

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

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)

OMB No 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service A For the 2009 calendar year, or tax year beginning . 2009, and ending , 20 Employer identification number B Check if applicable Please C Name of organization JIM H. MCCLUNG LIGHTING RESEARCH FOUNDATION, 31-1808884 Doing Business As change label or onnt or Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change type C/O DAN SMITH, 1170 PEACHTREE 2400 770-853-1400 Specific City or town, state or country, and ZIP + 4 Terminated Instruc Amended ATLANTA. GΑ 30309 Au.c. G Gross receipts \$ 740 Application pending F Name and address of principal officer H(a) is this a group return for Yes X No H(b) Are all affiliates included? Tax-exempt status If "No," attach a list (see instructions) 501(c) ((insert no) 4947(a)(1) or) 4 Website **b** H(c) Group exemption number L Year of formation 2001 M State of legal domicile GA Form of organization Corporation Trust Association Other > Summary Briefly describe the organization's mission or most significant activities Governance if 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) Activities & Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7 a **b** Net unrelated business taxable income from Form 990-T, line 34 . . **Current Year** Contributions and grants (Part VIII, line 1h) 500 500 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A); lines\3.44 and 7d) 010 20,912 240 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 Total revenue - add lines 8 through 11 (must-equal, Rart VIII, column (A), line 12) 12 21,412 740 Grants and similar amounts paid (Part IX, column (A), lines 1:3) 13 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses, Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 226 76 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 226 76 Revenue less expenses Subtract line 18 from line 12. 21,186 664 Beginning of Year End of Year Assets (20 Total assets (Part X, line 16) 1,820,396 1,821,060 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 1,820,396 1,821,060 Part II Signature Block M Under penalties of perjunct declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge GASand belief, it is Garation of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of office Here ယ Type or print name and title Check if Preparer's identifying number Preparer's Paid (see instructions) signature 🖁 employed > ≓Preparer's Firm's name (or yours if self-employed), address, and ZIP + 4 Use Only Phone no

Form 990 (2009)

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 9	90 (2009)			Page 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any 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		×
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,			
	VII, 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			, š.
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more		6	ا ف
	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		ľ	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	,	2	**** \$
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		×
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	,	+ \$	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ž	`	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, 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 or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		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		х
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1
	If "Yes," complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

Part	V Checklist of Required Schedules (continued)			
			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 1? 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			
-0	organization's current and former officers, directors, trustees, key employees, and highest compensated	1		ĺ
	employees? If "Yes," complete Schedule J	23		x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	ļ	ļ	
	24b through 24d and complete Schedule K. If "No," go to question 25	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		×
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	175	 	
C		24c		x
	to defease any tax-exempt bonds?	24d	 	×
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u	_	
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25-		١
	with a 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		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	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	1		1
	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,			ļ
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			ļ
	Schedule L, Part IV	28b	<u> </u>	X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c	ļ	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	1		}
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		İ	
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	 •		
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
	10 140 to 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	1 7 7		

	n 990 (2009)	most of December Coming A			/ Page Z
		ement of Program Service A be the organization's mission			,
2	the prior Forn	n 990 or 990-EZ?	ficant program services during the y	ear which were not listed on	Yes X No
3	If "Yes," desc	ribe these new services on Se nization cease conducting, o	chedule O r make significant changes in how it	conducts, any program	
	If "Yes," desc Describe the Section 501(a	ribe these changes on Sched exempt purpose achievemen c)(3) and 501(c)(4) organizat	ule O ts for each of the organization's three ions and section 4947(a)(1) trusts are nd revenue, if any, for each program s	largest program services by expensive amount of g	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 C	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 d	Other progra	ım services (Describe in Sche	edule O)		
	(Expenses \$	including gra	•	\$)	
4 e	Total progra	ım service expenses ▶		· · · · · · · · · · · · · · · · · · ·	, '

Part	V Statements Regarding Other IRS Filings and Tax Compliance		 -	r
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable	-		
	Effet the hambel of Forms VV-20 included in fine to Effect of interapplicable,			l
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ĺ		ĺ
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			``
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	કુ		
	Instructions)			`
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	3a		X
	this return?	3 b		X
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	36	$\vdash \vdash \vdash$	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1
	account)?	4a		x
	If "Yes," enter the name of the foreign country			<u> </u>
U	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank	** '\$		
	and Financial Accounts		'	
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	· · · · ·	
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	-		
_	Prohibited Tax Shelter Transaction?	5 c	!	1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6 b	L'	
7	Organizations that may receive deductible contributions under section 170(c).	1. 5		,
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?	7 a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			ĺ
	required to file Form 8282?	7 c	ļ	
	If "Yes," indicate the number of Forms 8282 filed during the year	-	/* *	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1 48	3.	
	benefit contract?	7 e	<u> </u>	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	├	X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g	 	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7 5		
	required?	7 h	 	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	} .	1	*
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	1 -	. ~ . X
9	Sponsoring organizations maintaining donor advised funds.	-	 	
	Did the organization make any taxable distributions under section 4966?	9a	5	- £
	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b	 	X
	Section 501(c)(7) organizations. Enter		T	
	Initiation fees and capital contributions included on Part VIII, line 12	,		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1.	1	
	Section 501(c)(12) organizations. Enter	1	(
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	3,		
	amounts due or received from them)	, , , , , , , , , , , , , , , , , , ,		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		X
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

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.

