
	refluered to the organization. If Test, complete schedule from such person.	5		Νo			

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
GARDAWORLD 5870 TRINITY PARKWAY SUITE 300 CENTERVILLE, VA 20120	SECURITY CONSULTING	1,207,862
LANTRADE GLOBAL SUPPLIES OXFORD ROAD GERRARDS CROSS BUCKINGHAMSHIRE 5L9 7BB, 0 XE	CONSULTING	1,502,128
JANAK EDUCATIONAL MATERIAL WARD NO 17 BLOCK OF MADHYAPUR THIMI MUNICIPALITY, KATHMANDU NP	EDUCATION MATERIALS	1,062,340
THE CARTER CENTER One Copenhill 453 Freedom Parkway ATLANTA, GA 30307	consulting	330,486
GW CONSULTING INC 10467 WHITE GRANITE DRIVE OAKTON, VA 22124	SECURITY	2,863,933
Total number of independent contractors (including those in 1) who rec from the organization	. , ,	- 19

Part	
VIII	

Form 9								Page S
Par VII		Statement of	Revenue					
					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
\$ \$	1a	Federated cam	paigns 1a					
通過	Ь	Membership du	es . 1b					
ž. E	c	Fundraising eve	ents 1c					
£ ä	d	Related organiz	zations 1d					
Contributions, gifts, grants and other similar amounts	e	Government grant	s (contributions) 1e	41,546,313				
ੌਂ ਨੂੰ	f	All other contribution	ons, gifts, grants, and 1f	27,464,324				
まる	g	similar amounts no	ot included above ibutions included in					
발	"							
၀မ	h	Total (Add line	s 1a-1f)		69,010,637			
				Business Code				
III e	2a							
e. Ke	ь							
ě E	c							
ř	d							
S),	e							
眶	f	All other progra	am service revenue					
Program Service Revenue		Total Add line	s 2a-2f					
	g	0	S 2a-21					
	3		ome (including dividen					
			mounts)		17,272			17,27
	4		stment of tax-exempt bond		0			
	5	Royalties	(ı) Real	(II) Personal	, and the second			
	6a	Gross Rents	(i) Keai	(II) I elsolial				
	Ь	Less rental						
	l c	expenses Rental income						
		or (loss)		<u> </u>				
	d	Net rental inco	me or (loss)	(II) O ther				
	7a	Gross amount	500,658	(II) O ther				
		from sales of assets other						
	Ь	than inventory Less cost or	500,658					
		other basis and sales expenses	300,030					
	c	Gain or (loss)						
	d	Net gaın or (los	ss)		0			
	8a		rom fundraising					
		events (not inc \$	luding					
÷		of contributions	reported on line 1c)					
₹		See Part IV, lir Attach Schedule	ne 18 • <i>G if total exceeds</i>					
ě			a					
<u>a</u>	b	Less direct ex	penses b					
Other Revenue	С	Net income or ((loss) from fundraising	events 🟲	0			
_	9a	Gross income f See part IV, lin	rom gaming activities					
		Complete Sched	ule G ıf total exceeds					
		\$15,000	•					
	Ь	Lace director	a penses b					
	c		(loss) from gaming acti		o			
	10a							
		returns and allo	owances .					
			a .					
	b c	Less cost of g	oods sold b (loss) from sales of inve	entory ►	o			
	-	Miscellaneous		Business Code				
	11a							
	Ь		_					
	c							
		Λ II othan =====						
	d e		ue s 11a-11d					
	12		Add lines 1h, 2g, 3, 4,		69,027,909			17,27
		9c, 10c, and 1	1e	•				

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	3,546,876	3,546,876		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	786,450	637,007	149,443	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	17,903,161	14,693,723	0	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	342,757	257,417	85,340	0
9	Other employee benefits	4,100,343	3,079,435	1,020,908	0
10	Payroll taxes	758,507	569,653	188,854	0
11	Fees for services (non-employees)				
а	Management	0	0	0	0
ь	Legal	255,409	106,159	149,250	0
с	Accounting	450,377	126,106	324,271	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	6,853,887	6,210,942	642,945	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	2,415,618	1,588,419	827,199	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	1,042,536	291,910	750,626	0
17	Travel	4,416,557	3,889,761	526,796	0
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0	0	0	0
19	Conferences, conventions and meetings	3,540,618	3,504,665	35,953	0
20	Interest	47,110	0	47,110	0
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	339,100	94,948	244,152	0
23	Insurance	0			
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	SUBCONTRACTORS	14,998,792	14,998,792	0	0
Ь	COMMODITIES	3,660,945	3,660,945	0	0
c	FIELD OFFICE EXPENSES	2,331,361	2,331,757	-396	0
d	TRAINING AND EDUCATION	3,775	1,057	2,718	0
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	67,794,179	59,589,572	8,204,607	0
26	Joint Costs. Check 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				

