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Form 990

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 Inspection

Department of the Treasury Internal Revenue Service

SCANNED OCT 0 7 2010

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

	For the	2009 calen	dar year,	or tax year beginning , 2009, and endin	g			,
В		applicable		C		D Emplo	yer Identi	fication Number
_		ress change	Please use IRS label	New America Foundation		52-	2096	845
	\vdash	ne change	or print or type.	1899 L Street, NW #400	F	E Teleph		
	\vdash	al return	See specific	Washington, DC 20036		(20	2) 9	86-2700
	\vdash	nination	Instruc-		ŀ	(20	2, 3	00_2,00
	\vdash	ended return	tions.		1	G Gross		15,698,628.
	\vdash		F Name :	and address of principal officer Stephen W. Coll	H(a) Is this a			
	☐ App	lication pending		As C Above	H(b) Are all a			Yes No
_	Toy	exempt statu			If 'No,' a	attach a list	(see inst	
<u>'</u>				merica.net	W-> C			
			X Corpora		H(c) Group e			egal domicile DC
K	rt i	of organization		tion Trust Association Other ► L Year of Format	ion 1990) IVI	State of it	egai domicile DC
P		Summ		panization's mission or most significant activities To bring	ovcont	tional	llu n	romicing new
				<u>lideas to the fore of our nation's publi</u>				
Activities & Governance				d issue-specific programs and sponsoring				
E.				rences, and events on the most important				
Ş.	2 0	Check this bo	_ LUILE	if the organization discontinued its operations or disposed of mo	re than 25	5% of its	assets	
Ğ				bers of the governing body (Part VI, line 1a)		.,,	3	22
∞ 0				t voting members of the governing body (Part VI, line 1b)			4	22
ıţ;				yees (Part V, line 2a)			5	140
€	ı			eers (estimate if necessary)			6	22
⋖	ı	_		pusiness revenue from Part VIII, column (C), line 12			7 a	0.
	b v	Net unrelated	business	taxable income from Form 990-T, line 34			7 b	0.
						ior Year		Current Year
Φ	8 0	Contributions	and gran	ts (Part VIII, line 1h)	13	<u>,741,</u>	770.	15,201,367.
ē	9 F	rogram sen	rever	de (Part VIII-linge 29)		441	012	210 120
Revenue	10 1	nvestment ir	come (Pa	ort Vill, column (A), lines 3, 4, and 7d)	 	441,	124.	319,138. 174,719.
_	11 C	Jiner revenu	e (Part V	II, column (A), lines 5,6d, 8c, 9c, 10c, and 11e) nes 8 throogh ի (must equal Part VIII, column (A), line 12)	1.4	,193,		15,695,224.
_	13	Propte and 6	umilar am	punts paid (Part IX column (A), lines 1-3)		117,		13,033,224.
				members (Part IX,¢orumn (A), line 4)			337.	
	15 5	Salaries offi		sation employee benefits (Part IX, column (A), lines 5-10)	8	,716,	457	10,398,784.
es				g fees (Part IX, column (A), line 11e)		, , 10,	307.	10,330,704.
Expenses								
찙	1			nses (Part IX, column (D), line 25) - 532, 154.	<u> </u>			
	1			X, column (A), lines 11a-11d, 11f-24f)		, 439,		5,238,652.
	1	-		nes 13-17 (must equal Part IX, column (A), line 25)		,272,		15,637,436.
		Revenue less	s expense	s. Subtract line 18 from line 12		<u>,920,</u>		57,788.
lances						ning of `		End of Year
A G	'	Total assets			13	,581,		14,197,411.
Net Ass Fund Bei	21 T	Fotal liabilitie	es (Part X	, line 26)	-	427,		985,653.
				ances. Subtract line 21 from line 20	13	<u>,153,</u>	970.	13,211,758.
Pa	art II	Signat	ure Blo	<u> </u>				
		Under penaltic	es of perjury,	I declare that I have examined this return, including accompanying schedules and stat Declaration of preparer (other than officer) is based on all information of which preparer	tements, and arer has any k	to the best	of my kno	owledge and belief, it is
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He	re	Signature			Dat			
			hen W.		Presi	<u>.dent</u>		
_		Type or p	rint name an	· · · · · · · · · · · · · · · · · · ·			.م	aparar's identifying number
_				Date	Ch se	eck if lf-	[Se	eparer's identifying number ee instructions)
Pa		Preparer's signature		in A lonez CPA Mari A. Lovy 9/11/	en	nployed •	· 📙 _	
Pr	e- rer's	signature		10 H. Bopez, eth / West ///	00		<u> P</u>	00637804
Us		Firm's name (ry Group, CPA'S				
Or		employed), address, and		1 Mount Vernon Avenue	EII		_	51012
		ZIP + 4		xandria, VA 22305	Ph	one no	(703	3) 838-7611
Ma	v the IR	RS discuss t	his return	with the preparer shown above? (see instructions)				X Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2009)

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	Form 99 If 'Yes.'						- Cal	ارامط	ام <u>۱</u>														Ļ	٢	Yes	X	No
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3	If 'Yes,'	-				_			Sigili	ilicari	it Ciia	inge.	3 111	110**	it con	iducts	i, aii	pio	gram	3614	ices.		L	ل	163	N	NO
4	Describe				-				each	of th	e ora	לוחמר	atioi	n's th	ree l	arges	t pro	oran	serv	/ICes	hv ex	nens	es :	Sec	tion f	501 <i>(</i> c)	<i>(</i> 3)
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	Х	
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		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	x	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	<u>x</u> _	
•	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			:
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12/	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No 12 A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
148	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
1	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
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

•	· · · · · · · · · · · · · · · · · · ·		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		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
24	a 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, and 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		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		Х
ı	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		<u>X</u>
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee 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 transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	-	х
	b 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		Х
	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		Х
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 L	33		Х
34	Was the organization related to any tax-exempt or taxable entity 9 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)? 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? 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	
BAA		Form	990 (2009)

			_	_
`.			Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable 120			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	 1c	X	
2	a 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 140			
2	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
	b If 'Yes,' enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	ĺ		
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
١	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5ь		X
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6	a 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
١	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
,	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	of Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		<u>x</u> _
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d		-	1
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
١	1 For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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		
9	Sponsoring organizations maintaining donor advised funds.	-		
i	a Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter		$\neg \uparrow$	
á	a Initiation fees and capital contributions included on Part VIII, line 12			
ı	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	
11	Section 501(c)(12) organizations. Enter			
	a Gross income from other members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	[
!	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

BAA

Form 990 (2009)

Governing Body and Management

1 a Enter the number of voting members of the governing body b Enter the number of voting members that are independent

Section A.

1 b

No

Yes

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.