Sect	ion A. Governing Body and Management			
	1.1		Yes	No
а	Enter the number of voting members of the governing body			
1b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	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?	7 b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ū	the year by the following			
•	The governing body?	8a	Х	
a	Each committee with authority to act on behalf of the governing body?	8 b		
ь	· · · · · · · · · · · · · · · · · · ·	0.0		
9	Is there any officer, director, 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	9a		Х
<u></u>	ion B. Policies (This Section B requests information about policies not required by the Internal	Ja		
	enue Code)			
Neve	anue coue j		Yes	No
		40-	- 163	X
	Does the organization have local chapters, branches, or affiliates?	10a		
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 filing the			17
	form?	11		X
	Desribe 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 could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			i
	describe in Schedule O how this is done	12c		
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?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
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		Х
b		100		·
U	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1		
		16b		
Sect	tion C. Disclosure	1100		
17	List the states with which a copy of this Form 990 is required to be filed FGEORGIA			
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 X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	rest		
	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 t	he		
	organization ► DAN SMITH-1170 PEACHTREE ST. NE, SUITE 2400 ATLANTA, GA 30309			

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 not compensate any current officer, director, or trustee

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week	ndıvidual trustee Por director	nstitutional trustee	Officer	Key employee	a Highest compensated at employee	Pormer	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
WILLIAM ASTARY DIRECTOR	0	Х						0	0	
DIARMUID MCSWEENEY PRESIDENT & DIRECTOR	0	Х		Х				0	0	(
CHERYL ENGLISH VICE PRESIDENT & DIRECTOR	0	Х		Х				0	0	(
PAT HORNOR SECRETARY	0			Х				00	0	
DAN SMITH TREASURER	0			Х				0	0	
BARRY GOLDMAN DIRECTOR	0	Х					<u> </u>	0	0	
RICK EARLYWINE DIRECTOR	0	X						0	0	
	_									
		ļ 								
	 	ļ					_			
	<u> </u>			<u>.</u>		-				
	-									
			_		ļ		_			
				ļ	-	-		,		
	-									

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and I	Hig	hest Compensat	ed Employ	ees (c	ontınue	d)	
(A)	(B)	(C)						(D)	(E)			(F)	
Name and title	Average hours per week	ndividual trustee		Officer	a Key employee	that employed	Former	Reportable compensation from the	Reporta compens from rela organizal	ation ated tions	am c comp	imated ount of other ensati	f on
		ll trustee or	Institutional trustee		loyee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-	-MISC)	orga and	om the inization relate nization	on d
							ı						
											·		
		 			-	-							
													
		ļ <u>-</u> -			-								
						-	-						
	-					-							
	-						-						
						ļ						<u> </u>	
1b Total			<u></u>					ļ					
2 Total number of individuals (including but not reportable compensation from the organization)		hose		ed a	bov	e) wh	о ге	eceived more than	\$100,000 ii	n			
3 Did the organization list any former office	cer, direct	or or	tru	uste	e.	kev e	emp	olovee, or highes	t compens	ated		Yes	No
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ind	lıvıd	ual					· · · · · · ·		3_		х
4 For any individual listed on line 1a, is the the organization and related organizations individual	greater tl	nan \$	150	0,00	00?	If "Y	es,'	" complete Sched	lule J for .	such	4		x
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	e or acci	rue c	omp	oens	satio	on fro	om	any unrelated of	organization	for	5		x
Section B. Independent Contractors	comprote	001100	<u>u.o</u>	0.70		onpo		 	 	• • • • • • • • • • • • • • • • • • • •			
Complete this table for your five highest compensation from the organization	compensa	ted ir	ndep	pend	den	t con	trac	ctors that receive	d more tha	an \$10	00,000	of	
(A) Name and business add	lress							(B) Description of se	rvices	С	(C) Compens	sation	
N/A							N	1/A					0
				_			1						
						_	-						
2 Total number of independent contractors (i				nıte	d to	o tho	se I	listed above) who	received				