Part X	Balance	Sheet

					(A) Beginning of year		(B End o	
	1	Cash—non-interest-bearing			211,914	1	Liid 0	170,885
	2	Savings and temporary cash investments			3,840,156	2		3,969,920
	3	Pledges and grants receivable, net		7,055,994	3	1	3,564,054	
	4	Accounts receivable, net			. ,	4		
	5	Receivables from current and former officers, directors, trustees, other related parties Complete Part II of Schedule L				5		
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	ction 4	1958(f)(1)) and		6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use				8		
w	9	Prepaid expenses and deferred charges			384,628	9		589,903
ssets	10a	Trepara expenses and deterred energes	•		,			,
ASS	104	Land, buildings, and equipment cost basis	10a	965,532	_			
	ь	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	418,583	443,173	10c		546,949
	11	Investments—publicly traded securities			2,705,473	11		111,704
	12	Investments—other securities See Part IV , line 11 $\it Complete Part Schedule D$	t VII d	of		12		
	13	Investments—program-related See Part IV , line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part IV$, line 11 $\it Complete Part See Part See Part IV$, line 11 $\it Complete Part See Par$			13			
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			242,670	15		784,666
	16	Total assets. Add lines 1 through 15 (must equal line 34)			14,884,008	16	1	9,738,081
	17	Accounts payable and accrued expenses .			7,122,814	17		7,799,324
	18	Grants payable		18				
	19	Deferred revenue	1,203,754	19		1,287,108		
	20	Tax-exempt bond liabilities			20			
<u>6</u>	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
<u> </u>		persons Complete Part II of Schedule L				22		
_	23	Secured mortgages and notes payable to unrelated third parties			2,438,275	23		5,291,866
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			10,764,843	26	1	4,378,298
es_		Organizations that follow SFAS 117, check here ► 🔽 and complet through 29, and lines 33 and 34.	ete lin	es 27				
anc	27	Unrestricted net assets			3,986,311	27		5,207,208
Balance	28	Temporarily restricted net assets			132,854	28		152,575
=	29	Permanently restricted net assets				29		
Fund		Organizations that do not follow SFAS 117, check here ► □ and lines 30 through 34.	comp	lete				
٥	30	Capital stock or trust principal, or current funds				30		
£	31	Paid-in or capital surplus, or land, building or equipment fund.				31		
Assets	32	Retained earnings, endowment, accumulated income, or other fun				32		
Net /	33	Total net assets or fund balances			4,119,165	33		5,359,783
ž	34	Total liabilities and net assets/fund balances			14,884,008	34		9,738,081
	1				, ,			. ,
Pa	rt XI	Financial Statements and Reporting						
							Yes	No

Dart YT	Financial	Statements	and Reporting

	_			
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		n e organizati NAL FOUNDATIO	on On for electoral					Em	ployer ide	nt if icat io	n numbe	r	
SYSTE								52	-152783	5			
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganızatıo	•					
The	organı	zation is not	a private found	ation because it is (Please	check on	ly one org	anızatıon))					
1	Γ	A church, c	onvention of ch	nurches, or association of ch	nurches de	escribed ii	Section 1	L70(b)(1)	(A)(i).				
2	Γ	A school d	escribed in Sec l	t ion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)							
3	Γ	A hospital	or a cooperativ	e hospital service organizati	on descri	bed in Sec	tion 170(l	o)(1)(A)(i	i ii). (Attac	h Schedu	le H)		
4	Γ		-	zation operated in conjuncti	on with a	hospital d	escribed i	n Section	170(b)(1)	(A)(iii). E	nter the		
5	_	•	name, city, and					l h., n. n., .,					
5 An organization operated for the benefit of a college or university owned or operated by a governmental un Section 170(b)(1)(A)(iv). (Complete Part II)							unit desc	iibea iii					
_	_			overnment or governmental	unit docci	ribad in Sc	stion 170	/b\/1\/A\	/ ₁₄ \				
6 7	, 고	-	-	ally receives a substantial p						n the gene	ral publ		
•	Į	_		o)(1)(A)(vi) (Complete Par		support in	Jili a gove	illillelltal t	11111 01 1101	ii tile gelle	rai pubi		
	_		-		•	anlata Dan	+ T T \						
8	<u>'</u>		•	ped in Section 170(b)(1)(A)		•	•			for a			
9	,	_		ally receives (1) more than					•	·		055	
		•		lated to its exempt functions	-		·		•			_	
			-	estment income and unrelate			•			x) irom bu	smesse	•	
10	_		-	on after June 30, 1975 See and operated exclusively to					•	aa inatriia	tions \		
10 11	<u>'</u>	=	=	and operated exclusively to			="				-	6	
	•	one or more the box tha	e publicly suppo	orted organizations describe type of supporting organiza	d in secti tion and c	on 509(a) omplete l	(1) or sec	tıon 509(a hrough 11	a)(2) See	Section 5). Check	
e	Γ	•	foundation man	rtify that the organization is agers and other than one or			•			•	•		
f		If the organ	nization receive box	d a written determination fro						supportir	ng organ	zation,	
g		following pe		as the organization accepted	d any gift	or contrib	ution from	any or the	:				
				r indirectly controls, either a	alone or to	ogether wi	th persons	describe	d ın (ıı)		Yes	No	
		and (III) be	ow, the governi	ng body of the the supported	d organiza	ition?				11g	(i)	Νο	
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(ii)	Νο	
		(iii) a 35%	controlled enti	ty of a person described in ((i) or (ii) a	bove?				11g(iii)	Νο	
h		Provide the	following infori	mation about the organizatio	ns the org	ganızatıon	supports				•		
Supp		Supported (described on lines 1-9 organization above or IRC section col (i) (See Instructions)) your go		Is the sation in listed in overning ment?	the orga ın col (i	ou notify inization i) of your port?	zatıon organız of your col (i) o		organization in s			ii) A mount of support?	
							V _c -	No.	Yes	N-	1		
					Yes	No	Yes	No	Yes	No			
							-	-		-	-		
								-		-			
							-						

