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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)

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2009 cal	lendar year, or tax year beginning and ending		
Во	heck if	Please	C Name of organization	D Employer identific	cation number
_	⊐Address	use IRS label or			
<u></u>	change	print or	THE GRIDIRON CLUB AND FOUNDATION		
<u>_</u>	Name change	type	Doing Business As	36-4	643320
Ļ	Initial return	See Specific	Number and street (or P.O. box if mail is not delivered to street address) Room/st	I = '	
<u>_</u>	Termin- ated	Instruc-	976 NATIONAL PRESS BUILDING	202-	783-4050
	Amende return		City or town, state or country, and ZIP + 4	G Gross receipts \$	882,551.
	Applica- tion pending	L	WASHINGTON, DC 20045	H(a) Is this a group re	
	pending	F Nar	ne and address of principal officer CARL P. LEUBSDORF SR.	for affiliates?	Yes X No
		529		NG H(b) Are all affiliates inc	luded? Yes No
			us X 501(c) (3) ◀ (insert no)		list (see instructions)
			IDIRON.CLUB@GMAIL.COM	H(c) Group exemption	
		rganizatio		ear of formation 2008 N	State of legal domicile: DC
Pa		Summ			
ŏ			scribe the organization's mission or most significant activities CONTRIBU		
auc	_		E JOURNALISTIC COMMUNITY BY ASSISTING J		
Governance			s box 🕨 🔲 if the organization discontinued its operations or disposed of n	l l	
Š	ŀ		of voting members of the governing body (Part VI, line 1a)	3	9
<u>ھ</u>	1		of independent voting members of the governing body (Part VI, line 1b)	4	9
ies			nber of employees (Part V, line 2a)	5	0
Activities &	_		nber of volunteers (estimate if necessary)	6	12
Act	ł.	-	ss unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b N	let unrela	ated business taxable income from Form 990-T, line 34	7b	0.
e				Prior Year	Current Year
	1		ions and grants (Part VIII, line 1h)	12,680.	411,261.
Revenue	1	-	service revenue (Part VIII, line 2g)	0.	40,845.
Re.	1		nt income (Part VIII, column (A), lines 3, 4, and 7d)	260. 19,410.	99,926.
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	32,350.	36,961.
			enue - add lines 8 through 11 (must equal pan (All Cobjumn (A), line 12)	34,330.	588,993. 51,500.
	1		nd similar amounts paid (Part IX, column (A), lines 1:3)		31,300.
			paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part X, column (A), lines 5-10)		
Expenses			1 (a) 1 (b) 1 (c) 1 (d)		
Je L	1				
Ä	1		draising expenses (Part IX, column (D), (me 25)	6,414.	114,028.
		-	enses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,414.	165,528.
		•	less expenses Subtract line 18 from line 12	25,936.	423,465.
es	13 !	revenue	less expenses oubtract line to from line 12	Beginning of Current Year	End of Year
ets (20 T	ntal acci	ets (Part X, line 16)	68,642.	492,107.
ASS	21 7		ilities (Part X, line 26)	00/,000	
Net Assets or Fund Balances	22 N		s or fund balances Subtract line 21 from line 20	68,642.	492,107.
Pa	art II		ture Block		
		Under pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and statement	nts, and to the best of my knowled	ge and belief, it is true, correct,
		and comple	ete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	eage	1
Sig	n		(cit & Land		5/18/12
Her		Sigi	nature of officer	Date	_
		C.P	ARL P. LEUBSDORF 38. , SECRETARY		
			e or print name and title		
De:	,	Preparer'	Date	Check If Self- Prepar	er's identifying number structions)
Paid	L	signature		employed	
		Firm's nam yours if	e (or	EIN ▶	
026	Jilly	self-employ address, ar			
		ZIP + 4	y	Phone no. ►	
Ma	y the IR	S discus	s this return with the preparer shown above? (see instructions)		X Yes No

SCANNED SEP 17 2010

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2009)