2	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		Х
3	B 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		Х
4	Did the organization make any significant changes to its organizational documents	4		X
	since the prior Form 990 was filed?			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
e	Does the organization have members or stockholders?	6		Х
7	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Х
	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7ь		Х
8	B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
	a The governing body?	8a	Х	
	b Each committee with authority to act on behalf of the governing body?	8ь	X	
c	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
2	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			
₹e	venue Code)			
			Yes	No
10	a Does the organization have local chapters, branches, or affiliates?	10 a		X
	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10 b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		Х
11	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
12	2a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Χ	
	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done See Schedule O	12c	Х	
13	B Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		Х
15	5 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15a	Χ	
	b Other officers of key employees of the organization See Schedule O	15b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16	6a 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 If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosures			
	List the states with which a copy of this Form 990 is required to be filed CA			
	3 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	vaılabi	e for	public
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest pol statements available to the public. See Schedule O	ıcy, ar	nd fina	ancial
20	State the name, physical address, and telephone number of the person who possesses the books and records of the org	anızat	ion	
	► Simone Frank 1899 L Street, NW, Ste 400 Washington DC 20036 (202) 986-2700			

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 organizations'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 employees.'
- 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 hours per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	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
Edward Halstead										
Founder & Dir.	11	X		Х		ļ <u>.</u>		0.	0.	0
Roger Ferguson		ļ								
Treasurer	1 1	X		Х				0.	0.	0
Walter R. Mead										
Director	1	X						0.	0.	0
James Fallows		1								
Director	11	X				l		0.	0.	0
William W. Gerrity										
Director	11_	X_						0.	0.	0
Francis Fukuyama										
Director	7 1	X						0.	0.	0
Noosheen Hashemi										
Director	7 1	X]		0.	0.	0
Laurene Powell Jobs										
Director	7 1	X						0.	0.	0
Kati Marton										
Secretary	7 1	x		Х				0.	0.	0
Lenny Mendonca		İ						·	Ì	
Director	7 1	X						0.	0.	0
Liaquat Ahamed										
Director	1	Х						0.	0.	0
Zachary Karabell										
Director	7 1	Х						0.1	0.	0
Eric Schmidt										-
Chairman	1	X		x				0.	0.	0
Bernard Schwartz		<u> </u>								
Director	7 ₁	Х		ĺ				o.	0.	0
Atul A. Gawande		 								
Director	\dashv 1	X		1				0.	0.	0
Laura D'Andrea Tyson		T	Т	\vdash	\vdash					
Director	1 1	Х	1					0.	0.	0
Richard Medley	 -	†	 		 					
Director	1	X						0.	0.	0
BAA	<u> </u>	1	TEE^	0107	11	/10/09		• • • • • • • • • • • • • • • • • • • •		Form 990 (2009

Part VII Section A. Officers, Directors, Trus	tees, k	(ey	En	ıplo	oye	es,	an	d Highest Con	npensated Emp	loyees (cont.)
· (A)	(B)			•	c)			(D)	(E)	(F)
Name and Title	Average hours	Posi	tion (Reportable	Reportable compensation from	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Daniel Yerqin										
Director	1	Х			L.	L		0.	0.	0.
Fareed Zakaria					ĺ					
Director	1	X		<u>.</u>	L			0.	0.	0.
Jeffrey Leonard									_	_
Director	1	Х			<u> </u>	ļ		0.	0.	0.
David Bradley	_				1			_		
Director	1	Х				_		0.	0.	0.
Rita Hauser	_									_
Director	1	Х		_	_	<u> </u>		0.	0.	0.
Stephen W. Coll					١	'				
President	40			Х	X	$ldsymbol{ldsymbol{ldsymbol{ldsymbol{eta}}}$		271,350.	0.	34,604.
Len Nichols									_	
Program Dir.	40				<u>_</u>	Х		166,000.	0.	32,829.
Ramon_Boshara									_	
Vice President	40					Х		159,770.	0.	26,441.
Steven Clemons									_	
Program Dir.	40				_	X		170,156.	0.	28,269.
Sherle Schwenninger										
Program Director	40					Х		163,504.	0.	25,384.
Rachel White										
Vice President	40				_	Х		166,925.	0.	33,411.
					\vdash					
1 b Total							>	1,097,705.	0.	180,938.
2 Table who of all dails of last beautiful.			-						£100.000	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization
 29

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>	3		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	4	Х	•
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes.' complete Schedule J for such person	5		Х

Section B. Independent Contractors

BAA

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

Name and business addressDescripJames T. Bates 7713 Rowan Court Annandale, VA 22003ConsultinWashington University 700 Rosedale, Box 1034 St. Louis, MO 63112-140 Contract		Compensation 140,714.
		140,714.
Washington University 700 Rosedale, Box 1034 St. Louis, MO 63112-140 Contract		
	Services	260,000.
Avitecture 1 Export Drive Sterling, VA 20164-4421 A/V Insta	allation	119,382.
Richard C. Seder 1464 Halekoa Dr Honolulu, HI 96821 Prog Tech	n Assist Svc	116,875.
MDRC 16 East 34th Street New York, NY 10016-4326 Proj. Con	nsulting Svc	195,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 6

•

Pa	T VIII Statement of Revenue	· -			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
8.0	1a Federated campaigns 1a				
ANT	b Membership dues 1b	1			
S O	c Fundraising events 1c	İ			
R A	d Related organizations 1d				
₹.	e Government grants (contributions)				
SIS					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 15, 201, 367.				1
NON	g Noncash contribus included in lns 1a-1f: \$				
5		15,201,367.			
Š	Business Code				· - ·
E	2a				
ä	b				
Ž	c				
SEI	d				
Α¥	e	-			<u> </u>
20	f All other program service revenue.				
-	g Total. Add lines 2a-2f				,
	3 Investment income (including dividends, interest and	201 040			201 040
ĺ	other similar amounts)	321,042.			321,042.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross Rents 171, 218.				
	b Less rental expenses				
	c Rental income or (loss) 171,218.	-			'
	d Net rental income or (loss)	171,218.	171,218.		
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory 1,500.				
	b Less cost or other basis				
	and sales expenses 3, 404.				
	c Gain or (loss) -1, 904.	_		-	
	d Net gain or (loss)	-1,904.			-1,904.
EVENUE	8a Gross income from fundraising events (not including \$				
<u> </u>	of contributions reported on line 1c).				
OTHER RE	See Part IV, line 18 a				1
꾿	b Less: direct expenses b		_]
0	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less. direct expenses b				,
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a				
1	b Less. cost of goods sold b				
	c Net income or (loss) from sales of inventory		-		· · · · ·
	Miscellaneous Revenue Business Code				,
	11a Publication sales	3,501.			3,501.
	b				
	c				
	d All other revenue.				
	e Total. Add lines 11a-11d	3,501.			
		15,695,224.	171,218.	0.	322,639.
					· · · · · · · · · · · · · · · · · · ·

