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# 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.

· 2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Please use IRS Address change label or TOBIN PROJECT, INC. print or Name change type 20-3105790 Doing Business As Initial return See Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-ONE MIFFLIN PLACE, SUITE 240 617-547-2600 Instruc-Amende return 1,405,481. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion CAMBRIDGE, MA 02138 H(a) Is this a group return pending F Name and address of principal officer: DAVID MOSS Yes X No for affiliates? ONE MIFFLIN PLACE, SUITE 240 H(b) Are all affiliates included? Yes Tax-exempt status: X 501(c) (3 )**◀** (insert no) 4947(a)(1) or if "No," attach a list. (see instructions) J Website: ► WWW.TOBINPROJECT.ORG H(c) Group exemption number ▶ K Form of organization X Corporation Association Other > Year of formation 2005 M State of legal domicile MA Part I Summary Briefly describe the organization's mission or most significant activities: THE TOBIN PROJECT IS A CATALYST SEP 0 2 2010 Activities & Governance FOR NEW ACADEMIC THINKING ON THE MOST PRESSING NATIONAL CHALLENGES Check this box Lift the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 17 Total number of employees (Part V, line 2a) 5 1 Total number of volunteers (estimate if necessary) 6 Total gross unrelated business revenue from Part VIII column (C) line 12 Net unrelated business taxable income from Form 990-T, line 34 CEIVED Ō. 7a 0. 7b RS-OSC Prior Year **Current Year** 062 AUG 17 2010 2,102,966. 1,394,666. Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 39,005 10,815. Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and Per N, UT 11 2,141,971. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,405,481. 12 133,298. 35,133. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 468,203 744,526. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 8,331. 16a Professional fundraising fees (Part IX, column (A), line 11e) 186,642. b Total fundraising expenses (Part IX, column (D), line 25) 541,826 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 552,420. 1,151,658 1,332,079. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 990,313 Revenue less expenses. Subtract line 18 from line 12 73,402. Beginning of Current Year **End of Year** 2,671,743. 2,762,446. 20 Total assets (Part X, line 16) 48,363. 65,664. 21 Total liabilities (Part X, line 26) 2,623,380. Net assets or fund balances. Subtract line 21 from line 20 2,696,782. 22 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. Beclaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here DAVID MOSS, PRESIDENT OF BOD Type or print name and title Date Check If Preparer's identifying number (see instructions) Preparer's Paid selfsignature 7-19-10 employed > P00068702 Preparer's Firm's name (or RUSSELL, BRIER & CO. EIN ▶ yours if self-employed), Use Only TEN POST OFFICE SOUARE - 6TH FL BOSTON, MA 02109-4689 Phone no  $\triangleright$  617-523-7094 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

# Form 990 (2009) , TOBIN PROJEC 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		х	
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	Х	<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	-		<del> </del>
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		_X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,	-		
	Part VI.			
•	Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	Х	·
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	<del> </del>	1	
12	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional    12A   X	10		<del></del>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		<u>X</u>
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	-	
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	145		
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		$\neg$	
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions 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 of gross income from gaming activities 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
		Form !	9 <b>90</b> (2	2009)

			Yes	No
21'	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, line 3, 4, or 5 about compensation of the organization's current		1	
	and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
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	<u> </u>	
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	}		1
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	ŀ		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ľ		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	<u> </u>	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	}		
	instructions for applicable filing thresholds, conditions, and exceptions):	-		.,
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28ь	<u> </u>	X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			v
00	an officer, director, trustee, or direct or indirect owner? 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		Λ.
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
24	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?	30		Х
31	If "Yes," complete Schedule N, Part I		[	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
JŁ	Schedule N, Part II	22		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		Α_
00	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?	- 33		
•	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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	33		
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
			990 (	מחמו

			ı		Yes	No
1à	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	41	<b>-</b> i		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	<u> </u>	<u>)</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rules.	eporta	ible gaming			
_	(gambling) winnings to prize winners?	ı	ı	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1.			
	filed for the calendar year ending with or within the year covered by this return		17	-f	.,	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns.			2b	X	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		•			v
	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by t	his retum?	3a		Х
	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 standard account to a feature a		-	١.		v
_	financial account in a foreign country (such as a bank account, securities account, or other financial at the foreign country).	accou	nt)?	4a		X
D	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 I Financial Accounts.	bank a	ano			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			E-0		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?	otion?	•	5a 5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega			30		
Ū	Tax Shelter Transaction?	uonig	riombited	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e ora:	anization solicit			
	any contributions that were not tax deductible?	o.g.	amedion concil	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r aifts			
	were not tax deductible?		<b>3</b>	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods	and services			
	provided to the payor?			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	as req	uired		1	
	to file Form 8282?			7с		<u> X</u>
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			1	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	erson	al			
	benefit contract?			7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C		*	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization or a donor advised fund maintained by a section 509 (a)(3) supporting organization or a donor advised fund maintained by a section 509 (a)(3) supporting organization or a donor advised fund maintained by a section 509 (a)(3) supporting organization or a donor advised funds and section 509 (a)(3) supporting organization or a donor advised funds and section 509 (a)(3) supporting organization or a donor advised funds and section 509 (a)(3) supporting organization or a donor advised funds and section 509 (a)(3) supporting organization or a donor advised funds and section 509 (a)(3) supporting organization or a donor advised funds and section 509 (a)(3) supporting organization or a donor advised funds and section of the sec				- 1	
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exce at any time during the year?	ess ou	siness noidings		1	
9	Sponsoring organizations maintaining donor advised funds.			8		
	Did the organization make any taxable distributions under section 4966?			9a	ı	
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:				7	_
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		· <del>-</del>			
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.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	•	, , ,	12a	_ ]	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