	990 (2009) THE GRIDIRON CLUB AND FOUNDATION 36-4643320 Page 2	_
Par	t III Statement of Program Service Accomplishments	_
1	Briefly describe the organization's mission	
	ESTABLISHMENT OF A FORUM FOR WASHINGTON JOURNALISTS TO PROMOTE	_
	FRIENDLY RELATIONS AND THE EXCHANGE OF IDEAS AMONG ITS MEMBERS AND TO	_
	EDUCATE THE PUBLIC ABOUT THE FIELD OF WASHINGTON JOURNALIMS IN	~
	GENERAL.	
2	Did the organization undertake any significant program services during the year which were not listed on	_
	the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
•	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
7	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	
4-	(Code) (Expenses \$ 51,500 • including grants of \$ 51,500 •) (Revenue \$	-
4a)
	AWARDING OF EDUCATIONAL SCHOLARSHIPS AND ASSISTING ORGANIZATIONS THAT	_
	HELP AND PROTECT JOURNALISTS AND THEIR ACTIVITIES.	_
		_
		_
		_
		_
		_
		_
		-
		-
		-
		-
4h	(Code) (Expenses \$ Including grants of \$) (Revenue \$ 99,926.	<u>-</u>
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$ 99,926.) INVESTMENT INCOME GENERATED FROM FROM SALE AND HOLDING OF SECURITIES TO	
		-
	ENHANCE PROVISION OF PROGRAM SERVICES.	_
		_
		_
		_
		_
		_
		_
		_
		_
		_
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$ 35,311.	- 1
70	HOSTING OF A FORMAL ANNUAL DINNER OF THE CLUB, THE NET PROCEEDS TO BE	,
		-
		_
	OTHER JOURNALISM-RELATED ORGANIZATIONS.	_
		_
		_
		_
		_
		_
		_
		_
		_
		-
<i>A</i> ~ <i>1</i>	Other program services (Describe in Schedule O.)	-
4d	Other program services (Describe in Schedule O) (Expenses \$ 59,636. including grants of \$) (Revenue \$ 42,495.)	
		-
<u>4e</u>	Total program service expenses ▶\$ 111,136.	_
	Form 990 (2009)	,

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<u>X</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			
	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		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		77
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
_	Schedule D, Part III	8_		<u>X</u>
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			17
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	40		v
11	If "Yes," complete Schedule D, Part V	10		<u>X</u>
''	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	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.		Λ	
	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	į		
•	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		_X_
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			37
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	4-		v
40	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	46		v
17	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
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	''		Λ
10	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? If "Yes,"	10	41	
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
			000	

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Form 990 (2009) THE GRIDIRON CLUB AND FOUNDATION

Part IV 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	<u>X</u>	
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		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	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		<u> </u>
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? If "Yes," complete			
	Schedule L, Part III	27		х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			-
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<u> </u>		
-	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	30		
J.	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?	3,		
50	Note. All Form 990 filers are required to complete Schedule O	38		х
	Note: All Form 330 mens are required to complete someodie o		990 (

2009) THE GRIDIRON CLUB AND FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance Part V

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a 3			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			
	(gambling) winnings to prize winners?		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	nstructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by this return?	3a		X
	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 a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign E	Bank and			
	Financial Accounts		_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	0	<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	raing Profibiled	5c		
60	Tax Shelter Transaction? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit	50		
oa	any contributions that were not tax deductible?	ie organization solicit	6a	х	
h	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or aifts			
b	were not tax deductible?	iono or gino	6b	х	
7	Organizations that may receive deductible contributions under section 170(c).				
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services			ļ
_	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	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required	t		
	to file Form 8282?		7c	<u></u>	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal			
	benefit contract?		7e		X
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	1	
h	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 organizations maintaining donor advised funds and section 509(a)(3) supporting organizations are advised funds and section 509(a)(3) supporting organizations are advised funds and section 509(a)(3) supporting organizations.				
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceed the support of the suppo	ess business notalitys	8		X
_	at any time during the year?		-	 -	\ \frac{\bar{\alpha}}{\columbfrace}
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?		9a		Х
a	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
ь 10	Section 501(c)(7) organizations. Enter		"	 	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	1	
11	Section 501(c)(12) organizations. Enter		1		
	Gross income from members or shareholders	11a]		1
b	C III (D III II I				
-	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	<u> </u>	<u> </u>
			Form	agn	(2009)

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				
	,	1		Yes	No
1a	Enter the number of voting members of the governing body	1a 9	4		
b	Enter the number of voting members that are independent	1b 9			
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	n 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 men	nbers of the			
	governing body?		7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pers		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken d	uring the year			
	by the following				
а	The governing body?		8a	Х	
b	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 reac	hed at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code)			
				Yes	No
10a	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 c	hapters, 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 filling	ng the form?	11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			1	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could	d give rise		ĺ	
	to conflicts?		12b	<u> </u>	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If ")	es," describe			
	ın 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 arrangem	ent with a			
	taxable entity during the year?		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evalu	ate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organ	nization's		ļ	
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► NONE				
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, co	nflict of interest policy, a	nd fina	ncial	
	statements available to the public				
20	State the name, physical address, and telephone number of the person who possesses the books and	d records of the organiza	tion 🕨	·	
	SUSAN L HAHN - 202-783-4050				
	976 NATIONAL PRESS BUILDING, WASHINGTON, DC 20045				