Total

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	ked the box or	n line 5, 7, or	8 of Part I.)				
Pι	ıblic Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	74,971,550	58,072,081	49,909,085	57,830,088	Í	69,010,637	309,793,441
2	Tax revenues levied for the organization's							
_	benefit and either paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
4	Total. Add line 1-3	74,971,550	58,072,081	49,909,085	57,830,088	-	69,010,637	309,793,441
5	The portion of total contribution by each							
	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount shown on line 11, column							
	(f)							
6	Public Support subtract line 5 from line							
·	4							309,793,441
Te	otal Support		-					
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	74,971,550	127,157	49,909,085	57,830,088	(69,010,637	309,793,441
8	Gross income from interest, dividends,							_
	payments received on securities loans, rents, royalties and income from similar	174,059	127,157	167,944	89,823	17,272		576,255
9	sources Net income from unrelated business activities, whether or not the business is							
40	regularly carried on Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in Part IV)	0	0	0	0		0	0
11	Total Support (Add lines 7 through 10)							310,369,696
12	Gross receipts from related activities, etc	(See instruction	s)		•	12		962,423
13	First Five Years. If the Form 990 is for the organization, check this box and stop here	organızatıon's fir	rst, second, third	d, fourth, or fifth	tax year as a 5	01(c)([3)	<u> </u>
C	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	lumn (f))		14		99.814 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, line 26f			15		99.743 %
16a	33 1/3% Test - 2008. If the organization did	d not check the b	oox on line 13, a	ind line 14 is 33	3 1/3% or more,	check	this box	
b	and stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization did	d not check the l	box on line 13 o	r 16a, and line :	15 is 33 1/3% o	r more	, check thi	
4	box and stop here. The organization qualified				2 46 466-		- 14 10	▶ ┌
1/a	10% Facts and Circumstances Test - 2008. more, and if the organization meets the "fac	-						
	organization meets the "facts and circumst	ances" test The	e organization qu	ualifies as a pub	licly supported	organı	ızatıon	► □
b	10% Facts and Circumstances Test - 2007. Immore, and if the organization meets the "fac							
	the organization meets the "facts and circu	mstances" test	The organizatio	n qualifies as a	publicly suppor	ted or	ganızatıon	▶□
18	Private Foundation. If the organization did instructions	not check the bo	ox on line 13, 16	a, 16b, 17a or	17b, check this	box a	nd see	▶ ┌

Pa	Support Schedule for On (Complete only if you ched)(2)		
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
·	line 6)						
To	tal Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or loss						
12	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organization's fi	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶□
	mputation of Public Support Perc						
15	Public Support Percentage for 2008 (line		•	olumn (f))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
	mputation of Investment Income			40 1 1			
17	Investment Income Percentage for 2008 (-))	17	
18	Investment Income Percentage from 2007	'Schedule A , Pa	rt IV-A, line 27	h		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 52-1527835

Name: INTERNATIONAL FOUNDATION FOR ELECTORAL

SYSTEMS

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa											
		Posit t	(C non (hat a	chec		I			(5)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
MARY BANOTTI , DIRECTOR	1 0	Х						0	0	0	
JUDY BLACK , DIRECTOR	1 0	Х						0	0	0	
JEFFREY GLASSMAN , DIRECTOR	1 0	Х						0	0	0	
STUART HOLLIDAY , DIRECTOR	1 0	Х						0	0	0	
STENY HOYER , DIRECTOR	1 0	Х						0	0	0	
WILLIAM J HYBL , VICE CHAIRMAN	1 0	Х						0	0	0	
LESLEY ISRAEL , TREASURER	1 0	Х						0	0	0	
PETER G KELLY , CHAIRMAN	1 0	Х						0	0	0	
BARBARA B KENNELLY , DIRECTOR	1 0	Х						0	0	0	
MAUREEN KINDEL , DIRECTOR	1 0	Х						0	0	0	
KATHLEEN M LINEHAN ESQ , DIRECTOR	1 0	Х						0	0	0	
ROBERT LIVINGSTON , DIRECTOR	1 0	Х						0	0	0	
RICHARD G LUGAR , DIRECTOR	1 0	Х						0	0	0	
SHEILA AVRIN MCLEAN , DIRECTOR	1 0	Х						0	0	0	
DENISE L NAPPIER , DIRECTOR	1 0	Х						0	0	0	
R SCOTT PASTRICK , DIRECTOR	1 0	Х						0	0	0	
MICHAEL PINTO-DUSCHINSKY , DIRECTOR	1 0	Х						0	0	0	
LEON J WEIL , DIRECTOR	1 0	Χ						0	0	0	
KENNETH BLACKWELL , DIRECTOR	1 0	Х						0	0	0	
HANK BROWN , DIRECTOR	1 0	Х						0	0	0	
SEAN CLEARY , DIRECTOR	1 0	Χ						0	0	0	
RICHARD C POWELL , DIRECTOR	1 0	Х						0	0	0	
PAULA DOBRIANSKY , DIRECTOR	1 0	Χ						0	0	0	
GERARD STOUDMANN , DIRECTOR	1 0	Х						0	0	0	
PETER SHORTSLEEVES , CHIEF FINANCIAL OFFICER	40 0			х				175,721	0	17,727	
JEAN-PIERRE KINGSLEY , PRESIDENT/CEO	40 0			х				241,920	0	29,619	
PETER MICHAEL BRYAN , CHIEF FINANCIAL OFFICER	40 0			х				150,265	0	28,520	
SCOTT LANSELL , VP PROGRAMS	40 0			Х				98,978	0	2,046	
CARINA PERELLI , EXECUTIVE VICE PRESIDENT	40 0			х				127,565	0	23,139	
JAMES VERMILLION , EXECUTIVE VICE PRESIDENT	40 0			х				121,149	0	14,286	