sec	tion A. Governing Body and Management				
4.	Estable analysis of attacks and the first state of the st	1. 1	4	Yes	No
_	Enter the number of voting members of the governing body	1a	4		
ь 2	Enter the number of voting members that are independent	1b	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee?	p with any other			v
3		a direct arrangiares	2		X
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other person?	e direct supervision	_		Х
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 000 was filed?	3		X
5	Did the organization become aware during the year of a material diversion of the organization's asset		5		X
6	Does the organization have members or stockholders?	.5.	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers of the			- 43
	governing body?	inbois of the	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken				
	by the following:	<b>gc /</b>			
а	The governing body?		8a	Х	
	Each committee with authority to act on behalf of the governing body?		8b	X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code )			
				Yes	No
	Does the organization have local chapters, branches, or affiliates?		10a		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?		10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	ling the form?	11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
	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 cou	ıld give rise		.,	1
	to conflicts?		12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	'Yes," describe		v	
13	In Schedule O how this is done		12c	Х	- <del></del>
14	Does the organization have a written whistleblower policy?		13		$\frac{X}{X}$
15	Does the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approva	l by independent	14		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	и ву инференцент		-	
а	The organization's CEO, Executive Director, or top management official		15a	Х	•
b	Other officers or key employees of the organization		15b		<u> </u>
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		1.00		<del></del>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a		Ī	
	taxable entity during the year?		16a	1	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval	uate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organic	anization's			
	exempt status with respect to such arrangements?		16b		
<u>Sec</u>	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ►MA, CA, NY				
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	e for		
	public inspection. Indicate how you make these available. Check all that apply				
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	onflict of interest policy, a	and finai	ncial	
	statements available to the public.		_		
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd records of the organization	ation: 🕨		
	MITCHELL WEISS - 617-547-2600	<u></u>			
	ONE MIFFLIN PLACE, SUITE 240, CAMBRIDGE, MA 02138				
			Form 5	990 (2	2009)

932006 02-04-10

# 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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter ·0· in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if the organization did no (A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours	(c		Pos		n :app	lv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DAVID MOSS	4 00	.,							•	
PRESIDENT ARTHUR SEGEL	4.00	X		Х	<u> </u>		-	0.	0.	0.
TREASURER, CLERK	2.00	х		Х				0.	0.	_ 0.
DORIS KEARNS GOODWIN	1 00									
MEMBER JAMIE MAI	1.00	A	-			├-	<u> </u>	0.	0.	0.
MEMBER	1.00	x						0.	0.	0.
MITCHELL WEISS	1.00	1	$\vdash$		-	$\vdash$		0.		
EXECUTIVE DIRECTOR	50.00	ŀ				X		132,579.	0.	4,901.
									<del></del>	<u> </u>
						1 :				

			N PROJECT	I, INC.			20-3105	790 Page <b>9</b>
Pa	rt VI	Statement of Rever	nue	<del></del>				
,					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
gan	, b	Membership dues	1b					
an an		Fundraising events	1c					
ge	C	Related organizations	1d					
Sim		Government grants (contribut	· —		1			
ig e	f	All other contributions, gifts, gran		204 666				
운동		similar amounts not included abo		394,666.	<u>}</u>			
55	9		: 1a-1f \$	165.	1 204 666			r
<u> </u>	<u>_</u>	Total. Add lines 1a-1f			1,394,666.			
.	0.5			Business Code	4			
Program Service Revenue	2 a			<del>-</del>	-	-		
Ser					<del> </del>		<del></del>	
E a								· · · · · · · · · · · · · · · · · · ·
Par.	e							
ية إ	f		enue				···	
	9	Total. Add lines 2a-2f		<b>•</b>				
	3	Investment income (including	dıvıdends, ınter	est, and	Ī			
İ		other similar amounts)		<b>•</b>	10,815.			10,815.
	4	Income from investment of ta	x-exempt bond p	oroceeds <b>&gt;</b>			_	
	5	Royalties		<u> </u>				
			(ı) Real	(II) Personal				
ŀ	6 a							'
Ī	b	•						
	C	` '	L	<u> </u>	-			
İ		Net rental income or (loss) Gross amount from sales of	(i) Canadana	(v) Oth - ::			· · · · · · · · · · · · · · · · · · ·	
	/ a	assets other than inventory	(i) Securities	(II) Other				
	ь	Less: cost or other basis		<u> </u>				
	_	and sales expenses		-				
	c	Gain or (loss)			-			
		Net gain or (loss)		<b>&gt;</b>	1	į		
Other Revenue		Gross income from fundraising including \$	-	,				
eve		contributions reported on line						
œ		Part IV, line 18	а					-
Ę	b	Less: direct expenses	b					
٥	c	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	а					
ļ	ь	Less: direct expenses	b	L				
		: Net income or (loss) from gam	-	<u> </u>				
	10 a	Gross sales of inventory, less	returns					
j		and allowances	а					
		Less cost of goods sold	b					
}		Net income or (loss) from sale		<u> </u>				·····-
}	11 a	Miscellaneous Revenu		Business Code	ļ ļ			
	b							
	C				-			<del></del>
	d		·					
İ	е	Total. Add lines 11a-11d		<b></b>				<u> </u>
	12	Total revenue. See instructions		<b></b>	1,405,481.	0.	0.	10,815.
93200 02-04	9 -10				_			Form <b>990</b> (2009)