Form 990 (2009) New America Foundation

Part IX | Statement of Functional Expenses

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

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

	i `´- ı			
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
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	271,351.	55,195.	148,808.	67,348.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in	0.	0.	0	0
section 4958(c)(3)(B)			0.	0.
7 Other salaries and wages	8,207,283.	7,501,719.	489,658.	215,906.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	650,537.	568,423.	55,306.	26,808.
9 Other employee benefits	672,401.	609,563.	40,471.	22,367.
10 Payroll taxes	597,212.	536,244.	40,969.	19,999.
11 Fees for services (non-employees)	3,1,100	000/====	30/3031	
a Management				
b Legal	18,556.	10,426.	8,130.	
c Accounting	21,421.	10, 120.	21,421.	
d Lobbying	21,121		21, 121.	
e Prof fundraising svcs. See Part IV, In 17				
f Investment management fees				
g Other	2,415,301.	2,315,805.	98,621.	875.
12 Advertising and promotion	111,617.	91,464.	19,981.	172.
13 Office expenses	103,175.	82,621.	18,326.	2,228.
14 Information technology	147,504.	138,080.	6,262.	3,162.
15 Royalties	147,504.	130,000.	0,202.	3,102.
16 Occupancy	1,265,113.	972,873.	261,236.	31,004.
17 Travel	435,343.	395,677.	8,875.	30,791.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	433,343.	333,011.	0,073.	30,771.
19 Conferences, conventions, and meetings	496,457.	419,634.	16,859.	59,964.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	80,711.		80,711.	
23 Insurance	13,305.	182.	13,123.	
Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a Subscriptions and publications	82,711.	76,796.	2,834.	3,081.
b Postage and Shipping	19,509.	12,114.	6,970.	425.
c Miscellaneous	15,309.	4,230.	11,079.	
d Staff recruitment	12,620.	6,720.	5,900.	
e Allocated general operating f All other expenses		1,283,535.	-1,331,559.	48,024.
25 Total functional expenses. Add lines 1 through 24f	15,637,436.	15,081,301.	23,981.	532,154.
26 Joint costs. Check here ► If following	10,007,100.	20,001,001.		332,134.
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA			L	Form 990 (2009)

Pa	<u>rt X</u>	Balance Sheet			
`			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		1	
	2	Savings and temporary cash investments	4,606,180.	2	4,677,621.
	3	Pledges and grants receivable, net	2,147,115.	3	491,808.
	4	Accounts receivable, net	203,514.	4	48,800.
	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))		-	
A		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
ASSET	8	Inventories for sale or use		8	
Š	9	Prepaid expenses and deferred charges	224,300.	9	187,101.
	10 a	Land, buildings, and equipment: cost or other basis. 10a 492,035.			
		Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b 168,435	70,272.	10 c	323,600.
	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	6,329,794.	15	8,468,481.
	16	Total assets Add lines 1 through 15 (must equal line 34).	13,581,175.	16	14,197,411.
	17	Accounts payable and accrued expenses .	363,438.	17	511,069.
	18	Grants payable		18	
	19	Deferred revenue		19	
ㅏ	20	Tax-exempt bond liabilities		20	
AB	21	Escrow or custodial account liability Complete Part IV of Schedule D	63,767.	21	79,410.
1-1-	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II			
į		of Schedule L		22	
S	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	395,174.
	26	Total liabilities. Add lines 17 through 25	427,205.	26	985,653.
И		Organizations that follow SFAS 117, check here ► X and complete lines			
NE T		27 through 29 and lines 33 and 34.			
Ą	27	Unrestricted net assets	4,273,346.	27	4,604,542.
くいのエーい	28	Temporarily restricted net assets	8,880,624.	28	8,607,216.
- 1	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ► and complete			
F.		lines 30 through 34.			
UZC-	30	Capital stock or trust principal, or current funds .		30	
ķ	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
ו [*]	32	Retained earnings, endowment, accumulated income, or other funds		32	
CZUMO	33	Total net assets or fund balances.	13,153,970.	33	13,211,758.
Š	34	Total liabilities and net assets/fund balances.	13,581,175.	34	14,197,411.
BA		A CONTRACT OF THE CONTRACT OF			Form 990 (2009)

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Form 990 (2009) New America Foundation	52-2096845	Pā	ge 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			
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	1	Х
b Were the organization's financial statements audited by an independent accountant?	2 b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi review, or compilation of its financial statements and selection of an independent accountant?	ght of the audit, 2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	ın .		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we consolidated basis, separate basis, or both.	ere issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			

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.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

BAA

Form 990 (2009)

3a

Х

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047 2009

Open to Public Inspection

Name of	the organization	··						Employe	r identificat	tion number		
New	New America Foundation 52-2096845 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions											
Part	I Reason for Pu	blic Charity Statu	s (All organizations	must o	comple	te this	part.)	See i	nstruct	ions		
The or	ganization is not a pri	vate foundation becau	ise it is: (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1 [A church, convent	on of churches or ass	ociation of churches des	cribed ir	section	n 170(b)	(1)(A)(i)					
2	A school described	in section 170(b)(1)(A)(ii). (Attach Schedule	E)								
3 [A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4												
	name, city, and sta	ite										
5 [<u>└</u> 170(b)(1)(A)(iv). (0	Complete Part II.)	of a college or university			_	_	nmenta	I unit de:	scribed in	section	n
6 7	X An organization that		governmental unit descri substantial part of its si					t or fron	n the ger	neral public	desc	rıbed
8			art II.) 1 70(b)(1)(A)(vi). (Comple	te Part I	l.)							
9 (from activities relate investment income	d to its exempt function	more than 33-1/3 % of its is – subject to certain exciss taxable income (less complete Part III.)	eptions, a	and (2) r	no more t	han 33-	1/3 % of	its suppo	ort from aro	SS	ıfter
10	An organization org	ganized and operated	exclusively to test for pu	ublic safe	ety. See	section	509(a)	(4).				
11 [more publicly supp	orted organizations d	exclusively for the bene lescribed in section 509(zation and complete line	a)(1) or	section	509(a)(2	ctions o 2). See	of, or ca section	rry out th 509(a)(3	ne purpose). Check t	s of or he box	ne or that
	a Type I	b Type II	c Type II	I – Fund	tionally	ıntegrat	ed		d 🗌	Type III-	Other	
e {	By checking this both than foundation material 509(a)(2).	ox, I certify that the or anagers and other tha	ganization is not control n one or more publicly s	led direc upportec	tly or in d organi	directly zations	by one describe	or more ed in sec	disqualiction 509	ified perso (a)(1) or s	ns oth ection	ner
f	If the organization check this box	received a written det	ermination from the IRS	that is a	a Type I	, Type II	or Typ	e III sup	porting o	organizatio	n,	
g	Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	ution fr	om any	of the fo	ollowing	persons	,7		
											Yes	No
	(i) a person who	directly or indirectly	controls, either alone or upported organization?	together	with pe	rsons d	escribed	d ın (ıı) a	and (III)	11 ~ (1)		
		• ,	.,							11 g (i)		
	• •	iber of a person desc	i described in (i) or (ii) a	houo?						11g (ii)		
	• •	• •	*, *,							11 g (iii)		
<u>h</u>		r i	the supported organization			T			1			
	(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the ion in cold in your irning ment?	(v) Did y the organ col o your su	ization in (i) of	organizat	s the ion in col zed in the 5 ?	(VII) Amour	nt of Sup	port
				Yes	No	Yes	No	Yes	No			
				<u> </u>								
									l			
				1								
		-										
Total						:						