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	C) (c peck (c) Officer C) (c peck (c) Officer C) (c peck (c) Officer C) Offic		Highest employ		(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
MARY CUMMINS , CHIEF OF PARTY	40 0	'	-		X		198,240	0	4,255
ALMAMI CYALLAH , CHIEF OF PARTY	40 0				Х		235,638	0	34,623
STAFFAN DARNOLF , CHIEF OF PARTY	40 0				Х		238,032	0	4,283
PETER ERBAN , CHIEF OF PARTY	40 0				Х		208,568	0	13,577
CHARLES LASHAM , CHIEF OF PARTY	40 0				Х		228,730	0	11,186

OMB No 1545-0047

2008

2000

SCHEDULE D (Form 990)

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.

Supplemental Financial Statements

Open to Public Inspection

itorric	ar revenue corvice			Inspection	
INT	nme of the organization FERNATIONAL FOUNDATION FOR ELECTORAL STEMS		Employer identific	cation number	
	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		52-1527835 Inds or Account	s. Complete If	the
	organization answered Tes to Form 55	(a) Donor advised funds	(b) Funds and	other accounts	
1	Total number at end of year				
2	Aggregate Contributions to (during year)				
3	Aggregate Grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the o	-	or advised	Г Yes	No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?		may be	ΓYes ΓΙ	No
Pa	rt III Conservation Easements. Complete	ıf the organızatıon answered "Yes" to	o Form 990, Part I	V, line 7.	
1 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality on the last day of the tax year	on or pleasure) Preservation of an Preservation of ce	historically importai rtified historic struct of a conservation ea	:ure	
			Held a	t the End of the \	ear
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements	s	2b		
c	Number of conservation easements on a certified hi	storic structure included in (a)	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d		
3	Number of conservation easements modified, transfe the taxable year ▶	rred, released, extinguished, or terminate	d by the organization	n during	
4	Number of states where property subject to conserva	ation easement is located ►			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		itions, and	Г Yes	No
6	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►		
7	A mount of expenses incurred in monitoring, inspecting	ng, and enforcing easements during the ye	ear ► \$		
8	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	ΓYes Γι	No
9	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financial			
Pai	rt III Organizations Maintaining Collectio Complete if the organization answered "		or Other Similar	Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	h in furtherance of p		
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ir			
	(i) Revenues included in Form 990, Part VIII, line 1		► \$		
	(ii) Assets included in Form 990, Part X		► \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		r financial gain, prov	ide the	
а	Revenues included in Form 990, Part VIII, line 1		► \$		

