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.

OMB No. 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning OCT 1, 2008 and ending SEP 30, 2009

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Termination [x] Amended return [ ] Application pending

C Name of organization: POPULATION REFERENCE BUREAU

Doing Business As PRB

Number and street (or P.O. box if mail is not delivered to street address): 1875 CONNECTICUT AVE, NW — Room/suite: 520

City or town, state or country, and ZIP + 4: WASHINGTON, DC 20009-5728

D Employer identification number: 53-0214030

E Telephone number: 202-483-1100

G Gross receipts $ 9,587,315.

F Name and address of principal officer: WILLIAM P. BUTZ
SAME AS C ABOVE

H(a) Is this a group return for affiliates? [ ] Yes [x] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [x] 501(c) (3) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.PRB.ORG

K Type of organization: [x] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1951

M State of legal domicile: DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	14
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of employees (Part V, line 2a)	5	59
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	8,993,563.	9,315,800.
	9	Program service revenue (Part VIII, line 2g)	138,393.	86,204.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	528,739.	146,583.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		38,728.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,660,695.	9,587,315.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,737,706.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,324,770.	3,526,818.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 39,604.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,763,063.	4,143,380.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	9,087,833.	9,407,904.
	19	Revenue less expenses. Subtract line 18 from line 12	572,862.	179,411.

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	9,683,409.	10,593,722.
	21	Total liabilities (Part X, line 26)	4,231,562.	5,169,668.
	22	Net assets or fund balances. Subtract line 21 from line 20	5,451,847.	5,424,054.

Part II Signature Block

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

Sign Here

▶ William P. Butz — Signature of officer — Date: 11-16-2010

▶ WILLIAM P. BUTZ, PRESIDENT/CEO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Joyce Underwood — Date: 11/16/10 — Check if self-employed ▶ [ ] — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ BDO USA, LLP
7101 WISCONSIN AVE., SUITE 800
BETHESDA, MD 20814-4827

EIN ▶

Phone no. ▶ (301)654-4900

May the IRS discuss this return with the preparer shown above? (see instructions) [x] Yes [ ] No

915-16,17

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

THE POPULATION REFERENCE BUREAU INFORMS PEOPLE AROUND THE WORLD ABOUT POPULATION, HEALTH AND THE ENVIRONMENT, AND EMPOWERS THEM TO USE THAT INFORMATION TO ADVANCE THE WELL-BEING OF CURRENT AND FUTURE GENERATIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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? ☐ Yes ☒ No

If "Yes", describe 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 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.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses $ 6,986,191. including grants of $) (Revenue $ 96,767.)

INTERNATIONAL: PRB BUILDS THE CAPACITY OF JOURNALISTS FROM DEVELOPING COUNTRIES THROUGH SEMINARS AND STUDY TOURS. THESE EFFORTS INCREASE AND IMPROVE REPORTING ON REPRODUCTIVE HEALTH AND CONTRIBUTE TO RAISING AWARENESS OF THE ISSUES AMONG POLICYMAKERS. PRB ORGANIZED FIVE STUDY TOURS FOR JOURNALISTS IN UGANDA, KENYA, TANZANIA, AND MALI TO VISIT PROJECTS AND THE PEOPLE THEY AFFECT. PRB IS EXPLORING NEW WAYS TO REACH POLICY AUDIENCES THROUGH MULTIMEDIA PRESENTATIONS USING THE GROUNDBREAKING AND INTERACTIVE "TRENDALYZER" TECHNOLOGIES DEVELOPED BY HANS ROSLING, FOUNDER OF THE GAPMINDER FOUNDATION, AND HIS TEAM. THE PRESENTATIONS ARE BEING CREATED UNDER ENGAGE, A PROJECT DESIGNED TO RAISE THE VISIBILITY OF THE COSTS AND CONSEQUENCES OF AND THE SOLUTIONS FOR THE UNMET NEED FOR FAMILY PLANNING, HIGH LEVELS OF UNSAFELY

4b (Code:) (Expenses $ 1,237,932. including grants of $) (Revenue $ 17,147.)