•											
Schedùle A (Form 990 or 990-EZ) 2009 New America Foundation 52-2096845 Page											
Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)											
Sec	(Complete only if you check tion A. Public Support	ed the box on line	e 5, 7, or 8 of Par	t_l.)	.						
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total				
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	8,822,779.	9,618,586.	11146978.	13741770.	15201367.	58,531,480.				
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.				
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						0.				
4	Total. Add lines 1-through 3	8,822,779.	9,618,586.	11146978.	13741770.	15201367.	58,531,480.				
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)						20,862,448.				
6	Public support. Subtract line 5 from line 4						37,669,032.				
Sec	tion B. Total Support										
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total				
7	Amounts from line 4	8,822,779.	9,618,586.	11146978.	13741770.	15201367.	58,531,480.				
8											
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).						0.				
11	Total support. Add lines 7 through 10						60,419,336.				
12	Gross receipts from related activ	rities, etc. (see in:	structions)			12	0.				
13	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secor	nd, third, fourth, c	or fifth tax year as	a section 501(c)	⁽³⁾ ► □				
Sec	tion C. Computation of Pu		Percentage		•		, , , , , , , , , , , , , , , , , , ,				
14 15	Public support percentage for 20 Public support percentage from 3	•	•	ie 11, column (f).		14 15	62.4 % 59.7 %				
16 a	33-1/3 support test - 2009. If the and stop here. The organization	e organization did	I not check the bo	x on line 13, and ganization.	the line 14 is 33-						
ŧ	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pul	I not check a box blicly supported or	on line 13, or 16a ganization.	, and line 15 is 33	3-1/3% or more,	check this box				
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	e. Explain in Par	t IV how				
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	e. Explain in Par	e 15 is 10% t IV how the				

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 **(b)** 2006 (d) 2008 Calendar year (or fiscal vr beginning in)> (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1. 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year c Add lines 7a and 7b. 8 Public support (Subtract line 7c from line 6) Section B. Total Support (d) 2008 Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 (c) 2007 (e) 2009 (f) Total Amounts from line 6 10 a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f) 15 % 16 16 Public support percentage from 2008 Schedule A, Part III, line 15 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 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 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 A	(Form 990	or 990-EZ)	2009	New	Americ	a :	Found	lation		explanation er additional	52	-209684	5	Page 4
Partiv	Supplem	ental Inf	ormat	ion. C	omplete	thi	s part	to provi	de the	explanation	s required	by Part	II, line 10	0;
·	Part II, Ii	<u>ne 17a o</u>	r 17b;	and F	Part III, li	ıne	12. P	rovide ai	ny othe	er additional	ınformatı	on. See i	nstruction	ns.
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SCHÈDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

► Complete if the organization is described below.

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

Open to Public Inspection

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

ad 'Vac ' to Farm 000 Bort IV line E (Brass, Tax) than

- Section 501(c)(3) organizations. complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B
- the constitution of the Ferri Oct Park W. Park A. P. Franco Oct FT. Back W. Park A. J. W. S. A. J. W. J. W. S. A. J. W. J. W. S. A. J. W. S. A. J. W. J. W. S. A. J. W. J. W. S. A. J. W. J. W. J. W. J. W. S. A. J. W. J. W. J. W. J. W. J. W. J. W.
- Section 527 organizations complete Part I-A only.

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

	-	organizations Complete Part III.	aicii		
	of organization	rganizations Complete Fart III.		Employer identific	ation number
	w America Foundatio	n		52-209684	
		rganization is exempt under section	on 501(c) or is a		
1		organization's direct and indirect political of			
2	Political expenditures		pu.g uo	. u.t.tt	,
_	Volunteer hours			•	
		rganization is exempt under section	on 501(c)(3).		
1		ise tax incurred by the organization under		►Ś	0.
2	•	ise tax incurred by organization managers		► Ś	
3		a section 4955 tax, did it file Form 4720 for		*	Yes No
_	Was a correction made?	1 300 tax, ala time i omi 1,20 tot	ano your.		Yes No
	b If 'Yes.' describe in Part IV.				
Pai	ttiEG≱ Complete if the o	rganization is exempt under section	on 501(c) . excep	t section 501(c)(3).	
1		pended by the filing organization for section			
•					
2	function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt	
3	Total of exempt function exp line 17b	enditures. Add lines 1 and 2. Enter here a	nd on Form 1120-PO	L, ►\$	1
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
	made. For each organization contributions received that w	and employer identification number (EIN) i listed, enter the amount paid from the fili vere promptly and directly delivered to a se se (PAC). If additional space is needed, pr	ng organization's fund parate political organ	ds. Also enter the amou	int of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if section 501	the organizatio	n is exempt under se	ction 501(c)(3) and	filed Form 5768 (el	ection under
		ongs to an affiliated group.			
	• •	cked box A and 'limited co			
	Limits on Lobbyi	ng Expenditures — ans amounts paid or incurr		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence pu	ublic opinion (grass roots lo	bbying)		
•	•	legislative body (direct lobb	,	68,693.	
c Total lobbying expenditi	ures (add lines 1a a	and 1b)		68,693.	0.
d Other exempt purpose	expenditures			15,568,743.	
e Total exempt purpose e	expenditures (add li	nes 1c and 1d)		15,637,436.	0.
f Lobbying nontaxable an both columns	mount. Enter the an	nount from the following tab	ole in	931,872.	
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable a	mount is		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,	,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	amount (enter 25%	of line 1f)		232,968.	0.
h Subtract line 1g from lir	ne 1a If zero or les	s, enter -0-		0.	0.
i Subtract line 1f from lin	e 1c. If zero or less	s, enter -0-		0.	<u> </u>
j If there is an amount of section 4911 tax for this	her than zero on ei s year?	ther line 1h or line 1i, did tl	he organization file Fori	m 4720 reporting	Yes No
(Som	e organizations tha	4-Year Averaging Period Unit made a section 501(h) eles below. See the instruction	ection do not have to c	omplete all of the five h 2f.)	
	Lobi	ying Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	518,70	3. 613,154.	763,646.	931,872.	2,827,375.
b Lobbying ceiling amount (150% of line 2a, column (e))					4,241,063.
c Total lobbying expenditures	96,91	4. 76,515.	82,172.	68,693.	324,294.
d Grassroots nontaxable amount	129,67	6. 153,289.	190,912.	232,968.	706,845.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,060,268.
f Grassroots lobbying expenditures				0.1	0.
BAA				Schedule C (Form	990 or 990-EZ) 2009