b Assets included in Form 990, Part X

3	Organizations Maintaining Collections of A	,						
	Using the organization's accession and other records, check a items (check all that apply)	any of th	ne foll	owing that are	a sıgnıfıcant u	se of its collection	n	
а	Public exhibition	d	Γ	Loan or exch	ange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's collections and exp Part XIV	olaın hov	w the	y further the o	rganızatıon's ex	cempt purpose in		
5	During the year, did the organization solicit or receive donation assets to be sold to raise funds rather than to be maintained a						Yes	┌ No
Par	Trust, Escrow and Custodial Arrangements Part IV, line 9, or reported an amount on Form				nızatıon answ	ered "Yes" to Fo	orm 9	90,
1a	Is the organization an agent, trustee, custodian or other internincluded on Form 990, Part X?	mediary	for c	ontributions o	r other assets		Yes	Г No
b	If "Yes," explain why in Part XIV and complete the following to	able						
						A mou	ınt	
с	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f			_
2a	Did the organization include an amount on Form 990, Part X, I	ıne 21?				Γ	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV							
Pai	rt V Endowment Funds. Complete if the organizati)Prior `			t IV, line 10. Three Years Back (e	AEour V	oars Pack
1a	Beginning of year balance	(D	PHOL	real (C)IWC	rears back (u)	Tillee feats back (e	e)roui i	ears back
ь	Contributions	_						
c	Investment earnings or losses	_						
d	Grants or scholarships	_						
e	Other expenditures for facilities	_						
	and programs	_						
f	Administrative expenses							
~	End of year balance							
g	Life of year balance							
9 2	Provide the estimated percentage of the year end balance help	— d as						
_	,	— d as						
2	Provide the estimated percentage of the year end balance held	— d as						
2 a	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment	— d as						
2 a b	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment		that a	are held and ac	dministered for	the		
2 a b	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by		that a	are held and ac	dministered for		Yes	No
2 a b	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ızatıon			dministered for	3a(i)	Yes	No
2 a b c	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ızatıon			dministered for	3a(i) 3a(ii)	Yes	No I
2 a b c 3a	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ızatıon • • • • • • • • • • • • • • • • • • •	 Sched	 ule R?	dministered for	3a(i)	Yes	No No
2 a b c 3a b	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Sched ent fu	· · · · · ule R? · ·		3a(i) 3a(ii)	Yes	No
2 a b c 3a b	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Sched ent fu	 ule R? nds orm 990, Pa	rt X, line 10.	3a(i) 3b		
2 a b c 3a b	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Schedent fu	· · · · · ule R? · ·		3a(i) 3a(ii) 3b		No N
2 a b c 3a b 4 Par	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Schedent fu	ule R? nds orm 990, Pa	rt X, line 10.	3a(i) 3b		
2 a b c 3a b 4 Par	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Schedent fu	ule R? nds orm 990, Pa	rt X, line 10.	3a(i) 3b		
2 a b c 3a b 4 Par	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Schedent fu	ule R? nds orm 990, Pa	rt X, line 10.	3a(i) 3a(ii) 3b (c) Depreciation		pok value
2 a b c 3a b 4 Parr	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organizations listed as required by Describe in Part XIV the intended uses of the organization's expected by Investments—Land, Buildings, and Equipment Description of investment	ization red on S	Schedent fu	ule R? nds orm 990, Pa	rt X, line 10. (b)Cost or other basis (other)	3a(i) 3a(ii) 3b (c) Depreciation		pook value
2	Provide the estimated percentage of the year end balance held Board designated or quasi-endowment Permanent endowment Term endowment Are there endowment funds not in the possession of the organ organization by (i) unrelated organizations	ization red on S	Schedent fu	ule R? nds orm 990, Pa	rt X, line 10. (b)Cost or other basis (other)	(c) Depreciation		pok value

Part VII Investments—Other Securities. See	Form 990, Part X, line	12.	
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
O ther			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		d of valuation year market value
Tatal (Column (h) chould agual Form 000, Part V, col (D) line 13.)	,		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, I			
(a) Descr			(b) Book value
SUBRECIPIENT ADVANCES			240,176
TRAVEL ADVANCES			80,153
CERTIFICATES OF DEPOSIT			464,337
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part			
(a) Description of Liability	(b) A mount		
Federal Income Taxes	, ,		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)			

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	69,027,909
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	67,794,179
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,233,730
4	Net unrealized gains (losses) on investments	4	6,887
5	Donated services and use of facilities	5	
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	6,887
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,240,617
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Retu	r n
1	Total revenue, gains, and other support per audited financial statements	1	69,188,106
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	160,197
3	Subtract line 2e from line 1	3	69,027,909
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		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	69,027,909
	Reconciliation of Expenses per Audited Financial Statements With Expenses	T - I	
1	Total expenses and losses per audited financial statements	1	67,947,489
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	1	
b	Prior year adjustments	1	
с	Losses reported on Form 990, Part IX, line 25	1 1	
d	Other (Describe in Part XIV)	1, 1	153 310
e	Add lines 2a through 2d	2e	153,310
3	Subtract line 2e from line 1	3	67,794,179
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a b	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV) 4b	1	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	67,794,179
_	rotal expenses Add lines sand tell (1 ins should equal form 550, Fait 1, line 10)	1 2 1	0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Part XIV Supplemental Information