DOMESTIC: PRB BEGAN A NEW PARTNERSHIP WITH THE LUCILE PACKARD FOUNDATION FOR CHILDREN'S HEALTH TO RAISE AWARENESS ABOUT THE WELL-BEING OF CHILDREN IN CALIFORNIA, COLLECTING CURRENT AND HISTORICAL DATA ON CHILDREN FOR COUNTIES, SCHOOL DISTRICTS, AND CITIES IN CALIFORNIA. THE DATA ARE BEING USED BY POLICYMAKERS, SERVICE PROVIDERS, GRANTSEEKERS, MEDIA, PARENTS, EDUCATORS, AND OTHERS WHO INFLUENCE CHILDREN'S LIVES, TO PROVIDE A COMMUNITY-BY-COMMUNITY PICTURE OF THE EDUCATIONAL, SOCIAL, ECONOMIC, AND PHYSICAL WELL-BEING OF CHILDREN. THE ANNIE E. CASEY FOUNDATION FUNDS PRB TO LEAD A SERIES OF WORKSHOPS FOR THE FOUNDATION'S NATIONWIDE NETWORK OF STATE-LEVEL KIDS COUNT PROJECTS. CHILD ADVOCATES LEARN TO ACCESS AND USE DATA FROM THE U.S. CENSUS BUREAU AND OTHER SOURCES TO MEASURE AND TRACK THE STATUS OF CHILDREN IN

4c (Code:) (Expenses $ 795,439. including grants of $) (Revenue $ 11,018.)

COMMUNICATIONS: IN FISCAL YEAR 2009, PRB LAUNCHED THE PRB BLOG "BEHIND THE NUMBERS". PRB STAFF WROTE FROM THE FIELD AS THEY WORKED IN RWANDA, ETHIOPIA, AND KENYA. THE SERIES "TO TELL THE TRUTH WITH STATISTICS" EXAMINES CONTROVERSIES THAT CAN ARISE WHEN INTERPRETING DEMOGRAPHIC DATA. PRB'S ENGLISH, FRENCH, AND SPANISH WEBSITES REACHED 1.2 MILLION UNIQUE VISITORS THIS YEAR. THESE VISITORS VIEWED PAGES 4.6 MILLION TIMES AND DOWNLOADED FILES 900,000 TIMES. VISITS REPRESENTED 228 COUNTRIES AND TERRITORIES WITHIN THESE REGIONS: AMERICAS, 943,000 VISITS; EUROPE, 212,000; ASIA, 170,000; AFRICA, 47,000; AND OCEANIA, 46,000. PRB PUBLISHED NEARLY 200 PIECES OF NEW CONTENT, INCLUDING WEB-EXCLUSIVE ARTICLES, REPORTS AND POLICY BRIEFS, DATA SHEETS, WEBCASTS AND AUDIOCASTS, BLOGS, AND ONLINE DISCUSSIONS. ON AUG. 12,

4d Other program services. (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ $ 9,019,562. *(Must equal Part IX, Line 25, column (B).)*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
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	X	
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	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
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		X
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		X
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		X
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		X
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	X	
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		X
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	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	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		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		X
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		X
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		X

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:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? *If "Yes," complete Schedule L, Part IV*	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV*	28b		X
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		X
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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
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		X
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		X
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	X	
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		X
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 VI*	37		X

Form **990** (2008)

Part 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	42			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	X	
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	2a	59			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		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).**					
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?			7a		X
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 was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	X	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	X	
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		
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**					
a	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: N/A					
a	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	10b				
11	**Section 501(c)(12) organizations.** Enter. N/A					
a	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.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b				

Part VI 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

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.

				Yes	No
1a	Enter the number of voting members of the governing body	1a 14			
b	Enter the number of voting members that are independent	1b 13			
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 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
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9a	Does the organization have local chapters, branches, or affiliates?		9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990		10	X	
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		X

Section 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	X	
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	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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:			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	15b		X
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		X
b	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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NY, DC