### Part IX Statement of Functional Expenses

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

	All other organizations must comp	lete column (A) but are			(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and			*	
	organizations in the U.S. See Part IV, line 21	30,743.	30,743.		
2	Grants and other assistance to individuals in				······································
	the U.S. See Part IV, line 22	4,390.	4,390.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.	ĺ			
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members			,	Jaguari Lai II
5	Compensation of current officers, directors,	<del></del>			***************************************
•	trustees, and key employees		•		
6	Compensation not included above, to disqualified				<del></del>
·	persons (as defined under section 4958(f)(1)) and	[			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	642,226.	440,624.	78,268.	123,334.
8	Pension plan contributions (include section 401(k)	042,220.	770,024.	10,200.	123,334.
o	and section 403(b) employer contributions)	10,313.	8,002.	1,529.	702
0	· / · · ·	41,233.	28,451.	4,948.	7 024
9	Other employee benefits	50,754.	35,020.	6,091.	782. 7,834. 9,643.
10	Payroll taxes	50,754.	33,020.	0,091.	9,043.
11	Fees for services (non-employees):				
a	Management	-			
ь	Legal	15 604		15 604	
c	Accounting	15,694.		15,694.	·
ď					
e	Professional fundraising services See Part IV, line 17				<del></del>
f	Investment management fees	F2 220	26 070	2 105	14 165
	Other	53,338.	36,978.	2,195.	14,165.
12	Advertising and promotion	800.	800.	01 170	
13	Office expenses	35,240.	7,883.	21,172.	6,185.
14	Information technology	58,164.	48,537.	9,359.	268.
15	Royalties	02 001	71 050	6 6 6 9 9	
16	Occupancy	92,881.	71,058.	6,630.	15,193.
17	Travel	47,557.	38,096.	3,304.	6,157.
18	Payments of travel or entertainment expenses	0.505			
	for any federal, state, or local public officials	2,587.	2,587.		
19	Conferences, conventions, and meetings	152,265.	152,265.		
20	Interest				
21	Payments to affiliates	1,5 0.10			·
22	Depreciation, depletion, and amortization	15,218.		15,218.	
23	Insurance	6,204.		6,204.	
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	HONORARIA	42,400.	42,400.		
b	DUES, BOOKS, AND SUBSCR	11,423.	2,859.	5,701.	2,863.
c	PUBLISHING	7,154.	7,154.		
d	MEALS	4,679.	338.	4,158.	183.
е	PAYROLL SERVICES	3,466.		3,466.	
f	All other expenses	3,350.	1,820.	1,495.	35.
25	Total functional expenses. Add lines 1 through 24f	1,332,079.	960,005.	185,432.	186,642.
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				
932010	0 02-04-10		<del></del>		Form <b>990</b> (2009)