LINE 2 THAT IFES IS EXEM UNDER SECTION SO CODE, EXCEPT FOR INCOME FOR THE Y AND 2008, IFES HAS SUBJECT TO UNREL. IS NOT CLASSIFIED SECTION 509(A)(1) JULY 2006, THE FAS GUIDANCE, WHICH- UNCERTAINTY IN IN ENTITYS FINANCIA GUIDANCE PRESCR: AND MEASUREMENT STATEMENT RECOG POSITION TAKEN O RETURN THIS AUTH PROVIDES GUIDAN CLASSIFICATION, I ACCOUNTING IN IN TRANSITION IN DE GUIDANCE PERMITS EFFECTIVE DATE OI UNTIL FISCAL YEAR 2008 THE AUTHOR; TO ALL EXISTING TI ADOPTION THE CU AUTHORITATIVE G BE REPORTED AS AN ASSETS DURING TH IMPLEMENTATION (WILL REQUIRE MAN. OPEN TAX YEARS, A LIMITATIONS, FOR. INCLUDES FEDERAL YEARS ARE THOSE TI TAXING AUTHORITI TAY YEAR RENDS AN THEN) IFES HAS NO HAS ELECTED TO DI AUTHORITATIVE G GUIDANCE REQUIRE BEIEVES ARE PROS ESTIMATED MANAG THE IMPACT OF THE BEIEVES ARE PROS ESTIMATED MANAG THE IMPACT OF THE	ENUE SERVICE HAS DETERMINED PT FROM FEDERAL INCOME TAXES		<u>- </u>	Ident if ier
	I (C)(3) OF THE INTERNAL REVENUE TAXES ON UNRELATED BUSINESS EARS ENDED SEPTEMBER 30, 2009 SUBSTANTIALLY NO ACTIVITIES ATED BUSINESS INCOME TAXES IFE: AS A PRIVATE FOUNDATION UNDER OF THE INTERNAL REVENUE CODE I B ISSUED AUTHORITATIVE CLARIFIES THE ACCOUNTING FOR ICOME TAXES RECOGNIZED IN AN STATEMENTS THE AUTHORITATIVE CLARIFIES THE ACCOUNTING FOR ICOME TAXES RECOGNIZED IN AN STATEMENTS THE AUTHORITATIVE BES A RECOGNITION THRESHOLD ATTRIBUTE FOR THE FINANCIAL INITION AND MEASUREMENT OF A TAXE ORITATIVE GUIDANCE ALSO CE ON DERECOGNITION, INTEREST AND PENALTIES, TERIM PERIODS, DISCLOSURE, AND CEMBER 2008, THE AUTHORITATIVE SONDPUBLIC ENTITIES TO DEFER THE THIS AUTHORITATIVE GUIDANCE SEGINNING AFTER DECEMBER 15, TATIVE GUIDANCE MUST BE APPLIED AND CEMBER 2008 THE STATUTE OF ALL MAJOR JURISDICTIONS, WHICH AND CERTAIN STATES OPEN TAXED AND CEMBER 15 THE AUTHORITATIVE GUIDANCE AND CEMBER 15 THE STATUTE OF ALL MAJOR JURISDICTIONS, WHICH AND CERTAIN STATES OPEN TAXED THE INTERIM TAX PERIOD SINCE EXAMINATION ES (I E , GENERALLY THE LAST FOUR THE INTERIM TAX PERIOD SINCE EXAMINATION IN PROGRESS IFES THE APPLICATION OF THIS SIFES TO ACCRUE FOR LOSSES IT SABLE AND CAN BE REASONABLY SEMENT IS CURRENTLY ASSESSING ENEW AUTHORITATIVE GUIDANCE OUTION AND RESULTS OF OPERATION PTION OF THE NEW AUTHORITATIVE SEMENT IS CURRENTLY ASSESSING ENEW AUTHORITATIVE GUIDANCE OUTION AND RESULTS OF OPERATION PTION OF THE NEW AUTHORITATIVE SEMENT IS CURRENTLY ASSESSING ENEW AUTHORITATIVE GUIDANCE OUTION AND RESULTS OF OPERATION PTION OF THE NEW AUTHORITATIVE SEMENT IS CURRENTLY ASSESSING ENEW AUTHORITATIVE GUIDANCE OUTION AND RESULTS OF OPERATION PTION OF THE NEW AUTHORITATIVE EXPECTED TO HAVE A MATERIAL INANCIAL STATEMENTS	JLE D, PART X,		N48 FOOTNOTE
			 	

2008

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Statement of Activities Outside the United States

Open to Public **Inspection**

Name of the organization					Employer ide	entification number
INTERNATIONAL FOUNDAT	ION FOR ELECT	ORAL				
SYSTEMS					52-152783	
Part I General Infor			ide the United States	s. Complete	e if the orgar	nization answered
			records to substantiate	the amount	t of the grant	s or
_	_		assistance, and the se		_	
·	- -	-				
2 For grant makers. Descri United States	ibe in Part IV the	organization's p	rocedures for monitoring th	ne use of gra	nt funds outsıd	e the
3 Activites per Region (U	se Schedule F-1	(Form 990) ıf ad	ditional space is needed)			
			(d) Activities conducted in	(e) If activi	ity listed in (d)	
	(b) Number of	(c) Number of	region (by type) (ie,	1		(f) Total expenditures ii
(a) Region	offices in the	employees or	fundraising, program services, grants to recipients located in		pecific type of	
	region	agents in region	the region)		s) in region	l
Central America and the Caribbean	3	6	Program Services	SEE PART I	IV	2,512,78
East Asia and the Pacific	4	11	Program Services	SEE PART I	١٧	4,070,689
Europe (Including Iceland and	1	7	Program Services	SEE PART I	[V	430,28
Greenland) Middle East and North Africa	6	40	Program Services	SEE PART I	TV	19,485,79
			r rogram services	SEE TART I	•	15,405,750
North A merica	1	2	Program Services	SEE PART I	[V	305,40
Russia and the Newly Independent States	7	10	Program Services	SEE PART I	١٧	4,538,43
Sub-Saharan Africa	12	25	Program Services	SEE PART I	IV	7,682,120
South Asia	5	7	Program Services	SEE PART I	[V	28,286,00!