18 Section 6104 requires an organization to make its Forms 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

JAMES E. SCOTT - 202-483-1100

1875 CONNECTICUT AVE, NW, NO. 520, WASHINGTON, DC 20009-5728

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
GEORGE ALLEYNE TRUSTEE	1.00	X						0.	0.	0.
WENDY BALDWIN TRUSTEE	1.00	X						0.	0.	0.
FELICITY BARRINGER TRUSTEE	1.00	X						0.	0.	0.
JOEL E. COHEN TRUSTEE	1.00	X						0.	0.	0.
BERT T. EDWARDS TRUSTEE	1.00	X						0.	0.	0.
RICHARD F. HOKENSON TRUSTEE	1.00	X						0.	0.	0.
WOLFGANG LUTZ TRUSTEE	1.00	X						0.	0.	0.
ELIZABETH MAGUIRE TRUSTEE	1.00	X						0.	0.	0.
FAITH MITCHELL TRUSTEE	1.00	X						0.	0.	0.
FRANCIS L. PRICE TRUSTEE	1.00	X						0.	0.	0.
STANLEY K. SMITH TRUSTEE	1.00	X						0.	0.	0.
LEELA VISARIA TRUSTEE	1.00	X						0.	0.	0.
MONTAGUE YUDELMAN TRUSTEE	1.00	X						0.	0.	0.
WILLIAM P. BUTZ PRESIDENT/CEO/TRUSTEE	50.00	X		X				247,538.	0.	26,050.
JAMES E. SCOTT CFO/COO	50.00			X				162,118.	0.	21,317.
RICHARD SKOLNIK VP-INTERNATIONAL	50.00					X		130,561.	0.	10,725.
LINDA JACOBSEN VP-DOMESTIC PROGRAMS	50.00					X		129,564.	0.	18,939.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JAMES GRIBBLE PROGRAM DIRECTOR	50.00					X		132,859.	0.	13,412.
FARIYAL FIKREE PROGRAM DIRECTOR	50.00					X		129,328.	0.	15,019.
ELLEN CARNEVALE VP-COMMUNICATIONS	50.00					X		123,968.	0.	10,449.
RHONDA SMITH ASST VP-INTERNATIONAL	50.00					X		113,334.	0.	10,633.
1b Total ▶								1,169,270.	0.	126,544.

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 8

		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		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
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*	5		X

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
PC AID, 1875 CONNECTICUT AVE, SUITE 520, WASHINGTON, DC 20009-5728	IT SERVICES	118,152.

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 1

Part VIII Statement of Revenue

				(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	1 a Federated campaigns	1a	2,244.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	2,996,701.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,316,855.				
	g Noncash contributions included in lines 1a-1f: $						
	h **Total.** Add lines 1a-1f ▶			9,315,800.			
Program Service Revenue			Business Code				
	2 a MEMBERSHIP DUES		900099	86,204.	86,204.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶			86,204.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			146,583.			146,583.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶			38,728.	38,728.		
		(i) Real	(ii) Personal				
	6 a Gross Rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶						
	8 a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events ▶						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less. direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue		Business Code				
	11 a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d ▶						
	12 **Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶			9,587,315.	124,932.	0.	146,583.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do 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	1,615,706.	1,615,706.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	122,000.	122,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	374,150.	62,283.	304,737.	7,130.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,132,804.	1,945,401.	183,015.	4,388.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	191,008.	152,968.	37,162.	878.
9 Other employee benefits	622,580.	498,591.	121,129.	2,860.
10 Payroll taxes	206,276.	165,195.	40,133.	948.
11 Fees for services (non-employees).				
a Management				
b Legal	1,067.	98.	969.	
c Accounting	37,311.		37,311.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	8,637.			8,637.
g Other	1,962,154.	1,848,360.	113,794.	
12 Advertising and promotion				
13 Office expenses	406,393.	327,329.	76,358.	2,706.
14 Information technology	125,719.		125,719.	
15 Royalties				
16 Occupancy	625,358.	20,170.	605,188.	
17 Travel	786,817.	761,482.	24,147.	1,188.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	88,207.	64,506.	21,167.	2,534.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	61,207.		61,207.	
23 Insurance	25,093.		25,093.	
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.)				
a OVERHEAD ALLOCATION	0.	1,435,473.	<1,443,708.>	8,235.
b				
c				
d				
e				
f All other expenses	15,417.		15,317.	100.
25 **Total functional expenses.** Add lines 1 through 24f	9,407,904.	9,019,562.	348,738.	39,604.
26 **Joint Costs.** Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	43,219.	1	3,833.
	2	Savings and temporary cash investments	4,099,682.	2	4,754,983.
	3	Pledges and grants receivable, net		3	1,167,502.
	4	Accounts receivable, net	534,194.	4	42,656.
	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	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	55,240.	9	71,750.
	10a	Land, buildings, and equipment: cost basis — 10a 853,362.			
	b	Less: accumulated depreciation. Complete Part VI of Schedule D — 10b 634,107.	271,194.	10c	219,255.
	11	Investments - publicly traded securities	4,679,880.	11	4,333,743.
	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)	9,683,409.	16	10,593,722.
Liabilities	17	Accounts payable and accrued expenses	227,668.	17	336,360.
	18	Grants payable		18	
	19	Deferred revenue	3,562,154.	19	4,367,081.
	20	Tax-exempt bond liabilities		20	
	21	Escrow account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D	441,740.	25	466,227.
	26	**Total liabilities.** Add lines 17 through 25	4,231,562.	26	5,169,668.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	5,399,967.	27	5,372,174.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	51,880.	29	51,880.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	5,451,847.	33	5,424,054.
	34	Total liabilities and net assets/fund balances	9,683,409.	34	10,593,722.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	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	X	
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	X	
b	If "Yes," did the organization undergo the required audit or audits?	3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