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

(A)	(B)		(C)					(D)	(E)	(F)	
Name and Title	Average	١		Pos				Reportable	Reportable	Estimated	
	hours	_	heci	k all	that	app	ly)	compensation	compensation	amount of	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W 2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
CARL P. LEUBSDORF											
SECRETARY EFORMER PRESI	12.00	X		X	ļ			0.	0.	0.	
RICHARD COOPER											
PRESIDENT	2.00	X	<u> </u>	X			ļ.,	0.	0.	0.	
GEORGE E. CONDON, JR.											
AT-LARGE BOARD MEMBER	0.50	X	<u> </u>		ļ	<u> </u>		0.	0.	0.	
ANDREW ALEXANDER											
TREASURER	3.00	X		X	_	-		0.	0.	0.	
CHERYL ARVIDSON				İ							
HISTORIAN	0.50	X		X	_	-		0.	0.	0.	
ANN C MCFEATTERS								_	_	_	
VICE-PRESIDENT	2.00	X	L	X		_	_	0.	0.	0.	
ALBERT HUNT							l	_	_		
AT-LARGE BOARD MEMBER	0.50	X	ļ	<u> </u>	_		_	0.	0.	0.	
DOYLE MCMANUS									_	_	
AT-LARGE BOARD MEMBER	0.50	X	ļ	 				0.	0.	0.	
KAREN TUMULTY	٥ - ٥	,,					ľ		^		
AT-LARGE BOARD MEMBER	0.50	X						0.	0.	0.	
			_		_	ļ					

						-			<u>.</u>		
									-		

Part VII Section A. Officers, Directors, Tru	istees, Key Ei	mple	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(0)		Pos			. I. A	Reportable	Reportable			timate	
	hours per	<u>├</u>	leck	anı	ınaı	app	(y) 	compensation from	compensation from related			nount other	Οī
	week	Individual trustee or director						the	organization	s	com	pensa	ition
		ee or	stee			ınsate		organization	(W-2/1099-MIS	3C)		om th	
		al trus	onal tre		oloyee	g 60 85		(W-2/1099-MISC)			_	anızat d relat	
		dividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	,				anızatı	
		<u> </u>		0	*	Ι	<u>.</u>				<u> </u>		
						_							
					_	_					<u> </u>		
	-		_				-						
		ļ	_			_							
		-	-			_					_		
1b Total								0.		0.			0.
2 Total number of individuals (including but r	ot limited to th	nose	liste	d al	bove	e) wi	no r	eceived more than \$100	,000 in reportabl	le			^
compensation from the organization									•			Yes	No
3 Did the organization list any former officer,	director or tru	istee	ke	v em	olar	vee	or h	highest compensated er	molovee on	1		165	NO
line 1a? If "Yes," complete Schedule J for s			,	, 0.,	.p.o	, cc,	٠	ingrical compensated er	inployee on		3		Х
4 For any individual listed on line 1a, is the st			omp	ensa	atior	n and	d ot	her compensation from	the organization				
and related organizations greater than \$15											4		Х
5 Did any person listed on line 1a receive or a				rom	any	unr/	elat	ted organization for serv	ices rendered to	i	ا ۔ ا		v
the organization? If "Yes," complete Sched Section B. Independent Contractors	uie J for such	pers	on					·			5		X
Complete this table for your five highest co	mpensated in	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of con	npens	ation	from	
the organization									<u> </u>				
(A) Name and business	address							(B) Description of s	services	С)) Ompe	C) nsatio	n
RENAISSANCE WASHINGTON DO							\dashv	ROOM RENTALS				-	
999 NINTH ST NW, WASHING	ron, DC	20	000	1				& BEVERAGE S	ERVICE		22	0,9	08.
							\dashv						
												• 1	
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li:	stec	d above) who received m	nore than				
\$100,000 in compensation from the organi	_					1		·					

				CLUB AND	FOUNDATIO	N	36-4643	320 Page 9
Pa	rt VII	I Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b	46,950.				
S, C	С	Fundraising events	1c					
gift	d	Related organizations	1d					
ā <u>Ē</u>	е	Government grants (contribu	tions) 1e					
iti S	f	All other contributions, gifts, grain	nts, and	:				
듗		similar amounts not included abo	ove 1f	364,311.				
a d	g	Noncash contributions included in line	s 1a-1f \$			1		
<u>a</u> 0	h	Total. Add lines 1a-1f			411,261.			
				Business Code				
<u>S</u>	2 a			900004	28,660.	28,660.		
e S	b			900004	5,175.	5,175.		
en S	С			900004	3,510.		····	0.
e a	d			900004	1,820.	1,820.		
Program Service Revenue	е	MEMBERSHIP PICE		900004	1,680.	1,680.		
-	f	• =	enue		40 045			
\rightarrow		Total. Add lines 2a-2f		<u> </u>	40,845.			
	3	Investment income (including	g aiviaenas, inter	est, and	5,395.	5,395.		
	4	other similar amounts) Income from investment of ta	ay ayamat band s	araaaada 🕨	5,333.	3,393.		
	4 5	Royalties	ax-exempt dond p	oroceeds >				
	3	noyalles	(ı) Real	(II) Personal				
	6 a	Gross Rents	Wilean	(ii) r ersonar				
	b							
	c							
		Net rental income or (loss)		•				
		Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory	124,203.					
	b	Less cost or other basis						
		and sales expenses	29,672.	,				
	С	Gain or (loss)	94,531.					
	d	Net gain or (loss)			94,531.	94,531.		
Other Revenue	8 a	Gross income from fundraising the including \$						
ě		contributions reported on line						
<u>بر</u> ۳		Part IV, line 18	•	299,197.				
풀	b	Less direct expenses	b	263,886.				
٥	С	Net income or (loss) from fun	draising events		35,311.	35,311.		
	9 a	Gross income from gaming a	ctivities See				_	_
		Part IV, line 19	а					
	b	Less direct expenses	b					
		Net income or (loss) from gar	=	> _				
	10 a	Gross sales of inventory, less	s returns	1				
		and allowances	а					
		Less cost of goods sold	b	L		i		
+	с	Net income or (loss) from sale	•					
ļ		Miscellaneous Reveni		Business Code	1 (50	1 650		
]		SALE OF RECOGN		900099	1,650.	1,650.		
	b					-		
- 1	C							
	d			•	1,650.	 	 	
	e 12	Total revenue. See instructions.			588,993.		0.	0.
93200 02-04		Total Tevenue, See Instructions.			, 300,333.	<u> </u>		Form 990 (2009)