Totals ▶

39

108

67,311,514

) Name of Janization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	_							
	_							
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	_							
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	_							
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	_							
	_							
	_							
	_							
	_							

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	1	1				l	

Schedule F (Form 990) 2008

Complete this part t		I in Part I, line 2, and any other additional information.
MONITORING GRANT FUNDS OUTSIDE THE U S	FORM 990, SCHEDULE F, PART I, LINE 2	IFES monitors programmatic activities through our local country offices' management staff and administrative staff review at HQ Periodic financial reports are generated to the donors whereby the actual cost incurred is reviewed against the project budgets to comply with the requirements of the funding
PROGRAM EXPENDITURES AND GRANTS	FORM 990, SCHEDULE F, PART I & II	

Software ID: **Software Version:**

EIN: 52-1527835

Name: INTERNATIONAL FOUNDATION FOR ELECTORAL

SYSTEMS

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
	•	Cent A merica/Caribbean	SEE PART IV	22,000				
		Cent A merica/Caribbean	SEE PART IV	15,869				
		Cent A merica/Caribbean	SEE PART IV	60,000				
		East Asia/Pacific	SEE PART IV	38,092				
		East Asia/Pacific	SEE PART IV	31,338				
		East Asia/Pacific	SEE PART IV	110,180				
		East Asia/Pacific	SEE PART IV	8,112				
		East Asia/Pacific	SEE PART IV	21,282				
		East Asia/Pacific	SEE FORM IV	22,871				
		East Asia/Pacific	SEE PART IV	86,051				
		East Asia/Pacific	SEE PART IV	18,000				
		East Asia/Pacific	SEE PART IV	121,761				
		East Asia/Pacific	SEE PART IV	49,455				
		East Asia/Pacific	SEE PART IV	33,734				
		East Asia/Pacific	SEE PART IV	23,387				
		East Asia/Pacific	SEE PART IV	14,675				
		Cent A merica/Caribbean	SEE PART IV	18,660				
		East Asia/Pacific	SEE PART IV	33,204				
		East Asia/Pacific	SEE PART IV	11,632				
		East Asia/Pacific	SEE PART IV	10,038				
		East Asia/Pacific	SEE PART IV	12,500				
		Middle East/North Africa	SEE PART IV	91,982				
		Middle East/North Africa	SEE PART IV	292,113				
		Middle East/North Africa	SEE PART IV	10,109				
		Middle East/North	SEE PART IV	43,175				
		Middle East/North	SEE PART IV	118,338				
		Middle East/North	SEE PART IV	38,480				
		A frica Middle East/North	SEE PART IV	133,179				
		A frica Middle East/North	ELECTION	746,750				
		A frica Middle East/North	SUPPORT SEE PART IV	85,010				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	•	Mıddle East/North Afrıca	SEE PART IV	253,390				
		Middle East/North Africa	SEE PART IV	5,699				
		Mıddle East/North Afrıca	SEE PART IV	71,261				
		Mıddle East/North Afrıca	SEE PART IV	20,220				
		Mıddle East/North Afrıca	SEE PART IV	8,800				
		Russia	SEE PART IV	17,340				
		Russia	SEE PART IV	27,426				
		Russia	SEE PART IV	16,788				
		South America	SEE PART IV	19,847				
		South Asia	SEE PART IV	150,000				
		South Asia	SEE PART IV	99,814				
		South Asia	SEE PART IV	273,659				
		South Asia	SEE PART IV	25,930				
		South Asia	SEE PART IV	8,104				
		South Asia	SEE PART IV	23,136				
		South Asia	SEE PART IV	83,737				
		South Asia	SEE PART IV	7,316				
		South Asia	SEE PART IV	8,725				
		South Asia	SEE PART IV	11,508				
		Sub-Saharan A frica	SEE PART IV	11,416				
		Sub-Saharan Africa	SEE PART IV	14,374				
		Sub-Saharan Africa	SEE PART IV	18,676				
		Sub-Saharan Africa	SEE PART IV	38,048				
		Middle East/North Africa	SEE PART IV	9,684				

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

2008

Open to Public Inspection

Name of the organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS Employer identification number

52-1527835

Pa	rt I Questions Regarding Compensation	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First class or charter travel	\vdash	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			İ
b	If line 1a is checked, did the organization follow a wi provision of all the expenses described above? If "N			1b		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organizatiorganization's CEO/Executive Director Check all the		·			
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	고	Compensation survey or study			
	Form 990 of other organizations	<u> - </u>	Approval by the board or compensation committee			İ
4	During the year, did any person listed in Form 990,	Part VI	I, Section A, line 1a			
а	a Receive a severance payment or change of control payment?					
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					Νo
С	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		No