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.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization	Employer identification number
POPULATION REFERENCE BUREAU	53-0214030

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state. ________
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)
9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete the Part III.)
10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)
11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II **Support Schedule for Organizations Described in Sections 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.)

Section A. Public Support

Calendar 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.")	6,993,946.	9,739,748.	8,136,247.	8,993,563.	9,315,800.	43,179,304.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 - 3	6,993,946.	9,739,748.	8,136,247.	8,993,563.	9,315,800.	43,179,304.
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						43,179,304.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	6,993,946.	9,739,748.	8,136,247.	8,993,563.	9,315,800.	43,179,304.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	186,809.	426,807.	477,599.	528,739.	146,584.	1,766,538.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						44,945,842.

12 Gross receipts from related activities, etc. (see instructions) | 12 | 940,049.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) | 14 | 96.07 %

15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f | 15 | 94.00 %

16a **33 1/3% support test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III 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	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2008** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2007** Schedule A, Part IV-A, line 27h	18	%

19a **33 1/3% support 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 ▶ ☐

b **33 1/3% support 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 ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047
2008
Open to Public Inspection

Name of the organization	Employer identification number
POPULATION REFERENCE BUREAU	53-0214030

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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 impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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

2 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
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ ____________

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $ ____________

8 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)? ☐ Yes ☐ No

9 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.

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** 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:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or 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 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table·

		Amount
c 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, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	51,880.				
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	51,880.				

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ ________ %

b Permanent endowment ▶ 100.00 %

c Term endowment ▶ ________ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by·

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		437,948.	274,306.	163,642.
d Equipment		415,414.	359,801.	55,613.
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				219,255.

Schedule D (Form 990) 2008

832052
12-23-08

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
DEFERRED DUES	56,465.
ACCRUED ANNUAL LEAVE	132,783.
DEFERRED RENT	264,313.
ADVANCES ON SUBLEASES	12,666.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25.)* ▶	466,227.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,587,315.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,407,904.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	179,411.
4	Net unrealized gains (losses) on investments	4	<207,204.>
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	<207,204.>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<27,793.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	9,380,111.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
a	Net unrealized gains on investments	2a	<207,204.>		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	<207,204.>
3	Subtract line **2e** from line **1**			3	9,587,315.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	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	0.
5	Total revenue. Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12.)			5	9,587,315.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	9,407,904.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	9,407,904.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**:				
a	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	0.
5	Total expenses. Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18.)			5	9,407,904.