(election under section 501(h)). 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If 'Yes,' describe in Part IV j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501	Yes			ount
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If 'Yes,' describe in Part IV j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501 Were substantially all (90% or more) dues received nondeductible by members?				
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b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If 'Yes,' describe in Part IV j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? art III-A Complete if the organization is exempt under section 501(c)(4), section 501 Were substantially all (90% or more) dues received nondeductible by members?	1(c)(5)	, or s	ection 50	1(c)(6
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1 Were substantially all (90% or more) dues received nondeductible by members?	1(c)(5)	, or s	ection 50	1(c)((
				Yes
			1	\dashv
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	\rightarrow
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501	1/a\/E\		3	1/->//
if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line	3 is a	nswe	red 'Yes.'	, I (C)(C
Dues, assessments and similar amounts from members		1		
Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ı [
a Current year		2a		
b Carryover from last year	[2ь		
c Total		2c		
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	-	3		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
art IV Supplemental Information	<u>.</u>			
mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; a so, complete this part for any additional information.	and Part	t II-B, I	line 1i	

Schedule C (Form 990 or 990-EZ) 2009 New America Foundation Partive Supplemental Information (continued)	52-2096845	Page 4
ParxIV Supplemental Information (continued)		
•	-	
		
		
		-
		
		
		
		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990. ► See separate instructions

2009 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

New America Foundation	52-2096845
Part I Organizations Maintaining Donor Advised Funds or Other Similar Futhe organization answered 'Yes' to Form 990, Part IV, line 6.	
(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	
2 Aggregate contributions to (during year)	
3 Aggregate grants from (during year)	
4 Aggregate value at end of year	
5 Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control?	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant fu used only for charitable purposes and not for the benefit of the donor or donor advisor or f purpose conferring impermissible private benefit??	unds may be for any other Yes No
Part II Conservation Easements Complete if the organization answered 'Yes	s' to Form 990. Part IV. line 7.
1 Purpose(s) of conservation easements held by the organization (check all that apply).	
	n of an historically important land area
	n of certified historic structure
Preservation of open space	
Complete lines 2a through 2d if the organization held a qualified conservation contribution last day of the tax year.	in the form of a conservation easement on the
	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06.	2d
3 Number of conservation easements modified, transferred, released, extinguished, or termin	nated by the organization during the tax
year >	
4 Number of states where property subject to conservation easement is located >	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, hand enforcement of the conservation easement it holds?	handling of violations, Yes No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation eaduring the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easem during the year ►	nents \$
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	section Yes No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expinctude, if applicable, the text of the footnote to the organization's financial statements that conservation easements.	pense statement, and balance sheet, and t describes the organization's accounting for
Part III Organizations Maintaining Collections of Art, Historical Treasures, Complete if the organization answered 'Yes' to Form 990, Part IV, Iin	or Other Similar Assets e 8.
1a If the organization elected, as permitted under SFAS 116, not to report in its revenue state treasures, or other similar assets held for public exhibition, education, or research in further the text of the footnote to its financial statements that describes these items.	ement and balance sheet works of art, historical erance of public service, provide, in Part XIV,
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement reasures, or other similar assets held for public exhibition, education, or research in further amounts relating to these items.	nt and balance sheet works of art, historical erance of public service, provide the following
(i) Revenues included in Form 990, Part VIII, line 1	- \$
(ii) Assets included in Form 990, Part X	*\$ *\$
2 If the organization received or held works of art, historical treasures, or other similar assets amounts required to be reported under SFAS 116 relating to these items.	s for financial gain, provide the following
a Revenues included in Form 990, Part VIII, line 1	> \$
b Assets included in Form 990, Part X	- \$

•					
Schedule D (Form 990) 2009 New A	America I	Foundation		52-209	06845 Page 2
Part III Organizations Mainta	ining Colle	ections of Art, Hist	orical Treasures, o	r Other Similar Ass	ets (continued)
3 Using the organization's acquisitintems (check all that apply).	on accession	n and other records, che	eck any of the following	that are a significant us	se of its collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e 🗌 Othe	r		
c Preservation for future gener	ations	_			
4 Provide a description of the orga Part XIV.	nızatıon's col	llections and explain ho	w they further the orga	nızatıon's exempt purpo	se in
5 During the year, did the organiza assets to be sold to raise funds r	ather than to	be maintained as part	of the organization's co	ollection?	Yes No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangen unt on For	nents Complete if a m 990, Part X, line	organization answe 21.	red 'Yes' to Form 9	90, Part IV, line
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodia	an, or other intermediar	y for contributions or ot	her assets not	X Yes No
b If 'Yes,' explain the arrangement	in Part XIV	and complete the follow	ving table.		
See Part XIV					Amount
c Beginning balance				1 c	63,767.
d Additions during the year 1d 15,643					
e Distributions during the year					
f Ending balance 1f 79,410.					
2a Did the organization include an amount on Form 990, Part X, line 21?					
b If 'Yes,' explain the arrangement	ın Part XIV.	See Part XI	V		
Part V Endowment Funds Co	mplete if o	rganization answei	red 'Yes' to Form 9	<u>90, Part IV, line 10.</u>	
	(a) Current	t year (b) Prior ye	ar (c) Two years bad	ck (d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net Investment earnings, gains, and losses					
d Grants or scholarships					
 Other expenditures for facilities and programs 					
f Administrative expenses					<u> </u>
g End of year balance	<u> </u>				<u> </u>
2 Provide the estimated percentage	e of the year	end balance held as.			
a Board designated or quasi-endov	vment ►	%			
b Permanent endowment ▶	ક	i.			
c Term endowment ►	<u></u> ₹				
3a Are there endowment funds not a organization by.	n the posses	sion of the organization	n that are held and adm	inistered for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(II), are the related of	organizations	listed as required on S	ichedule R?		3b
4 Describe in Part XIV the intended	d uses of the	organization's endown	nent funds		
Part VI Investments-Land, B	uildings, a	and Equipment. Se	e Form 990, Part X	l, line 10.	
Description of investment		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1 a Land					
b Buildings					
		1	1	1	

c Leasehold improvements 492,035. 168,435. 323,600. **d** Equipment Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 323,600.