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & (iii) Other compensation		compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
PETER SHORTSLEEVES	(ı) (ıı)	163,881 0	10,000 0	1,840 0	9,604 0	8,123 0	193,448 0	
JEAN-PIERRE KINGSLEY	(ı) (ıı)	210,000 0	30,000 0	1,920 0	20,499 0	9,120 0	271,539 0	
PETER MICHAEL BRYAN	(ı) (ıı)	140,345 0	8,000 0	1,920 0	15,500 0	13,020 0	178,785 0	
MARY CUMMINS	(ı) (ıı)	112,161 0	0	86,079 0	0 0	4 ,255 0	202,495	
ALMAMI CYALLAH	(ı) (ıı)	145,751 0	0 0	89,887 0	20,499 0	14,124 0	270,261 0	
STAFFAN DARNOLF	(ı) (ıı)	168,246 0	1,000	68,786 0	0	4,283 0	242,315 0	
PETER ERBAN	(ı) (ıı)	146,470 0	0	62,098 0	0	13,577 0	222,145	
CHARLES LASHAM	(ı) (ıı)	149,548 0	0	79,182 0	0	11,186 0	239,916	
CARINA PERELLI	(ı) (ıı)	118,045 0	8,000	1,520 0	15,500 0	7,639 0	150,704	
	(ii) (i)							
-	(ii) (i)							
	(ii)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
-		
	·	

Software ID: Software Version:

EIN: 52-1527835

Name: INTERNATIONAL FOUNDATION FOR ELECTORAL

SYSTEMS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

	$\overline{}$							
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
	(I) (II)		10,000	1,840 0	9,604 0	8,123 0	193,448 0	
	(ı) (ıı)		30,000 0	1,920 0	20,499 0	9,120 0	271,539 0	
	(I) (II)		8,000 0	1,920 0	15,500 0	13,020 0	178,785 0	
	(I) (II)		0	86,079 0	0	4,255 0	202,495 0	
	(ı) (ıı)		0	89,887 0	20,499 0	14,124 0	270,261 0	
I STAFFAN DARNOTF	(ı) (ıı)		1,000	68,786 0	0	4,283 0	242,315 0	
	(ı) (ıı)		0	62,098 0	0	13,577 0	222,145 0	
	(I) (II)		0	79,182 0	0 0	11,186 0	239,916 0	
CARINA PERELLI	(I) (II)	118,045 0	8,000	1,520 0	15,500 0	7,639 0	150,704 0	
4								Į.

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS

Employer identification number

52-1527835

ldentifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 10	The completed Form 990 is transmitted to the chairman, vice chairman and the audit committee for review prior to filing the document. At the subsequent quarterly board meeting, the document is presented to all board members and is formally accepted as part of the audit committee report.

ldentifier	Return Reference	Explanation
DETERMINING COMPENSATION	FORM 990, PART VI, LINE 15	IFES MAINTAINS A COMPENSATION PLAN THAT IS SUPPORTED BY COMPENSATION SURVEYS AND MARKET DATA AVAILABLE VIA THE INTERNET AND DC BASED HEADHUNTERS. THE CEO'S COMPENSATION IS SET BY THE CHAIRMAN OF THE BOARD AND THE EXECUTIVE COMMITTEE. THE CURRENT CEO'S COMPENSATION IS WITHIN THE ESTABLISHED COMPENSATION PLAN RANGE FOR THE POSITION. THE HUMAN RESOURCES MANAGER OBTAINS MUTIPLE COMPENSATION SURVEYS AND SALARY DATA, WHEREBY EMPLOYEES AND OFFICERS ARE RANKED AND COMPARED TO THE COMPENSATION STRUCTURE AND PAY BANDING PLAN AND THEN MAKES RECOMMENDATIONS TO THE CEO. THE HUMAN RESOURCES BOARD COMMITTEE APPROVES THE COMPENSATION STRUCTURE AND PAY BANDS CONTEMPORANEOUS DOCUMENTATION IS KEPT REGARDING THE DELIBERATIONS AND DECISIONS.

ldentifier	Return Reference	Explanation
AVAILABILITY OF OTHER DOCUMENTS	FORM 990, PART VI, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
FOREIGN COUNTRIES WHERE IFES MAINTAINS A BANK ACCOUNT	FORM 990, PART V, LINE 4	ALBANIA, AFGHANISTAN, ANGOLA, ARMENIA, AZERBAIJAN, BURUNDI, CONGO (DEMOCRATIC REPUBLIC OF), COTE D'IVOIRE, EGYPT, GEORGIA, GUINEA, HAITI, INDONESIA, IRAQ, JORDAN, KAZAKHSTAN, KENYA, KOSOVO, KYRGYZSTAN, LEBANON, LIBERIA, MOLDOVA, NEPAL, NICARAGUA, NIGERIA, PAKISTAN, PHILLIPPINES, SUDAN, TAJIKISTAN, TIMOR LESTE, WEST BANK, AND YEMEN

ldentifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, LINE 12	Our Conflict of Interest Policy is reviewed annually by management and legal counsel. Any revisions deemed appropriate are submitted to the Board of Directors for its review, consideration, and adoption. Directors complete and file with the Secretary a questionnaire as to each's knowledge of and compliance with the policy and disclose through that process any known or suspected conflict so that the disinterested Directors can address and resolve the matter.

ldentifier	Return Reference	Explanation
OTHER PROGRAM SERVICES	FORM 990, PART III, LINE 4D	IFES PROVIDES TECHNICAL ELECTION SUPPORT TO ELECTIONS IN COUNTRIES AROUND THE WORLD