Part XIV Supplemental Information

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 X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: PERMANENTLY RESTRICTED NET ASSETS CONSIST OF

CONTRIBUTIONS RECEIVED IN WHICH THE DONORS PERMANENTLY RESTRICTED THE

ASSETS FOR ENDOWMENT PURPOSES. THE INCOME EARNED ON THE INVESTMENTS IS

TEMPORARILY RESTRICTED UNTIL APPROPRIATED AND GENERALLY USED IN THE PERIOD

IT IS EARNED.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization: POPULATION REFERENCE BUREAU

Employer identification number: 53-0214030

Part I General Information on Grants and Assistance

1 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? [X] Yes [ ] No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on 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 Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ [ ]

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, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD UNIVERSITY, DEPARTMENT OF ECONOMICS - 1805 CAMBRIDGE ST - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	200,019.	0.			TO STUDY THE INTERSECTION BETWEEN POPULATION AND ECONOMIC DEVELOPMENT.
UNIVERSITY OF CALIFORNIA BERKELY, SCHOOL OF PUBLIC HEALTH - 239 UNIVERSITY HALL - BERKELY, CA 94720	99-6002123	115	800,927.	0.			TO STUDY THE INTERSECTION BETWEEN POPULATION AND ECONOMIC DEVELOPMENT.
HARVARD SCHOOL OF PUBLIC HEALTH, DEPARTMENT OF GLOBAL HEALTH AND POPULATION - 665 HUNTINGTON AVE - BOSTON, MA 02115	04-2103580	501(C)(3)	385,810.	0.			TO STUDY THE INTERSECTION BETWEEN POPULATION AND ECONOMIC DEVELOPMENT.
DUKE UNIVERSITY 213 SOCIAL SCIENCES BUILDING DURHAM, NC 27708	56-0532129	501(C)(3)	228,950.	0.			TO STUDY THE INTERSECTION BETWEEN POPULATION AND ECONOMIC DEVELOPMENT.

2 Enter total number of section 501(c)(3) and government organizations ▶ 4.

3 Enter total number of other organizations ▶

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

Schedule I (Form 990) 2008

832101 12-18-08

Part III **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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FELLOWSHIP ASSISTANCE	10	122,000.	0.		ASSISTANCE TO PHD STUDENTS TO STUDY THE INTERSECTION BETWEEN POPULATION AND ECONOMIC DEVELOPMENT.

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

PRB ISSUES A REQUEST FOR PROPOSALS, WHICH ARE CAREFULLY REVIEWED BY BOTH INTERNAL AND EXTERNAL REVIEWERS. ONCE THE SUCCESSFUL APPLICANTS ARE CHOSEN, THE RESEARCH EFFORTS ARE MANAGED BY A PHD ECONOMIST, AND A PROGRAM ADMINISTRATOR PROVIDES FINANCIAL OVERSIGHT.

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: POPULATION REFERENCE BUREAU

Employer identification number: 53-0214030

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Travel for companions
- [ ] Tax indemnification and gross-up payments
- [ ] Discretionary spending account
- [ ] Housing allowance or residence for personal use
- [ ] Payments for business use of personal residence
- [ ] Health or social club dues or initiation fees
- [ ] Personal services (e.g., maid, chauffeur, chef)

			Yes	No
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- [ ] Compensation committee
- [ ] Independent compensation consultant
- [ ] Form 990 of other organizations
- [x] Written employment contract
- [ ] Compensation survey or study
- [x] Approval by the board or compensation committee

			Yes	No
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
a	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of.			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WILLIAM P. BUTZ	(i)	247,538.	0.	0.	18,840.	7,210.	273,588.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JAMES E. SCOTT	(i)	162,118.	0.	0.	12,109.	9,208.	183,435.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							

SCHEDULE O (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

2008

Open to Public Inspection

Name of the organization: POPULATION REFERENCE BUREAU

Employer identification number: 53-0214030

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE POPULATION REFERENCE BUREAU INFORMS PEOPLE AROUND THE WORLD ABOUT POPULATION, HEALTH AND THE ENVIRONMENT, AND EMPOWERS THEM TO USE THAT INFORMATION TO ADVANCE THE WELL-BEING OF CURRENT AND FUTURE GENERATIONS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