932010 02-04-10

	rt X	Balance Sheet	11/			2 4	3103790 Page 11
		Data not one c			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing			171,737.	1	251,419.
	2	Savings and temporary cash investments			1,833,366.	2	1,752,301.
	3	Pledges and grants receivable, net		-	592,817.	3	692,897.
	4	Accounts receivable, net				4	<u>=_</u>
	5	Receivables from current and former officers, di	rectors	s. trustees, key	······································		
	-	employees, and highest compensated employee		· · · · · · · · · · · · · · · · · · ·			
	1	of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section		,	
	}	4958(f)(1)) and persons described in section 495					}
		Part II of Schedule L	(-/(-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6	
S.	7	Notes and loans receivable, net			<del></del>	7	
Assets	8	Inventories for sale or use		i –	<del>""</del>	8	<del></del>
ĕ	9	Prepaid expenses and deferred charges		<u> </u>	8,823.	9	11,067.
	10a	Land, buildings, and equipment: cost or other	l	ı	· · · · · · · · · · · · · · · · · · ·		
	ŀ	basis. Complete Part VI of Schedule D	10a	101,419.			
	ь	Less: accumulated depreciation	10b	101,419.	58,500.	10c	48,262.
	11	Investments - publicly traded securities			· •	11	
	12	Investments - other securities. See Part IV, line	11	F	···.	12	<del></del>
	13	Investments - program-related. See Part IV, line		<u> </u>	-	13	
	14	Intangible assets		Ť		14	<del></del>
	15	Other assets. See Part IV, line 11		Ţ	6,500.	15	6,500.
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	2,671,743.	16	2,762,446.
	17	Accounts payable and accrued expenses			12,860.	17	29,347.
	18	Grants payable			20,000.	18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	s, trus	tees, key employees,			<b>T</b>
ap		highest compensated employees, and disqualifi	ed per	sons. Complete Part II			
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D			15,503.	25	36,317.
	26	Total liabilities. Add lines 17 through 25			48,363.	26	65,664.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es	1	lines 27 through 29, and lines 33 and 34.					
anc anc	27	Unrestricted net assets			2,402,434.	27	2,397,973. 298,809.
Net Assets or Fund Balances	28	Temporarily restricted net assets		_	220,946.	28	298,809.
ב ק	29	Permanently restricted net assets				29	
3		Organizations that do not follow SFAS 117, cl	heck h	ere 🕨 🔙 and			
9		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds		L		30	
ASS	31	Paid-in or capital surplus, or land, building, or ed	Juipme	nt fund	<u> </u>	31	
Ę.	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
Z	33	Total net assets or fund balances			2,623,380.	33	2,696,782.
	34	Total liabilities and net assets/fund balances			2,671,743.	34	2,762,446.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

· OMB No 1545-0047

Open to Public Inspection

Name of the organization

**Employer identification number** TOBIN PROJECT, INC. 20-3105790 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 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.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. **b** Type II c Type III · Functionally integrated 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). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No 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 supported organization(s) (iii) Type of (iv) Is the organization (v) Did you notify the (vi) is the (i) Name of supported (ii) EIN (vii) Amount of organization organizátion in col in col (i) listed in your organization in col organization (I) organized in the support (described on lines 1-9 (i) of your support? governing document? US? above or IRC section (see instructions)) Yes No Yes No Yes No

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Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Schedule A (Form 990 or 990 EZ) 2009 TOBIN PROJECT, INC. 20-31057

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.)

Sec	ction A. Public Support			- <del>-</del>			
Cal	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and				.,		17.5.0.
	membership fees received. (Do not						
	include any "unusual grants.")	125,000.	787,900.	1831901.	2102801	1394501.	6242103.
2	Tax revenues levied for the organ-	,	, ,			20310010	02121031
	ization's benefit and either paid to		1	,		•	
	or expended on its behalf						
3	The value of services or facilities					· · · · · · · · · · · · · · · · · · ·	<del></del>
•	furnished by a governmental unit to						
	the organization without charge						
А	Total. Add lines 1 through 3	125,000.	787,900.	1831901.	2102801.	1394501.	6242103.
5	The portion of total contributions	123,000.	101,300.	1031701.	2102001.	1394301.	0242103.
J	·		,				
	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)		·				3673218.
	Public support. Subtract line 5 from line 4						2568885.
	ction B. Total Support	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	125,000.	787,900.	1831901.	2102801.	1394501.	6242103.
8	Gross income from interest,						
	dividends, payments received on		]	ľ	,		
	securities loans, rents, royalties						
	and income from similar sources	514.	11,701.	28,978.	39,005.	10,815.	91,013.
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				,	,	6333116.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
	organization, check this box and stop	here					<b>▶</b> X
Sec	tion C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2009 (la	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2008	Schedule A, Part I	ll, line 14			15	%
16a	33 1/3% support test - 2009. If the or	rganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or mo	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				▶□
b	33 1/3% support test - 2008. If the or	rganization did not	check a box on lir	ne 13 or 16a, and l	ine 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization quali					•	▶□
17a	10% -facts-and-circumstances test				13, 16a, or 16b. ar	nd line 14 is 10% o	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶ □
b	10% -facts-and-circumstances test					a, and line 15 is 1	
-	more, and if the organization meets th						
	organization meets the *facts-and-circ						▶□
18	Private foundation. If the organization						
<del></del>		GIG TIOL CHECK & L	200 011 1111E 10, 108	, 100, 11a, 01 1/D	, check tills box ar	io see instructions	

Schedule A (Form 990 or 990-EZ) 2009

### SCHEDULE C. (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

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

· OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

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

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

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C.

• Section 527 organizations: Complete Part I-A only.