BAA

Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 New America Found	lation	52-2096845 Pa	age 3
Part VII Investments—Other Securities See F			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990 Part X, col (B) line 12)			
Part VIII Investments-Program Related (See	Form 990, Part X, line	13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
(-)	()	Cost or end-of-year market value	
<u></u>			
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13)			
Part IX Other Assets (See Form 990, Part X,	line 15)		
(a) D	escription	(b) Book value	e
Certificates of deposit		8,398,0	<u>75.</u>
Committee funds		63,9	73.
Security deposits		6,43	33.
Total. (Column (b) must equal Form 990, Part X, col (B),	line 15)	▶ 8,468,48	81.
Part X Other Liabilities (See Form 990, Part			
(a) Description of Liability	(b) Amount		
Federal Income Taxes	(2)		
Deferred rent liability	395,174.		
Dolollog Lone Liablility	330,271		
-			
	 		
			
T. I. (0.1 (1) I I 200 D. I.V. I. (0.1 201	305 174		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	395,174.		
2. FIN 48 Footnote. In Part XIV, provide the text of the footnote uncertain tax positions under FIN 48.	note to the organization's fir	iancial statements that reports the organization's lial	Dility

Schedule **D** (Form 990) 2009 New America Foundation

52-2096845

Sche	dule D (Form 990) 2009 New America Foundation	52-2096	845	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
• 1	Total revenue (Form 990, Part VIII,column (A), line 12)		15,699	5,224.
2	Total expenses (Form 990, Part IX, column (A), line 25)		15,63	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			7,788.
4	Net unrealized gains (losses) on investments	_	<u>.</u>	, , , , ,
5	Donated services and use of facilities			
6	Investment expenses	-		
7	Prior period adjustments	_		
8	Other (Describe in Part XIV)	—		
9	Total adjustments (net). Add lines 4 through 8	<u> </u>		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<u> </u>		7 700
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Peturn		7,788.
1	Total revenue, gains, and other support per audited financial statements	1	15,695	221
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		13,03.	, 224.
	Net unrealized gains on investments 2a			
	Donated services and use of facilities 2b			
	Recoveries of prior year grants 2c	_		
	Other (Describe in Part XIV)			
	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3	15,695	5,224.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investments expenses not included on Form 990, Part VIII, line 7b	_		
b	Other (Describe in Part XIV)			
c	Add lines 4a and 4b	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	15,695	5,224.
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Returr)	•
1	Total expenses and losses per audited financial statements	1	15,637	,436.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			·
	Donated services and use of facilities 2a			
b	Prior year adjustments 2b			
	Other losses 2c	\neg		
	Other (Describe in Part XIV)			
	Add lines 2a through 2d	2e		
	Subtract line 2e from line 1	3	15,637	1 136
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		13,037	, 430.
	Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV) 4b	-		
	Add lines 4a and 4b	\dashv \blacksquare		
_		4c	15 625	1 120
	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	15,637	,430.
Par	t XIV Supplemental Information			
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part I, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this nation	IV, lines 1t part to pro	and 2b, Pa vide any ad	irt V, ditional
	Part IV, Line 1b - Contributions Or Other Assets Not Included on B/S			
	These funds are reported in the organization's balance sheet with a	counte	r-balan	cing
	liability account. New America is CRFB's fiscal sponsor, and as suc	h recei	ves fun	ds
	in the name of CRFB, and disburses funds on behalf of CRFB. Additional control of the control of	nally,	New Ame	rica
	holds in escrow a rental deposit from a subtenant starting in 2009.	. -	- -	
	Part IV, Line 2b - Explanation Of Escrow Account Liability	-		
	New America is CRFB's fiscal sponsor. New America receives funds i	n the n	ame of	-
	CRFB, and disburses funds on behalf of CRFB. New America holds and			
BAA	TEEA3304L 02/02/10	Schedul	e D (Form 9	90) 2009

Schedùle D (Form 990) 2009 New America Foundation	52-2096845	Page 5
Part XIV Supplemental Information (continued)		
Part IV, Line 2b - Explanation Of Escrow Account Liability (continued)		
_ funds in a cash account with a counter-balancing liability account	ount. CRFB_account_	· -
balance_at_12/31/09_was_\$63,973. Rental_deposit_of_\$15,437_held	l <u>in escrow from a</u>	
subtenant starting in 2009.		- -
		-
		. – – – –
		· -
		-
		- -

Schedule D (Form 990) 2009 New America Foundation Part NIV Supplemental Information (continued)	52-2096845	Page 5
Part XIV Supplemental Information (continued)		
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		-
		-
	_	
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	. 	
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		-

SCHÈDULE J (Form 990)

Compensation Information

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

New America Foundation

Part I Questions Regarding Compensation

Employer identification number 52-2096845

			Yes	No
1	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ı	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1ь		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			,
;	a Receive a severance payment or change-of-control payment?	4a		X
1	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4ь		X
•	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		<u>X</u>
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	i		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
;	a The organization?	5a		<u>X</u>
١	b Any related organization?	5b		X
	If 'Yes' to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of.			
	a The organization?	6a		<u>X</u>
1	b Any related organization?	6Ь		X
	If 'Yes' to line 6a or 6b, describe in Part III.			
7	For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III	8		X
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

52-2096845

Schedule J (Form 990) 2009 New America Foundation

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

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

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

		,	- 1 -	Soft Section College				
		(b) Dieakuowii oi w-2 aliu/oi	- 1	Confiberisation	(c) Retirement and	(U) Nontaxable	(E) lotal of columns	reported in prior
(A) Name		(i) Base compensation	(II) Bonus and incentive compensation	(iii) Other reportable compensation	compensation	Dellellis	(a)-(ı)(a)	Form 990 or Form 990-EZ
Stephen W. Coll	ε	271,350.	0.				305, 954.	262,382.
	(ii)						0	
Len Nichols	ω	166,000.	0 0	0	20,400.	12,429_	198,829.	183,164.
	€		0	0.		0.	0	
Ramon Boshara	Θ	159,770.	0	0	19,400.			191,404.
	(ii)		0.	0		0.	0	0.
Steven Clemons	Θ	170,156_	 - - - - -				198, 425.	181,528.
	Θ		0	0.		0.	0.	0.
Sherle Schwenninger	Θ	163,504.	0		19,800.	5,584.	188,888.	176, 129.
	(ii)		0 0				의	0.
Rachel White	Θ	166,925.		0.	21,000.	12,411.	200, 336.	0.
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	₫							
ВАА				TEEA4102L 02/02/10	2/02/10		Sched	Schedule J (Form 990) 2009

BA

Schedule J (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

or 990-EZ.