PERFORMED ABORTION, AND HIGH LEVELS OF UNPLANNED PREGNANCIES. HELPING KEY AUDIENCES TRANSLATE RESEARCH FINDINGS INTO INFORMATION FOR POLICYMAKING CONTINUES TO BE THE FOCUS OF PRB'S CAPACITY-BUILDING EFFORTS. DURING THIS YEAR, PRB'S BRIDGE PROJECT, SUPPORTED BY THE U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT, ACCEPTED 13 DOCTORAL STUDENTS INTO THE POLICY COMMUNICATION FELLOWS PROGRAM. FELLOWS LEARNED TO USE THEIR RESEARCH FINDINGS IN POLICY BRIEFS AND PRESENTATIONS FOR POLICY AUDIENCES. PRB CONTINUED OUR WORK WITH THE EAST AFRICA POPULATION, HEALTH, AND ENVIRONMENT NETWORK TO INCREASE INFORMATION SHARING ACROSS THE REGION. THROUGH OUR BRIDGE PROJECT, FUNDED BY THE USAID, NETWORK LEADERS FROM ETHIOPIA, KENYA, RWANDA, TANZANIA, AND UGANDA MET IN RWANDA TO DEVELOP COMMUNICATIONS STRATEGIES. PRB ALSO LAUNCHED THE AFRICAPHE ONLINE DISCUSSION GROUP TO IMPROVE ACCESS TO INFORMATION ON PHE NEWS, PUBLICATIONS AND RESOURCES, CONFERENCES, CAPACITY-BUILDING OPPORTUNITIES, AND FUNDING OPPORTUNITIES. WITH CONTINUED FUNDING FROM THE FORD FOUNDATION, PRB'S MIDDLE EAST AND NORTH AFRICA PROGRAM PUBLISHED POLICY BRIEFS AND RESEARCH ON A RANGE OF REPRODUCTIVE HEALTH ISSUES. PRB ALSO HELD A POLICY COMMUNICATION SEMINAR IN EGYPT AT ASSIUT UNIVERSITY SCHOOL OF PUBLIC HEALTH FOR STUDENTS AND FACULTY MEMBERS. AT

SCHEDULE O
(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
2008
Open to Public Inspection

Name of the organization: POPULATION REFERENCE BUREAU

Employer identification number: 53-0214030

THE REQUEST OF THE WILLIAM AND FLORA HEWLETT FOUNDATION, PRB CONDUCTED ASSESSMENTS OF HOW DEMOGRAPHIC DATA ARE USED FOR DEVELOPMENT DECISION MAKING IN ETHIOPIA AND UGANDA. PRB'S TEAM INTERVIEWED 45 HIGH-LEVEL NATIONAL AND SUBNATIONAL POLICYMAKERS AND 25 JOURNALISTS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

THEIR COMMUNITIES. THE KIDS COUNT PROJECT OF THE ANNIE E. CASEY FOUNDATION PROVIDES POLICYMAKERS WITH AN ANNUAL REPORT CARD ON THE WELL-BEING OF AMERICA'S CHILDREN. AS PRB HAS DONE FOR THE PAST 17 YEARS, WE AGAIN THIS YEAR PROVIDED DATA ANALYSIS AND OTHER TECHNICAL ASSISTANCE TO THE PROJECT, INCLUDING THE 2009 KIDS COUNT DATA BOOK AND THE KIDS COUNT ONLINE DATABASE. PRB AUTHORED TWO REPORTS ON CHILDREN LIVING IN HIGH-POVERTY AND SEVERELY DISTRESSED NEIGHBORHOODS. WITH FUNDING FROM THE EUNICE KENNEDY SHRIVER NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT, PRB AND THE JOHNS HOPKINS POPULATION CENTER HELD THE THIRD ANNUAL SYMPOSIUM ON POLICY AND HEALTH, FOCUSING ON CLIMATE CHANGE, URBAN ADAPTATION, AND HEALTH RISKS IN DEVELOPING COUNTRIES.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS

2009, PRB RELEASED THE 2009 WORLD POPULATION DATA SHEET AT A PRESS BRIEFING IN WASHINGTON, D.C. MEDIA COVERAGE WAS BROAD. PRINT, TELEVISION, RADIO, AND ONLINE COVERAGE WAS AS VARIED AS CHINA CENTRAL TELEVISION, QATAR NEWS AGENCY, PRAVDA, RUSSIA, CARIBBEAN NET NEWS, ALLAFRICA.COM, XINHUA (CHINA), VOICE OF AMERICA, MARKETPLACE MORNING REPORT (NPR), AUSTRALIAN BROADCASTING CORPORATION, AL JAZEERA, SOUTH