Open to Public Inspection

<ul> <li>Section 501(c)(3) organizations that I</li> </ul>	nave filed Form 5768 (election u	inder section 501(h))	Complete Part II-A Do not co	omplete Part II-B.
Section 501(c)(3) organizations that I				•
If the organization answered "Yes," to			. (, //,	
• Section 501(c)(4), (5), or (6) organizat	•	,		
Name of organization			Emp	oyer identification number
TOBIN P	ROJECT, INC.		•	20-3105790
	anization is exempt und	der section 501(c	or is a section 527 o	
Provide a description of the organiz	<del></del>		·	
2 Political expenditures			<b>&gt;</b> \$	
3 Volunteer hours			•	·
				·
Part I-B Complete if the org	anization is exempt und	der section 501(c	:)(3).	
1 Enter the amount of any excise tax			<b>▶</b> \$	
2 Enter the amount of any excise tax	, ,			
3 If the organization incurred a section			•	Yes No
4a Was a correction made?		,		Yes No
b If "Yes," describe in Part IV.				
	anization is exempt und	der section 501(c	), except section 501(	c)(3).
1 Enter the amount directly expended	by the filing organization for se	ection 527 exempt fun	ction activities >\$	
2 Enter the amount of the filing organ	zation's funds contributed to of	ther organizations for	section 527	
exempt function activities		•		
3 Total exempt function expenditures	Add lines 1 and 2. Enter here a	and on Form 1120-PO		
line 17b			<b>▶</b> \$	
4 Did the filing organization file Form	1120-POL for this year?		·	Yes No
5 Enter the names, addresses and en	ployer identification number (El	IN) of all section 527 p	political organizations to which	h payments were made.
For each organization listed, enter t				
that were promptly and directly deli-	vered to a separate political org	anization, such as a s	eparate segregated fund or a	a political action committee
(PAC) If additional space is needed	, provide information in Part IV.			
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's	contributions received and
•			funds. If none, enter -0	promptly and directly delivered to a separate
				political organization
				If none, enter -0
			L .	
	<del>_</del> ,			

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Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009	TOBIN PRO	JECT, INC.		20-3	105790 Page 2
Part II-A Complete if the org		empt under section	on 501(c)(3) and fil	ed Form 5768	
(election under sec					<del> </del>
A Check If the filing organizat	•	- ·			
Limit	s on Lobbying Exp			(a) Filing organization's	(b) Affiliated group totals
(The term "expend	litures" means am	ounts paid or incurred	.)	totals	iolaio
1a Total lobbying expenditures to influ	ience public apinior	(grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influ				25,416.	
c Total lobbying expenditures (add lii				25,416.	
d Other exempt purpose expenditure	es			1,306,663.	
e Total exempt purpose expenditures	s (add lines 1c and	1d)		1,332,079.	
f Lobbying nontaxable amount. Ente	r the amount from t	he following table in bo	th columns.	208,208.	
If the amount on line 1e, column (a) o	r (b) is: The lo	bbying nontaxable an	nount is:		
Not over \$500,000	20% (	of the amount on line 1e			
Over \$500,000 but not over \$1,000	),000 \$100,i	000 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,	000 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000 \$225,	000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,00	0,000			
			<u>.</u>	<u> </u>	
g Grassroots nontaxable amount (en	•			52,052.	
h Subtract line 1g from line 1a. If zero				0.	<u> </u>
i Subtract line 1f from line 1c. If zero	•			0.	<u>.                                    </u>
j If there is an amount other than zer		or line 11, did the organiz	ation file Form 4/20	ſ	
reporting section 4911 tax for this		veraging Period Under	Costina FO1/h)		Yes No
,	ations that made a	section 501(h) election the instructions for line	n do not have to comp		
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(ь) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount				208,208.	208,208.
<b>b</b> Lobbying ceiling amount		1			
(150% of line 2a, column(e))		<u> </u>			312,312.
c Total lobbying expenditures				25,416.	25,416.
d Grassroots nontaxable amount				52,052.	52,052.
e Grassroots ceiling amount	, · , · · · · · · · · · · · · · · · ·			,	
(150% of line 2d, column (e))				- 1111	78,078.