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
	not include amounts reported on lines 6b, Bb, 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	51,500.	51,500.						
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		i						
	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	27,580.		27,580.					
b	Legal								
С	Accounting								
d	Lobbying								
е	Professional fundraising services. See Part IV, line 17				111-2-3-1				
f	Investment management fees	1,854.		1,854.					
g	Other	1,502.		1,502.					
12	Advertising and promotion								
13	Office expenses	2,947.		2,947.					
14	Information technology	798.		798.					
15	Royalties								
16	Occupancy	14,949.		14,949.					
17	Travel								
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	55,711.	55,711.						
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
23	Insurance	848.		848.					
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled								
	miscellàneous may not exceed 5% of total expenses shown on line 25 below.)								
а	PRESENTATION ITEMS	3,925.	3,925.						
b	PRINTING	3,578.		3,578.					
C	SHIPPING	240.		240.					
ď	BANK SERVICE CHARGES	96.		96.					
e									
f	All other expenses								
25	Total functional expenses Add lines 1 through 24f	165,528.	111,136.	54,392.	_0.				
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		<u> </u>						
					000				

`Pa	t X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	49,549.	1	70,548.
	2	Savings and temporary cash investments		2	<u>56,761.</u>
	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	
şt	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments · publicly traded securities		11	-
	12	Investments - other securities See Part IV, line 11	19,093.	12	364,798.
	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)	68,642.	16	492,107.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iat		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	.
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117, check here and complete			
ses		lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	<u></u>
Ва	28	Temporarily restricted net assets		28	
ī	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117, check here			
Š		complete lines 30 through 34.		20	0
set	30	Capital stock or trust principal, or current funds	0.	30	0.
As	31	Paid-in or capital surplus, or land, building, or equipment fund	68,642.	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	68,642.	32	492,107.
_	33	Total net assets or fund balances		33	492,107. 492,107.
	34	Total liabilities and net assets/fund balances	68,642.	34	Form 990 (2009)

Form 990 (2009)

	990 (2009) THE GRIDIRON CLUB AND FOUNDATION 36-	4643320	Pag	ge 12
Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule C			
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			
	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 Au	dit		
	Act and OMB Circular A-133?	3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	tit tit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	35		

Form **990** (2009)

SCHÈDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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.