Transactions with Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545 0047

Schedule L (Form 990 or 990-EZ) 2009

2009

Open to Public Inspection Department of the Treasury Internal Revenue Service Name of the organization Employer identification number

	erica Foundation							2-20	_				
Part I	Excess Benefit Transaction Complete if the organization answ	ns (sect ered 'Yes'	ion 50' 'on Forn	1 (c)(3) a n 990. Par	and section t IV. line 25a d	501(c)(or 25b. or	(4) organıza Form 990-EZ.	ations Part V	s only 7. line	/). 40b.			
			1		·				,			(c) Cor	rected?
<u> </u>	(a) Name of disqualified person					(b) Descripti	on of transaction					Yes	No
			-										
						•							
												<u> </u>	
2 Ente	er the amount of tax imposed on the tion 4958.	organiza	tion mar	nagers or	disqualified pe	ersons du	uring the year	under	► \$				
	er the amount of tax, if any, on line 2				e organization				▶ \$				
Part II	Loans to and/or From Inter Complete if the organization answ				t IV, line 26 or	Form 99	0-EZ, Part V , I	ıne 38a	a.				
(a) Name of interested person and purpose	(b) Loan the orga	to or from enization?	(c) princi	Original ipal amount	(d) E	Balance due	(e) In o	iefault?	(f) App by box comm	ard or	(g) W agree	/ritten ment?
		То	From			Yes	No	Yes	No	Yes	No		
		_	ļ										
		+						1	<u> </u>				
								<u> </u>					
								↓					
Total Part III	Grants or Assistance Bene	fitting	ntoroc	tod Por	<u>▶ \$</u>								
raitin	Complete if the organization	n answe	ered 'Y	es' on F	orm 990, P	art IV,	line 27.						
	(a) Name of interested person		b) Relation	ship between	interested person	and	(0	:) Amoun	t and ty	e of as	sistance	•	
				the organ	nization								
.		+					<u> </u>	·					
		+					 					_	
	·					<u></u>							
Part-IV	Duciness Transcations Inc	<u> </u>		tod Dow									
Fart-IV-	Business Transactions Inv Complete If the organization	n answe	red'Ye	s' on Fo	orm 990, Pa	art IV, li	ne 28a, 28	b, or	28c.				
· -	(a) Name of interested person	(b) R	elationship sted persor organizati	between and the	(c) Amous transaction	nt of		scription		action		organiz	aring of zation's nues?
	,											Yes	No
Roger F	erguson	Direc	tor/Tre	easurer			CEO of NAI	F's 4	03b p	lan			Х
		-											-
				_									

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

SCHÈDULE 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.

Open to Public Inspection

Employer identification number

New America Foundation	52-2096845
Form 990, Part III, Line 1 - Organization Mission	
To bring exceptionally promising new voices and new :	ideas to the fore of our
nation's public discourse through Fellowships and is:	sue-specific programs and
sponsoring_a_wide_range_of_research, writing, conference	ences, and events on the most
important_issues_of_our_time	
Form 990, Part III, Line 4a - Program Service Accomplishments	
American Strategy Program: The purpose of the America	an Strategy Program is to promote
a new internationalism that adapts our best foreign	policy traditions to the 21st
century, combining tough-minded realism about America	a's interests in the world with
pragmatic idealism about the kind of world order best	t suited to America's democratic
way of life. The American internationalist tradition	that guides the American
Strategy Program understands that international peace	e and stability in this new
century rests as much on economic prosperity as it do	oes on collective security,
meaning socio-economic development, collective secur	ity, and democracy-building must
be pursued in concert with each other. We must there	fore seek to build a system of
international law and governance that restores legit	imacy to American power while
pooling global resources to address common transnation	onal threats. Through a program
of original research and publication, the American S	trategy Program seeks to build a
new consensus around these core ideas of American in	ternationalism, and the specific
strategies_they_suggest.	
The American Strategy Program wrote 158 articles and	8 policy papers, held 63 public
policy_events_and_had_500_media_appearances	·
Form 990, Part III, Line 4c - Program Service Accomplishments	
Asset Building Program: The Asset Building Program s	eeks to significantly broaden
savings and assets ownership in America, thereby pro-	viding all Americans both with

•	
Schedule O (Form 990) 2009	Page 2
Name of the organization New America Foundation	Employer identification number 52-2096845
Form 990, Part III, Line 4c - Program Service Accomplishments (continued)	
the means to get ahead and with a direct stake in the overa	
economy. The primary goal of the Program is to ensure that	
assets-broadly conceived-becomes a permanent feature of how	v social policy is
conceived, developed, and delivered. Our work in policy res	search, <u>public</u> education,
and policy_development_strives_to_provide_context_and_meani	ing to the assets
perspective and ensure that this perspective is strategical	ly and constructively
inserted into a wide array of social policy discussions.	.
The Asset Building Program wrote 24 articles and 28 policy	papers, held 20 public
policy events and had 58 media appearances.	
Form 990, Part III, Line 4d - Other Program Services Description	
Other programs:	
	·
Committee for a Responsible Federal Budget: Deficit spending	ng is once again the norm
in Washington, the national debt is growing, and no progres	ss has been made in
reforming the nation's underfunded entitlement programs. Th	ne Committee for a
Responsible Federal Budget is a bipartisan organization	whose membership includes
most of the previous heads of OMB and CBO committed to ϵ	educating the public and
members of Congress about the budget process and fiscal res	sponsibility.
	
Health Policy Program: The Health Policy Program works to a	achieve fully portable
health insurance for all Americans while raising the avera	age quality of care and

Schedule O (Form 990) 2009	
Name of the organization	Employer identification number
New America Foundation	52-2096845
Form 990, Part III, Line 4d - Other Program Services Description (conti	nued)
Education Policy Program: New America's Education Policy	y Program focuses on
modernizing our systems of school finance, teaching and	learning, and college
financial aid. The program proposes comprehensive change	es to education policy from
pre-kindergarten to graduate school.	
Open Technology Initiative / Wireless Future Program: The	ne Open Technology Initiative
formulates policy and regulatory reforms to support open	n architectures and open
source innovations and facilitates the development and	implementation of open
technologies and communications networks.	
The American people collectively own the most valuable	resource of the emerging
information economy: the airwaves. The purpose of the Wi	ireless Future Program is to
promote fair and efficient use of the airwaves in order	to unlock the full potential
of the emerging wireless era for all Americans.	
Next Social Contract Initiative: The Next Social Contract	ct Initiative advances the
framework for a 21st-century social contract, along with	n a detailed policy agenda to
support it. The premise of this initiative is that, give	en the unimaginable changes
of the last half-century, we should think from scratch a	about the appropriate roles
of each sector of society-government, employers, individ	duals, and civil society. The
programs and policies of a new social contract should be	e designed to support
entrepreneurship and risk-taking, encourage long-term gr	rowth and broadly shared
prosperity, and support individuals and families not as	employees, but as citizens

California Program: New America has established a substantial presence in

California, with the dual purpose of introducing cutting-edge solutions to the

Schedule O (Form 990) 2009 Name of the organization New America Foundation	Employer identification number 52-2096845
Form 990, Part III, Line 4d - Other Program Services Descrip	
state's foremost challenges and of enriching th	
debate. New America in California appoints fiv	e California-based Fellows per year.
In addition, it pursues state-specific initiati	ves in conjunction with New America's
national Asset Building, Education and Health P	olicy Programs.
College Savings Initiative: The College Savings	Initiative is centered on helping
Americans of all income levels save and prepare	for college through innovative
reforms to 529 college savings plans at the sta	te and national levels. The
Initiative aims to increase post-secondary educ	ation access and completion rates
among lower-income, disadvantaged students thro	ugh innovative public policy and
other reforms to 529 college savings plans.	
Political Reform Program: Working at both the na	ational level and in California, the
Political Reform Program promotes innovative po	litical reforms such as instant
runoff voting, proportional representation and	free air time designed to
re-engage and empower the alienated majority of	the American electorate. This
program was discontinued as of May 31, 2010.	
Economic Growth Program: The United States could	d help drive a new era of rising
global prosperity, yet inadequate investments is	n public infrastructure and an
unsustainable level of consumer debt, undermine	our ability to promote sustainable
economic growth. The purpose of the Economic Gro	
integrated strategy and a set of specific policy	
problems and promote widespread growth and pros	