Par	rt VIII	Statement of Revenue	1				
			, ;	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र्घ य	1 a	Federated campaigns 1a	-	ì			
Contributions, gifts, grants and other similar amounts	ь	Membership dues 1b				:	
ts, g	С	Fundraising events 1c		,			
ar Far	d	Related organizations 1d		,			
SIII.	е	Government grants (contributions) 1e					*
utic ier:	f	All other contributions, gifts, grants,					
音등		and similar amounts not included above . 1f	500	,			* ` `
in S	g	Noncash contributions included in lines 1a-1f \$ _			, , ,	,	* '
	h	Total. Add lines 1a-1f		500			•
Program Service Revenue	•		Business Code	* * * * ***			
ě	2a						
e E	b						
Ž	С						
သို	d						
Га	е						
5 E	f	All other program service revenue			,		<u> </u>
	g	Total Add lines 2a-2f		<u> </u>			
	3	Investment income (including dividends, inte		240	240		
		other similar amounts)		240	240		
	4	Income from investment of tax-exempt bond					
	5	Royalties · · · · · · · · · · · · · · · · · · ·	▶		<i>></i> ₹ *	1 ,	
				**, ,		, , ,	
	6a	Gross Rents	1	40× ,*	, ,		
	Ь	'		,	» ´	, ,	1
	d	Rental income or (loss)	<u> </u>		7 Y 200 A-100 WARRANTON V 2000		
	u	(i) Securities	(II) Other		` ;		
	7 a	Gross amount from sales of	 ```			· • •	4 4 4
	ь	assets other than inventory Less cost or other basis			>	` ;	
	0	and sales expenses			/ × 2		1 , 2 , 2
	c	Gain or (loss)		i	è	. x	
	d	Net gain or (loss)					
a	8a	Gross income from fundraising		*	4 /	. ^ -	
n n	O.	events (not including \$				3	× .
Ş		of contributions reported on line 1c)		, , ,	.* **	3 .7 ; \$	10 13 3 .
8		See Part IV, line 18	a	31.1	E {4 * 1		· · · ·
Other Revenue	ь	Less direct expenses		2 4 5		* * *	S
₹	C	Net income or (loss) from fundraising events				** ** ** ** **	1000 1000000000000000000000000000000000
•	9a	Gross income from gaming activities		· ; ;	' \$, ,%	
		See Part IV, line 19	a	,	,	* ,	
	ь	Less direct expenses		١			
	С	Net income or (loss) from gaming activities.					
	10a	Gross sales of inventory, less		,	, ,		٠ - ٠
		returns and allowances	a	*	, , ,	* s	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	ь	Less cost of goods sold					
	C	Net income or (loss) from sales of inventory.	<u> </u>				
		Miscellaneous Revenue	Business Code			x	man - man man sha am
	11a						
	b			ļ			ļ
	С						ļ
	d	All other revenue					
	e	Total Add lines 11a-11d					,
	12	Total Revenue. See instructions	<u></u> ▶	740	240		

Part IX Statement of Functional Expenses

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

	All other organizations must comple				
	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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
	· · · · · · · · · · · · · · · · · · ·				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified		at		
•	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		······································		·
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)		· · · · · · · · · · · · · · · · · · ·		
9	Other employee benefits				
10	Payroll taxes				· · · · · · · · · · · · · · · · · · ·
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	76		76	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24					
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а					
С					
d					
е					
f	All other expenses				
	Total functional expenses Add lines 1 through 24f	76		76	
	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				

Ŀа	irt X	Balance Sneet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	1,820,396	2	1,821,060
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. 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	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use	<u> </u>	8	
⋖	9	Prepaid expenses and deferred charges	·	9	
		Land, buildings, and equipment cost or 10a			
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,820,396	16	1,821,060
	17	Accounts payable and accrued expenses		17	· · · · · · · · · · · · · · · · · · ·
	18	Grants payable		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, directors, trustees, key	· ·· · · · · · · · · · · · · · · · · ·		
Ē		employees, highest compensated employees, and disqualified		i	
<u>::</u>		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 to unrelated third parties [_	24	
	25	Other liabilities Complete Part X of Schedule D		25	11.1-7.1-1
	26	Total liabilities. Add lines 17 through 25		26	
		Organizations that follow SFAS 117, check here ▶ and			
es		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	<u>.</u>
þ	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds	1,820,396	30	1,821,060
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	*	31	
¥	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	1,820,396	33	1,821,060
	34	Total liabilities and net assets/fund balances	1,820,396	34	1,821,060

Pa	rt XI Financial Statements and Reporting			
_			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other	1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1	
	Schedule O			1
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
С	If "Yes" to line 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	Χ_	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O		j	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b_		
		Form	990	(2009