2009

Open to Public Inspection

Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number
36-4643320

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	t) See inst	ructions	_			
he organ	ization is not a	private foundation	because it is (For lines 1	through 1	11, check	only one b	ox)					
1 🔲			s, or association of chur									
2			'0(b)(1)(A)(ii). (Attach Sc									
з 🔲			tal service organization of	-	n section	170(b)(1)	A)(iii).					
4			operated in conjunction					(b)(1)(A)(ii	iı). Enter th	ne hospital's na	me.	
	city, and state											
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
-	=	(b)(1)(A)(ıv). (Comple		,		,	- 30.0			-		
6 🗀			ent or governmental unit	t describer	d in sectio	n 170/h)/	IVAVOA					
7		-	eives a substantial part					r from the	aeneral n	ublic described	Lin	
•	•	b)(1)(A)(vi). (Comple	•	or its supp	OIT HOITE	governine	intai unit u	i iloili tile	generalp	ablic described		
8 🔲	-		section 170(b)(1)(A)(vi).	(Complete	Dart II \							
9 X	-		eives (1) more than 33 1			rom contri	butions m	nomborobi	n food on	d aross rossinti	a fram	
9 [22]	_	•							•	•		
			nctions - subject to certa							_		
		509(a)(2). (Complete	axable income (less sect	lion o i i ta	x) iioiii bu	SII165565 6	acquired b	y trie orga	inization a	itter June 30, 18	9/5	
10 🔲				at for aubli	o oofotu S	`	- 500(-)//					
	_	-	perated exclusively to ter	-	•			•	v aut tha i	nurnassa of and		
•••••	-		perated exclusively for the		-				•			
			ations described in section				s) See sec	etion 509(a)(3). Che	ck the box that		
	a Type I		organization and complete Type II		e III - Func		oaratad		<u> </u>	Tues III. Other	-	
•	• •		•	,,		•	U	· mara dia		Type III · Other		
e		•	it the organization is not han one or more publicly		•	•	•					
		ū			•				e(a)(1) or s	ection 509(a)(2))	
f	_		ten determination from t	ine ino ina	шизату	pe i, Type	ii, or Type	; 111				
_		rganization, check th				from on.	of the fall					
g	-		organization accepted ar			-				[V	. N.	
			irectly controls, either al	one or tog	ether with	persons d	iescribea i	n (II) and (iii) below,	Yes	No No	
	-		upported organization?							11g(ı)		
		·	n described in (i) above?							11g(ii)		
		•	person described in (i) o							11g(III)	Ш.,	
h	Provide the to	ollowing information	about the supported or	ganization	(S)							
(i) Name	of supported	(ii) EIN	(iii) Type of	(IV) Is the o	rganization	(v) Did you	notify the	(vi) ls	s the	(viı) Amount	of	
	nizotion Ulyan		organization (described on lines 1-9	in col. (i) listed in your		organization in col		organization in col (i) organized in the U.S?		support		
ū			above or IRC section	governing document?		(i) of your support?		U.S	7			
			(see instructions))	Yes	No	Yes	No	Yes	No			
	_											
				,								
	_											
		_										
otal		I	i	1	ı	l	i	ı	1			

	(Form 990 or 990-EZ) 2009			
Part II	Support Schedule for Organizations	Described in Sections	170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)

Part II

Page 2

Section A. Public Support Calendar year (or liscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total I Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties								
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on								
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4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on								
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column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on								
6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on								
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on								
Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Representation of the description of the desc								
7 Amounts from line 4 8 Gross income from interest, dividends, payments received on								
8 Gross income from interest, dividends, payments received on								
dividends, payments received on								
securities loans, rents, royalties								
and income from similar sources								
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								
12 Gross receipts from related activities, etc (see instructions)								
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	\neg							
organization, check this box and stop here Section C. Computation of Public Support Percentage								
	%							
14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2008 Schedule A. Part II, line 14								
15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and								
stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
and stop here. The organization qualifies as a publicly supported organization	\neg							
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,	_							
and if the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the organization								
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.	\neg							
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	_							
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the								
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.								
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	三							

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (a) 2005 (c) 2007 (d) 2008 (b) 2006(e) 2009 Calendar year (or fiscal year beginning in) (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 446,572. 459,252. include any "unusual grants") 12,680. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 324,141. 19,410. 304,731. organization's tax exempt purpose 3 Gross receipts from activities that are not an unrelated trade or bus-1,650. iness under section 513 1,650 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 752,953. 32,090. 785,043. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0. amount on line 13 for the year c Add lines 7a and 7b 0. 785,043. 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 32,090. 752,953 9 Amounts from line 6 785,043. 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties 260 5,395 5,655. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 260. 5,395. 5,655. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is 94,531 94,531. regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 32,350. 852,879. 885 229. 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, $\triangleright X$ check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► 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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number 36-4643320

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the					
	organization answered "Yes" to Form 990, Part IV, line	e 6	·					
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds					
	are the organization's property, subject to the organization's		Yes No					
6	Did the organization inform all grantees, donors, and donor a	=						
	for charitable purposes and not for the benefit of the donor of		•					
	impermissible private benefit?		Yes No					
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, F	Part IV, line 7					
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply)						
	Preservation of land for public use (e g , recreation or p	oleasure) Preservation of an his	torically important land area					
	Protection of natural habitat	Preservation of a cert	ified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualif	fied 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					
а	Total number of conservation easements		2a					
þ	Total acreage restricted by conservation easements		2b					
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c					
d	Number of conservation easements included in (c) acquired a	2d						
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	organization during the tax					
	year ▶							
4	Number of states where property subject to conservation eas	sement is located >						
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of						
	violations, and enforcement of the conservation easements it		Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting,							
7	Amount of expenses incurred in monitoring, inspecting, and							
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170						
_	and section 170(h)(4)(B)(ii)?		└ Yes					
9	In Part XIV, describe how the organization reports conservati							
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for					
Pai	conservation easements rt III Organizations Maintaining Collections or	f Art Historical Transures or O	ther Similar Assets					
1 4	Complete if the organization answered "Yes" to Form		ther Sillinar Assets.					
	Complete if the organization answered Tes to Form	550, 1 art 14, iiile 0						
10	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue etatement and h	alance about works of art, biotograph					
ıa	-	•	•					
	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			as shoot works of art, historical transverse					
b		·	·					
	or other similar assets held for public exhibition, education, o these items	research in furtherance of public service	, provide the following amounts relating to					
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$					
	(ii) Assets included in Form 990, Part X		> \$					
2	If the organization received or held works of art, historical treations	acurae or other similar access for francis	▶ \$					
4	the following amounts required to be reported under SFAS 1		i gairi, provide					
а	Revenues included in Form 990, Part VIII, line 1	To relating to triese items	> \$					
	Assets included in Form 990, Part X		► \$ ► \$					
	- 20010 moladou il i olili 000, i alt A		- ♥					