Schedule C (Form 990 or 990-EZ) 2009

f Grassroots lobbying expenditures

### Schedule C (Form 990 or 990 EZ) 2009 TOBIN PROJECT, INC. 20-310579 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities? If 'Yes,' describe in Part IV j Total Add lines 1c through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  bif 'Yes,' enter the amount of any tax incurred by organization managers under section 4912   If the filing organization of any tax incurred by organization managers under section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 4912   If the filing organization incurred a section 501(c)(6), or section 501(c)(6), or section 501(c)(6).  Torright III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."  1 Dues, assessments and similar amounts from members  2 Did the organization agree to carryover lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  2 Carryover from last year  5 Total  3 Aggregate amount reported in section 6033(e)(1)(A) notice			<u> </u>	a)	(1	b)
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expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  5 Supplemental Information	d If the filing organization incurred a art III-A Complete if the or 501(c)(6).  Were substantially all (90% or mo Did the organization make only in Did the organization agree to care art III-B Complete if the or 501(c)(6) if BOTH F	ore) dues received nondeductible by members?  -house lobbying expenditures of \$2,000 or less?  -yover lobbying and political expenditures from the prior year?  ganization is exempt under section 501(c)(4), see		2 3 (5), or se	ection	
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b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  5 Supplemental Information	d If the filing organization incurred a art III-A Complete if the or 501(c)(6).  Were substantially all (90% or mode 2 Did the organization make only in 3 Did the organization agree to carred art III-B Complete if the or 501(c)(6) if BOTH Furyes."  Dues, assessments and similar and	ore) dues received nondeductible by members? -house lobbying expenditures of \$2,000 or less? -yover lobbying and political expenditures from the prior year? -ganization is exempt under section 501(c)(4), second III-A, lines 1 and 2 are answered "No" OR if	Part III-A, li	2 3 (5), or se ne 3 is a	ection	
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	d If the filing organization incurred a art III-A Complete if the or 501(c)(6).  Were substantially all (90% or mode or mode or mode or mart III-B Complete if the or 501(c)(6) if BOTH F "Yes."  Dues, assessments and similar and Section 162(e) nondeductible lobe expenses for which the section a Current year b Carryover from last year c Total  Aggregate amount reported in self notices were sent and the amode does the organization agree to care	ore) dues received nondeductible by members?  chouse lobbying expenditures of \$2,000 or less?  gover lobbying and political expenditures from the prior year?  ganization is exempt under section 501(c)(4), see  Part III-A, lines 1 and 2 are answered "No" OR if  mounts from members  bying and political expenditures (do not include amounts of political expenditures)  527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues  unt on line 2c exceeds the amount on line 3, what portion of the	Part III-A, li	2 3 (5), or sene 3 is a 1 2a 2b 2c 3	ection	
emplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; and Part II-B, line 1i Also, complete this part	d If the filing organization incurred a art III-A Complete if the or 501(c)(6).  Were substantially all (90% or mo Did the organization make only in Did the organization agree to carr art III-B Complete if the or 501(c)(6) if BOTH F "Yes."  Dues, assessments and similar at Section 162(e) nondeductible lob expenses for which the section a Current year b Carryover from last year c Total Aggregate amount reported in se If notices were sent and the amoundoes the organization agree to care expenditure next year?	pre) dues received nondeductible by members? Thouse lobbying expenditures of \$2,000 or less? Prover lobbying and political expenditures from the prior year?  ganization is exempt under section 501(c)(4), see Part III-A, lines 1 and 2 are answered "No" OR if Immounts from members  bying and political expenditures (do not include amounts of post 527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the arryover to the reasonable estimate of nondeductible lobbying arr	Part III-A, li	2 3 (5), or sene 3 is a 1 2a 2b 2c 3	ection	
	d If the filing organization incurred a Part III-A Complete if the or 501(c)(6).  1 Were substantially all (90% or mo 2 Did the organization make only in 3 Did the organization agree to care Part III-B Complete if the or 501(c)(6) if BOTH F "Yes."  1 Dues, assessments and similar at 2 Section 162(e) nondeductible lob expenses for which the section a Current year b Carryover from last year c Total 3 Aggregate amount reported in se 4 If notices were sent and the amoundoes the organization agree to care expenditure next year? 5 Taxable amount of lobbying and	pre) dues received nondeductible by members? Thouse lobbying expenditures of \$2,000 or less? Prover lobbying and political expenditures from the prior year?  ganization is exempt under section 501(c)(4), see Part III-A, lines 1 and 2 are answered "No" OR if Immounts from members  bying and political expenditures (do not include amounts of post- 527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the arryover to the reasonable estimate of nondeductible lobbying are political expenditures (see instructions)	Part III-A, li	2 3 (5), or sene 3 is a 1 2a 2b 2c 3	ection	

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization **Employer identification number** TOBIN PROJECT, INC. 20-3105790 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) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat □ Preservation of a certified historic structure Preservation of open space Complete lines 2a through 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 Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2¢ d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 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 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 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: Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

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

Sche	dule D (Form 990) 2009, TOBIN P	ROJECT, I	INC.				20-	3105790	Page 2
Par	t III Organizations Maintaining C	collections of	Art, His	torical Tr	easures, o	r Othe	r Similar As	sets (contin	ued)
3	Using the organization's acquisition, accessi	on, and other rec	ords, chec	k any of the	following that	are a sı	gnificant use of	its collection	items
•	(check all that apply):								
а	Public exhibition		d <u>                                     </u>	Loan or exc	change progra	ms			
b	Scholarly research		е 📖	Other	<u>.                                      </u>				
¢	Preservation for future generations								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.								
5									
	to be sold to raise funds rather than to be m	aintained as part	of the orga	anization's c	ollection?			Yes	No_
Par	TIV Escrow and Custodial Arran	gements. Con	nplete if or	ganization a	nswered "Yes	to Forr	n 990, Part IV, li	ne 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.					·		
1a	Is the organization an agent, trustee, custod	ian or other intern	nediary for	contribution	ns or other ass	ets not	ıncluded		
	on Form 990, Part X?							Yes	No No
b	if "Yes," explain the arrangement in Part XIV and complete the following table:								
								Amount	
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on F	orm 990, Part X, I	ine 21?					Yes	☐ No
Ь	If "Yes," explain the arrangement in Part XIV	<u> </u>							
Pa	t V Endowment Funds. Complete	f the organization	answered	I "Yes" to Fo	orm 990, Part I	V, line 1	0.		
		(a) Current yea	r (b) f	Prior year	(c) Two years	back	(d) Three years ba	ick (e) Foury	ears back
1a	Beginning of year balance			<u></u>			1-2 <b>4</b> 2		
þ	Contributions								
C	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance				<u> </u>				
2	Provide the estimated percentage of the year	r end balance hel	d as.						
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
С	Term endowment	%							
За	Are there endowment funds not in the posse	ession of the orga	nızatıon th	at are held a	and administer	ed for th	ie organization		
	by:							\	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	if "Yes" to 3a(II), are the related organizations	s listed as require	d on Sche	dule R?				3b	
4	Describe in Part XIV the intended uses of the								
Par	t VI Investments - Land, Building			ee Form 990	), Part X, line 1	0			
	Description of investment	(a) Cost o		1 ''	t or other	• •	cumulated	(d) Book	value
		basis (inve	stment)	basis	(other)	dep	reciation		
1a	Land					•			
b	Buildings			ļ					
С	Leasehold improvements				2,578.		804.		,774.
d	Equipment			9	8,841.		52,353.	46	,488.
е_	Other								
[otal	Add lines 1a through 1e (Column (d) must e	oual Form 990 P	art X colu	mn (R) line	10(c) )			48	. 262