SCHEDULE O (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

2008

Open to Public Inspection

Name of the organization: POPULATION REFERENCE BUREAU

Employer identification number 53-0214030

AFRICA BROADCASTING CORPORATION, BBC WORLD RADIO, MSNBC, CIHAN NEWS AGENCY (TURKEY), AND THE CITIZEN (SOUTH AFRICA). TYPICALLY, COVERAGE CONTINUES THROUGHOUT THE YEAR. THESE STORIES REACH MILLIONS OF VIEWERS AND LISTENERS. THE DATA SHEET, THE SUMMARY REPORT "WORLD POPULATION HIGHLIGHTS: KEY FINDINGS FROM PRB'S 2009 WORLD POPULATION DATA SHEET", THE WEBCAST OF THE PRESS BRIEFING INCLUDING PRESENTERS' POWERPOINT SLIDES, THE WORLD POPULATION CLOCK, AND A FOLLOW-UP DISCUSS ONLINE EXPANDED THE REACH OF THE DATA SHEET TO THOUSANDS OF PEOPLE IN JUST THE FIRST TWO MONTHS AFTER THE PRESS BRIEFING. FUNDING FOR THESE ACTIVITIES WAS PROVIDED BY THE UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT, THE WILLIAM AND FLORA HEWLETT FOUNDATION, THE DAVID AND LUCILE PACKARD FOUNDATION, AND MEMBER CONTRIBUTIONS.

FORM 990, PART VI, SECTION A, LINE 10: THE PRB AUDIT COMMITTEE REVIEWS THE DRAFT IRS FORM 990 PREPARED BY PRB'S AUDITING FIRM. AFTER REVIEW, THE 990 IS FORWARDED TO THE PRB EXECUTIVE COMMITTEE FOR FINAL REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C: EACH TRUSTEE, DIRECTOR, OFFICER, AND KEY EMPLOYEE COMPLETES A CONFLICT OF INTEREST QUESTIONNAIRE WHICH IS REVIEWED BY THE CFO/COO AND THE CHAIR OF THE AUDIT COMMITTEE. ANY QUESTIONS ARE FOLLOWED UP THE AUDIT COMMITTEE CHAIR AND A FULL REPORT IS GIVEN TO THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION B, LINE 15: PRESIDENT/CEO COMPENSATION IS DETERMINED BY THE PRB EXECUTIVE COMMITTEE AND APPROVED BY THE FULL BOARD OF TRUSTEES. THE CEO AND CFO REVIEW PERFORMANCE AND COMPENSATION FOR

SCHEDULE O
(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

2008

Open to Public Inspection

Name of the organization	Employer identification number
POPULATION REFERENCE BUREAU	53-0214030

DEPARTMENT VPS AND SENIOR STAFF. DEPARTMENT VPS REVIEW PERFORMANCE AND COMPENSATION FOR THEIR DEPARTMENT EMPLOYEES. THE VPS MEET TOGETHER TO REVIEW COMPENSATION RECOMMENDATIONS TO ENSURE EQUITY ACROSS DEPARTMENTS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 2C

OVERSIGHT OF AUDIT

THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS.

FORM 990, PART VII, SECTION A

AMENDED RETURN EXPLANATION

THE RETURN IS BEING AMENDED TO MODIFY PART VII TO INCLUDE WILLIAM P. BUTZ AS A DIRECTOR IN ADDITION TO BEING AN OFFICER.

SCHEDULE R
(Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**
▶ **See separate instructions.**

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization
POPULATION REFERENCE BUREAU

Employer identification number
53-0214030

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity

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

Part III Identification of Related Organizations Taxable as a Partnership

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

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(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 entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
PRB ASSOCIATES - 52-1278952 1875 CONNECTICUT AVE, NW, SUITE 520 WASHINGTON, DC 20009	INACTIVE-RESEARCH	DC	N/A	C CORP	0.	0.	100.00%

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to other organization(s)	1b		X
c Gift, grant, or capital contribution from other organization(s)	1c		X
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		X
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n Sharing of paid employees	1n		X
o Reimbursement paid to other organization for expenses	1o		X
p Reimbursement paid by other organization for expenses	1p		X
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)		
(2)		
(3)		
(4)		
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Part VI 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.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproportionate allocations?		(G) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No