		<u>DIRON CLUB</u>						<u> 36-46</u>			
Pai	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	reasures,	or Othe	er Sim	ilar Asse	ts (con	tinued,	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	at are a s	ignifican	t use of its	collectio	n item	18
	(check all that apply)										
а	Public exhibition	c	ı 🗀	Loan or exc	change progr	ams					
b	Scholarly research	e	, 🗀	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	ın how t	hey further t	the organizat	ion's exe	mpt pur	oose in Par	t XIV		
5	During the year, did the organization solicit o				=						
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran					s" to For	m 990. F	art IV. line	9. or		
	reported an amount on Form 990, Pai		·	•			·	,	,		
1a	Is the organization an agent, trustee, custodi	ian or other intermed	diary for	contribution	ns or other as	ssets not	ınclude				
	on Form 990, Part X?								Yes	_	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	nllowing	table				<u></u>			_ 110
-	Too, onplantate arrangement in tract Arr	and complete the re	Jiio Willig	100.0			Γ.	T	Amour		
С	Beginning balance						1c	 	Amour		
	Additions during the year						1d	 			
e	Distributions during the year							 			
_	Ending balance						1e				
f	_	arm 000 Dark V line	010				<u>1f</u>	ـــا	7		т
	Did the organization include an amount on Fe		217					<u> </u>	」Yes	L	_l No
Par	t V Endowment Funds. Complete in	of the ergenization of		"Voo" to Fo	rm 000 Dart	. IV. June 4					
<u>. u.</u>	Complete I		T T								
	D. T.	(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Inree	years back	(e) Fou	r years	раск
_	Beginning of year balance		ļ	.	 						
b	Contributions	-	 		-						
С	Net investment earnings, gains, and losses										
d	Grants or scholarships		ļ		ļ						
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses								ļ		
g	End of year balance										
2	Provide the estimated percentage of the year	r end balance held a	as								
а	Board designated or quasi-endowment		%								
b	Permanent endowment >	%									
С	Term endowment >	%									
За	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	and administe	ered for t	he orgar	ization			
	by									Yes	No
	(i) unrelated organizations								3a(i)		<u> </u>
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	dule R?					3b		
4	Describe in Part XIV the intended uses of the	organization's ende	owment	funds							
Par	t VI Investments - Land, Building	s, and Equipm	ent. S	ee Form 990), Part X, line	10					
	Description of investment	(a) Cost or c		T	t or other		ccumula	ted	(d) Boo	k valu	<u>—</u>
	·	basis (investr	ment)		(other)	. , ,	preciatio	- 1	(-,		
1a	Land			1							
	Buildings										
	Leasehold improvements										
	Equipment			1-		ļ					
	Other										
	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X. colu	nn (B) line	10(c))		-				0.
		art	, 50.01		17//			F			

Schedule D (Form 990) 2009

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

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

	dule D (Form 990) 2009 THE GRIDIRON CLUB AND FOUND			36-4	4643320	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to A	Audited Fir	nancial Sta	atement	<u>s</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1_1			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8	<u> </u>		
9	Total adjustments (net) Add lines 4 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10			
Par	t XII Reconciliation of Revenue per Audited Financial Statemen	its With Re	venue per	Return	l	
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d				
ę	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5		
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts With E	xpenses p	er Retui	rn	-
1	Total expenses and losses per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			_3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		
Pai	t XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1a and 4	I, Part IV, line	s 1b and 2	2b, Part V, line 4	4, Part
X, lını	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comple	ete this part to	provide any	additional	ınformatıon	
			- ,			
						-
						

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2009

Open To Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ➤ Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Inspection ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number THE GRIDIRON CLUB AND FOUNDATION 36-4643320 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations С Special fundraising events In person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? □ No 」Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser (v) Amount paid (vi) Amount paid (i) Name of individual (iv) Gross receipts (or retained by) (ii) Activity have custody or control of contributions? to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col (i) No Yes Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