Schedule D (Form 990) 2009

TOBIN PROJECT, INC.

Schedule D (Form 990) 2009

932053 02-01-10

_	dule D (Form 990) 2009, TOBIN PROJECT, INC.		<del> </del>		3105/90 Page 4
Par	t XI, Reconciliation of Change in Net Assets from Form 990 t	to Audited	I Financial State	emen	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		1,405,481.
2.	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,332,079.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3_		73,402.
4	Net unrealized gains (losses) on investments		4		<del> </del>
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 through 8		9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		10		73,402.
Par	t XII   Reconciliation of Revenue per Audited Financial Statem	nents With	n Revenue per l	Return	
1	Total revenue, gains, and other support per audited financial statements			1	1,405,481.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	t 1			
а	Net unrealized gains on investments	2a		4	
þ	Donated services and use of facilities	2b	· · · · · · · · · · · · · · · · · · ·	- <b>∤</b> }	
С	Recoveries of prior year grants	2c	<del></del>	-	
d	Other (Describe in Part XIV.)	2d		-	
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,405,481.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	investment expenses not included on Form 990, Part VIII, line 7b	4a		- 1	
b	Other (Describe in Part XIV.)	4b		-	
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 147.		5	1,405,481.
	t XIII Reconciliation of Expenses per Audited Financial Stater	nents Wit	n Expenses per	-	
1	Total expenses and losses per audited financial statements			1	1,332,079.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 - 1		1	
а	Donated services and use of facilities	2a		-	
Ь	Prior year adjustments	2b		-ŧŀ	
С	Other losses	2c		-[	
d	Other (Describe in Part XIV)	2d		┥. ╿	0
е	Add lines 2a through 2d			2e	1,332,079.
3	Subtract line 2e from line 1			3	1,332,079.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1.1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIV)	4b		-	
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,332,079.
	t XIV Supplemental Information		and to Dark N/ house	45	01 - D - 137 b 4 D - 1
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part				
X, lin	e 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con	nplete this pa	art to provide any ad	iditional	Information.
			<del></del>		
			···		
			<del></del>		
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					<del></del>

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. INC TOBIN PROJECT, Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990)

Employer identification number 20-3105790 Inspection X Yes 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 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

General Information on Grants and Assistance

Part I

criteria used to award the grants or assistance?

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 Congruence to Congr	ocedures for mon	itoring the use of grant	funds in the United	d States	\" boxossoc costorios	#00 000 wind of "00"	W 120 04 600 000.
3	\$5,000. Check thi	s box if no one recipier	nt received more th	an \$5,000. Use Pa	rt IV and Schedule F1	(Form 990) if addition	nal space is needed
(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
TRUSTEES OF U. OF PENNSYLVANIA 3400 CHESTNUT STREET PHILADELPHIA , PA 19104			15,870.	0			FOR PROFESSOR TOM BAKER TO UNDERTAKE "BEHAVIORAL ECONOMICS AND REGULATORY DESIGN: CONSUMER
THE NEW SCHOOL INSTITUTIONAL GIVING - 79 FIFTH AVENUE, 17TH FLOOR - NEW YORK, NY 10003			6,325.	0.			FOR PROFESSOR JULIA OTT'S "MARKET CULTURES WORKING GROUP"
							·
<ul> <li>2 Enter total number of section 501(c)(3) and government organizations</li> <li>3 Enter total number of other organizations</li> </ul>	and government or	rganizations					2.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2009

TOBIN PROJECT, Schedule | (Form 990) 2009

Page 2

20-3105790

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

PART II, LINE 1, COLUMN (H):

OF PENNSYLVANIA NAME OF ORGANIZATION OR GOVERNMENT: TRUSTEES OF U. (H) PURPOSE OF GRANT OR ASSISTANCE: FOR PROFESSOR TOM BAKER TO UNDERTAKE

932102 02-02-10

Schedule I (Form 990) 2009 - Part IV Supplemental	TOBI	N PROJECT,	INC.		20-3	3105790 Page 2
Part M   Supplemental	Intormation	<u>-</u>				
"BEHAVIORAL ECON	OMICS AND	REGULATORY	DESIGN:	CONSUMER	INSURANCE	PRODUCTS"
RESEARCH PROJECT						
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#### SCHEDULE O.