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Inspection

		ne organizatio									don namber
		. MCCLUNG			OUNDATI					180888	4
Рa	rt I	Reason fo	or Public Chari	ty Status (All organ	ızatıons m	ust compl	lete this i	part) Se	e instruc	ctions	
The	orga	nization is no	it a private found	dation because it is (F	or lines 1 t	hrough 11,	check on	ly one bo	x)		
1		A church, co	onvention of chu	rches, or association o	of churches	described	ın sectio	n 170(b)(1)(A)(i).		
2		A school de	scribed in <mark>secti</mark> c	on 170(b)(1)(A)(ii). (Att	tach Sched	ule E)					
3		A hospital o	r a cooperative	hospital service organ	ization desc	ribed in se i	ction 170	(b)(1)(A)	(iii).		
4	\Box	A medical i	esearch organiz	zation operated in co	njunction v	vith a hos	pital desi	cribed in	section	170(b)(1)	(A)(iii). Enter the
		hospital's na	ime, city, and sta	ate							
5		An organiza	ition operated fo	or the benefit of a col	lege or un	versity ow	ned or o	perated t	by a gove	ernmental	unit described in
_			(b)(1)(A)(iv). (C				.41. 41	70/5//4//	A \ 7\		
6		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									
7	X	•		=		its support	rrom a g	governme	entai unit	or from t	ne general public
_				(1)(A)(vi). (Complete F	-						
8				d in section 170(b)(1)(
9				lly receives (1) more							
				ted to its exempt fun							
			•	ment income and uni				•		511 tax)	from businesses
	$\overline{}$		-	after June 30, 1975							
10		_	•	ind operated exclusive	-		-				
11		-	-	and operated exclusi	-		-				-
			•	ublicly supported orga					•	•	
				at describes the type o							
	$\overline{}$	a Typ		Type II		e III - Fund	-	-			pe III - Other
е	L	-	_	ertify that the organiz							
				on managers and oth	er than on	e or more	publicly s	supported	d organiza	ations de	scribed in section
			section 509(a)(·							
f		_		d a written determina	tion from t	he IRS tha	at it is a	Type I, 1	ype II, o	r Type III	supporting
			i, check this box								
g				the organization acce	pted any g	ift or contri	bution fro	om any of	the		
		following pe									
		(i) A pers	on who directly	or indirectly controls	i, either ald	one or tog	ether wit	h persor	is descrit	ped in (ii)	Yes No
			•	erning body of the sup		nization?					. 11g(ı)
			•	erson described in (i) a							11g(ii)
		(iii) A 35%	controlled entity	of a person described	t in (i) or (ii)	above? .					11g(III)
h	ı	Provide the	following inform	ation about the suppo	rted organi	zation(s)					
(i)	Name	of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	organization		ou notify		s the	(vii) Amount of
	orga	anization		(described on lines 1-9 above or IRC section	in coi (i) iii	document?		nization in of your	organizai (i) organi	zed in the	support
				(see instructions))			sup	out _o	U	S?	
					Yes	No	Yes	No	Yes	No	
											·
							<u> </u>				
								<u> </u>			
									<u> </u>	<u> </u>	
							<u> </u>			<u> </u>	
Tot	al			}	1		1		1		

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	tion A. Public Support								
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	322,312	255,837	88,498	500	500.00	667,647		
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 through 3	322,312	255,837	88,498	500	500	667,647		
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	^							
c	shown on line 11, column (f)	,			, ,		667,647		
6 Sec	Public support. Subtract line 5 from line 4 tion B. Total Support					<u></u>	007,047		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
7	Amounts from line 4	322,312	255,837	88,498	500	500	667,647		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	25,705	58,049	69,382	20,912	240	174,288		
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)						0.41 0.25		
11	Total support. Add lines 7 through 10		-		37.3		841,935		
12 13	Gross receipts from related activities, etc (see instructions)								
500	organization, check this box and stop here					· · · · · · · · · · · · · · · · · · ·	▶		
	tion C. Computation of Public Sup Public support percentage for 2009 (II			11 solumn (f)		14	79.2991 %		
14 15	Public support percentage from 2008					15	86.0000 %		
-	331/3% support test - 2009. If the co								
	this box and stop here . The organization	-							
b	331/3% support test - 2008. If the o								
	check this box and stop here. The org	anization qualifi	es as a publicly	supported orga	inization		▶ 🔲		
17a 10%-facts-and-circumstances test - 2009 If the organization did not check a box on line 13, 16a or 1					r 16b, and line 1	4 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 - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a,									
	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								
	•				•	•			
18	supported organization								
	instructions						[]		
		 	 		<u> </u>	<u> </u>	····		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ➤ Attach to Form 990.

ons on	$\lfloor 2009 \rfloor$				
	Open to Public				
	Inspection				
Employer ident	fication number				

JIM H. MCCLUNG LIGHTING RESEARCH FOUNDATION, INC.	31-1808884
The organization makes its governing documents, conflict of inte	rest policy, and
financial statements available to the public upon request.	