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

Schedule G (Form 990 or 990-EZ) 2009

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000 (b) Event #2 (c) Other events (a) Event #1 (d) Total events ANNUAL CLUB NONE (add col (a) through DINNER col (c)) (total number) (event type) (event type) 299,197. 299,197 1 Gross receipts 2 Less Charitable contributions 299,197. 299,197. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses 158,539. 158,539. Rent/facility costs 42,756. 42,756 Food and beverages <u>45,779</u>. 45,779. 8 Entertainment 16,812. Other direct expenses 263,886) 10 Direct expense summary Add lines 4 through 9 in column (d) ▶ 35,311. 11 Net income summary Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming Revenue (a) Bingo col (a) through col. (c)) bingo/progressive bingo Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses % % % Yes Yes Yes 6 Volunteer labor No Nο Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities 9a a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain. 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Scr	edule G (Form 990 or 990-EZ) 2009 THE GRIDIRON CLUB AND FOUNDATION	<u></u>	<u>-464</u>	<u> 332</u>	<u>U Pa</u>	age 3
•					Yes	No
13	Indicate the percentage of gaming activity operated in					
á	The organization's facility	13a	%			
	,	13b	%			
14	Enter the name and address of the person who prepares the organization's gaming/special events books are	nd records				
	Name					
	Address ▶					
15a	Does the organization have a contract with a third party from whom the organization receives gaming reven	ue?		15a		
t	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and	the amount				
	of gaming revenue retained by the third party > \$					
(If "Yes," enter name and address of the third party					
	Name					
	Address >					
16	Gaming manager information					
	Name					
	Gaming manager compensation > \$			'		
	Description of services provided					
		· · · · · · · · · · · · · · · · · · ·				
	Director/officer Employee Independent contractor					
17	Mandatory distributions					
á	Is the organization required under state law to make charitable distributions from the gaming proceeds to					
	retain the state gaming license?			17a		ļ
ŧ	Enter the amount of distributions required under state law to be distributed to other exempt organizations of	r spent in th	е			
	organization's own exempt activities during the tax year 🕨 \$					

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No 1545-0047 Inspection

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

ž SCHOLARSHIPS FOR ASPIRING SCHOLARSHIPS FOR ASPIRING SCHOLARSHIPS FOR ASPIRING ASSIST EFFORTS TO IMPROVE **Employer identification number** SCHOLARSHIPS FOR ASPIRING 36-4643320 MID-CAREER EDUCATION OF SUPPORT OF ITS SUNSHINE SCHOLARSHIPS TO ASSIST (h) Purpose of grant WEEK ACTIVITIES WITH FOCUS ON FREEDOM OF INFORMATION ISSUES or assistance X Yes PRESS ACCESS TO ecipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any JOURNALISTS TOURNALISTS TOURNALISTS TOURNALISTS TOURNALISTS INFORMATION 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) o. Ö 0 o. o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 5,000 (d) Amount of cash grant 6,500 15,000 10,000 5,000 AND FOUNDATION (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) THE GRIDIRON CLUB 52-0972043 53-0196584 53-0196549 03-0179424 52-6002033 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? REPORTERS COMMITTEE FOR FREEDOM OF 1 (a) Name and address of organization THE PRESS - 1101 WILSON BLVD, STE 1100 - ARLINGTON, VA 22209-2211 SUNRISE VALLEY DR - RESTON, VA AMERICAN SOCIETY OF NEWSPAPER GEORGE WASHINGTON UNIVERSITY EDITORS FOUNDATION - 11690B or government COLLEGE PARK FOUNDATION NW WASHINGTON, DC 20052 DC 20052 4400 MASSACHUSETTS AVE UNIVERSITY OF MARYLAND COLLEGE PARK, MD 20742 VT 05663 AMERICAN UNIVERSITY Name of the organization NORWICH UNIVERSITY 158 HARMON DRIVE NW WASHINGTON 2121 I STREET NORTHFIELD Part Part II

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations N

20191-1409

。

5,000

501(C)(3)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Page 2 (f) Description of non-cash assistance 36-4643320 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information FOUNDATION COMMITTEE THE AWARDS ARE DETERMINED, DISTRIBUTED, RECORDED AND PROTECT JOURNALISTS FACING PRISON OR HARASSMENT FROM GOVERNMENTS HOSTILE NAME OF ORGANIZATION OR GOVERNMENT: COMMITTEE TO PROTECT JOURNALISTS (H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT INTERNATIONAL EFFORTS TO LINE 2: BASED ON SELECTION CRITERIA USED BY THE (d) Amount of non-cash assistance THE GRIDIRON CLUB AND FOUNDATION (c) Amount of cash grant (b) Number of recipients Use Part IV and Schedule I-1 (Form 990) if additional space is needed IN THE FINANCIAL SYSTEM COLUMN (H): (a) Type of grant or assistance SCHEDULE I, PART I, H Schedule I (Form 990) 2009 LINE ACCOUNTED FOR PART II Part III

TO PRESS FREEDOM

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Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Name of the organization