(Form 990)

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Attach to Form 990. Internat Revenue Service Name of the organization **Employer identification number** INC. 20-3105790 TOBIN PROJECT, FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: OF THE 21ST CENTURY - PROMOTING RICHER PUBLIC DISCOURSE, STRONGER PUBLIC GOVERNANCE, AND BETTER PUBLIC POLICY THROUGH GREATER UNDERSTANDING. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: -ONE BASED ON THE DISCUSSION PAPERS WRITTEN FOR THE 2008 "GOVERNMENT AND MARKETS" CONFERENCE AND INTENDED FOR AN ACADEMIC AUDIENCE -ONE BASED ON NEW SCHOLARSHIP IN THE FIELD OF ECONOMIC REGULATION AND INTENDED FOR POLICYMAKERS FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: B) DEVELOPMENT OF NEW BOOK, BASED ON DISCUSSION PAPERS WRITTEN FOR CONFERENCE FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ADDITIONAL PROGRAM SERVICE ACCOMPLISHMENTS IN 2009 INCLUDE INITIATION OF A RESEARCH PROGRAM ON ECONOMIC INEQUALITY AND MOBILITY, CONTINUED DEVELOPMENT OF A COLLABORATIVE ONLINE TECHNOLOGY PLATFORM, AND POLICY OUTREACH EFFORTS. INCLUDING GRANTS OF \$ 0. EXPENSES \$ 361019. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11: THE OPERATIONS MANAGER HAS PRIMARY RESPONSIBILITY FOR WORKING WITH THE EXTERNAL ACCOUNTANTS TO PREPARE AND REVIEW THE FORM 990. AFTER THE OPERATIONS MANAGER HAS REVIEWED THE FORM,

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

932211 02-03-10

Schedule O (Form 990) 2009

### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

TOBIN PROJECT, INC.

Employer identification number 20-3105790

STEPHANIE KHURANA, THE ACTING EXECUTIVE DIRECTOR, PROVIDES AN ELECTRONIC

COPY TO THE BOARD MEMBERS AND ASKS THEM TO REVIEW IT AND SUBMIT ANY

OUESTIONS OR CONCERNS IN WRITING.

FORM 990, PART VI, SECTION B, LINE 12C: TO ENSURE THAT THE CORPORATION OPERATES IN A MANNER CONSISTENT WITH ITS CHARITABLE PURPOSES, PERIODIC REVIEWS SHALL BE CONDUCTED. THE PERIODIC REVIEW SHALL DETERMINE A) WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE AND ARE THE RESULT OF ARM'S LENGTH BARGAINING; B) WHETHER ACQUISITIONS OF OTHER ENTITIES RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT; AND C) WHETHER PARTNERSHIPS AND JOINT VENTURE ARRANGEMENTS CONFIRM TO WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE PAYMENTS FOR GOODS AND SERVICES, AND DO NOT RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT. EACH OFFICER, DIRECTOR AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON: A) HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY; B) HAS READ AND UNDERSTANDS THE POLICY; C) HAS AGREED TO COMPLY WITH THE POLICY; AND D) UNDERSTANDS THAT THE CORPORATION IS A CHARITABLE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

FORM 990, PART VI, SECTION B, LINE 15A: THE TOBIN PROJECT USES SEVERAL

MEANS TO ESTABLISH SALARIES FOR ALL POSITIONS. FIRST, WE UTILIZE THE

ECONOMIC RESEARCH INSTITUTE'S NONPROFIT SALARY ASSESSOR SOFTWARE, WHICH

ALLOWS US TO COMPARE SALARY DATA FROM SIMILAR ORGANIZATIONS (BOTH TYPE OF

ORGANIZATION AND SIZE OF ASSETS). SECOND, THE TOBIN PROJECT USES INFORMAL

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

Schedule O (Form 990) 2009

### SCHEDULE $Q_{\gamma}$ (Form 99Q)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization  TOBIN PROJECT, INC.	Employer identification number 20-3105790
SURVEYS TO DETERMINE COMPENSATION AT SIMILAR ORGANIZATION	S. STARTING
SALARIES, AS WELL AS ALL SALARY INCREASES, ARE MEANT TO B	E SIMILAR TO
SALARIES AND INCREASES FOR COMPARABLE POSITIONS AT COMPAR	ABLE
ORGANIZATIONS.	
FORM 990, PART VI, SECTION C, LINE 18: UPON REQUEST	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	AKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FIN	ANCIAL STATEMENTS
AVAILABLE AS A PUBLIC FILE AT THE CLIENT'S SITE. A COPY W	ILL BE MADE AND
SENT TO ANYONE WHO REQUESTS A COPY.	