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

OMB No 1545-0047 7 2009 Open to Public Inspection

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Employer identification number

36-4643320 Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) THE GRIDIRON CLUB AND FOUNDATION

	(h) Purpose of grant or assistance	SUPPORT INTERNATIONAL EFFORTS TO PROTECT JOURNALISTS FACING PRISON OR HARASSMENT FROM					Schedule I-1 (Form 990) 2009
()	(g) Description of non-cash assistance						
eddle I (rollil 330), ra	(f) Method of valuation (book, FMV, appraisal, other)						
nited States (Scil	(e) Amount of non-cash assistance	0					
nzanons III me o	(d) Amount of cash grant	.000					for Form 990.
vernments and Organ	(c) IRC section if applicable	501(C)(3)					, see the Instructions
Assistance to Go	(b) EiN	13-3081500					uction Act Notice
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the Office States (Scheoofe I (Point 990), Fact in	(a) Name and address of organization or government	COMMITTEE TO PROTECT JOURNALISTS 330 7TH AVE, 11TH FL NEW YORK, NY 10001	L				LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE O (Form 990)

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.

QMB No 1545-0047
2009
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Name of the organization

THE GRIDIRON CLUB AND FOUNDATION

Employer identification number 36-4643320

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MAKING CHARITABLE CONTRIBUTIONS TO QUALIFIED JOURNALISM-RELATED
ENTERPRISES AND PROMOTING FRIENDLY RELATIONS AND THE EXCHANGE OF IDEAS
AMONG ITS MEMBERS.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
AWARDING OF EDUCATIONAL SCHOLARSHIPS AND ASSISTING ORGANIZATIONS THAT
HELP AND PROTECT JOURNALISTS AND THEIR ACTIVITIES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
HOSTING OF A NUMBER OF MEMBERSHIP EVENTS DURING THE YEAR TO PROMOTE
JOURNALISTIC EXCHANGES, EDUCATION AND RECOGNITION.
EXPENSES \$ 59636. INCLUDING GRANTS OF \$ 0. REVENUE \$ 42495.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS VARIOUS
MEMBERSHIP LEVELS INCLUDING ACTIVE, ASSOCIATED AND LIMITED. ACTIVE MEMBERS
ARE LIMITED TO 65 IN NUMBER. LIMITED MEMBERS DO NOT HAVE TO BE INVOLVED
IN THE NEWS JOURNALISM FIELD BUT THEY MUST BE ELECTED BY A VOTE OF THE
ACTIVE MEMBERS AND CANNOT EXCEED A TOTAL OF 15 IN NUMBER AT ANY TIME.
LIMITED MEMBERS ARE ALSO NON-VOTING MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A: OFFICERS AND THE EXECUTIVE
COMMITTEE ARE VOTED TO A ONE-YEAR TERM EACH YEAR BY ACTIVE MEMBERS OF THE
ORGANIZATION.

SCHEDULE O

Department of the Treasury

(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.

Attach to Form 990.

2009
Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization 36-4643320 THE GRIDIRON CLUB AND FOUNDATION AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PROVIDED IN ELECTRONIC FORMAT TO SELECTED OFFICERS TO REVIEW BEFORE FILING. FORM 990, PART VI, SECTION C, LINE 19: APPLICABLE INFORMATION CAN BE OBTAINED BY REQUESTING FROM THE ORGANIZATION.

Form 8868 (Rev 4-2009)	Page 2							
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box 								
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868								
 If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1) 								
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies needed)							
Type or Name of Exempt Organization	Employer identification number							
print THE GRIDIRON CLUB AND FOUNDATION	36-4643320							
extended due date for fling the Number, street, and room or suite no If a P O box, see instructions 976 NATIONAL PRESS BUILDING	For IRS use only							
return See City, town or post office, state, and ZIP code For a foreign address, see instructions WASHINGTON, DC 20045								
Check type of return to be filed (File a separate application for each return) X Form 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041 A Form 5227 Form 8870 Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069								
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly filed Form 8868.							
SUSAN L HAHN The books are in the care of ▶ 976 NATIONAL PRESS BUILDING - WASHINGTO Telephone No. ▶ 202-783-4050 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all request an additional 3-month extension of time until NOVEMBER 15, 2010. For calendar year 2009, or other tax year beginning if this tax year is for less than 12 months, check reason Initial return Final return State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO ALLOW FOR BOARD REVIEW COMPLETE AND ACCURATE RETURN.	s is for the whole group, check this members the extension is for Change in accounting period							
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any								
nonrefundable credits. See instructions	8a \$							
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated								
tax payments made Include any prior year overpayment allowed as a credit and any amount paid								
previously with Form 8868	8b \$							
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit								
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c \$ N/A							
Signature and Verification Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form								
Signature Delne X Malles Title CPA	Date > 8/16/2010							
	Form 8868 (Rev 4-2009)							