Schedule 0 (Form 990) 2009	Page 2
Name of the organization New America Foundation	Employer identification number 52-2096845
Form 990, Part III, Line 4d - Other Program Services Description (continued)	
Workforce and Family Program: Evolving family structures and th	e demands of the
highly competitive global marketplace have put unprecedented pr	essures on American
workers, their families and their employers. The Workforce and	Family Program
develops and promotes innovative, market-oriented solutions to	help Americans
succeed in their work and family commitments.	
	·
Fiscal Policy Program: The purpose of the Fiscal Policy Program	n is to reframe the
national_debate_through_concrete_reform_proposals_that_pave_the	way for a tax system
that better reflects American values and a budget that better s	erves our most
important national priorities.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
The Form 990 is reviewed by management before it is filed.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Con	flicts
Employees are required to disclose any conflict of interest act	ivities and sign the
conflict of interest form every year.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officer	s & Key Employees
The President's salary is reviewed and determined by the Board.	All staff salaries
are determined by the President with input from staff directors	, and the VP, Finance
and Operations.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Governing documents are available upon request. Financial state	ements are available
on Guidestar and upon request.	

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
New America Foundation	52-2096845

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

2009

(F)
Direct controlling
entity Employer identification number 52-2096845 (E) End-of-year assets Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) **(D)** Total income (C)
Legal domicile (state or foreign country) (B) Primary activity (A) Name, address, and EIN of disregarded entity New America Foundation Department of the Treasury Internal Revenue Service

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ons (Complete if the org	ganization answere	d 'Yes' to Form 99(), Part IV, line 34 t	because it had
(A)	(B)	(၁)	(a)	(E)	Œ
Name, address, and ElN of related organization	Primary activity	Legal domicile (state or foreign country)	Legal domicile (state Exempt Code section Public charity status or foreign country) (if section 501(c)(3))	Public charity status (if section 501 (c)(3))	Direct controlling entity
	To educate the				
Committee for a Responsible Fed. Budget	public and				
1899 I Street, NW	congress about		•		
036	the budget				
52-1231278	process.	ാമ	501(c)(3)	170 (b) (1) (A) (N/A
BAA For Privacy Act and Paperwork Reduction Act Notice, see the I	Instructions for Form 990.	13L	TEEA5001L 02/05/10	Schedu	Schedule R (Form 990) (2009)

Schedule R (Form 990) 2009 New America Foundation

52-2096845 Form 990) 2009 New America Foundations

62-2096845 Form 990, Part IV, line 34 Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(J) General or managing partner?	Yes No			_			
GE G	۲	 		_			_
100	(Form 1065)						
H) ropor	ž	 _			-		
alloc tre	Υes						
(G) are of end-of-year assets							
F) otal income							
Share of the						 	
(A) Charles, and EIN of Primary Activity Legal organization of organization (state or foreign foreign) Charles Charle	sections 512-514)						
(C) (D) Legal Direct domicile controlling entity (state or foreign							
(C) Legal domicile (state or foreign	country)						
(B) Primary Activity							
Name, address, and EIN of Primary Activity related organization			 				

Partive Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answers) Ine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	axable as a Cored organizations	le as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, anizations treated as a corporation or trust during the tax year.)	mplete if the organi on or trust during th	zation answered 'Ye	s' to Form 990, Pa	rt <,
(A) Name, address, and ElN of related organization	(B) Primary Activity	(B) (C) (C) (D) (D) (E) Type of entity (C corp, S corp, country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	ct Type of entity (C corp, S corp or trust)	Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
BAA		TEEA5002L 02/05/10	_		Schedule R (Form 990) (2009)	990) (2009)

Schedule R (Form 990) (2009)

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

Note Complete line 1 if any entity, is listed in Darte II III or IV of this schooling		3	1	1.
Note: Complete line in any critics in any critics in, in, or you will one or more related organizations listed in Parts II-IV:	<u>L</u>			_
Ø		la	×	٦.,
b Gift, grant, or capital contribution to other organization(s)		1 9	×	١
c Gift, grant, or capital contribution from other organization(s)	ı	10	×	١
d Loans or loan guarantees to or for other organization(s)	<u> </u>	1 q	×	l
e Loans or loan guarantees by other organization(s)		1e	×	1
	<u>. </u>		-	_
f Sale of assets to other organization(s)		11	×	ìi
g Purchase of assets from other organization(s)		19	×	l
h Exchange of assets		1 h	X	l
i Lease of facilities, equipment, or other assets to other organization(s)		1:	×	ll
	1		_	-7
j Lease of facilities, equipment, or other assets from other organization(s)	1	÷	×	1
k Performance of services or membership or fundraising solicitations for other organization(s)		*	×	1
I Performance of services or membership or fundraising solicitations by other organization(s).		=	×	1
m Sharing of facilities, equipment, mailing lists, or other assets	1	E	×	1
n Sharing of paid employees	I	-	×	1.
• Baimhireamant haid to other organization for expenses		۱ ج	; >	
o itemibal sement paid to other organization for expenses	1	2 5	(>	1
p relitiousement para of onich organization to expenses		<u>-</u>	<u>{</u>	.1~
a Other transfer of cash or property to other organization(s)	-	10	×	
r Other transfer of cash or property from other organization(s)	<u>.</u>	-	×	.1
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	tion thresholds			1 1
(B) Name of other organization type (a-r)	<u> </u>	(C) Amount involved	olved	
(1)	!			1 1
(2)				
				ı
				1
(4)				- 1
(5)				1
(9)				
BAA TEEA5003L 02/05/10	Schedule R (Form 990) (2009)	Form 990	(2009	۱æ

Schedule R (Form 990) 2009 New America Foundation

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships	ding exclusion for c	ertain investment par	tnerships					
(A) Name, address, and EIN of entity	(b) Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	(E) Share of end-of-year assets	(F) Disproportionate	Code V-UBI amount in box 20 of	(H) General or managing	الم الم
			organizations?			Form (1065)		
			Yes No		Yes No		Yes	ջ
					_			
	_							
						_		
						_		
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	-							
					+			
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					_		_	
ВАА		TEEA5004L 02/05/10				Schedule R (Form 990) (2009)	n 990) (2	(600

2009	Federal Supporting Detail		Page
Client NEWAMER	New America Foundation		52-209684
9/03/10			10·10A
Balance Sheet Escrow account liability			
Tenant escrow Committee funds		\$ Total \$	15,437. 63,973. 79,410.

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Form 8868 (Rev. 4-2009)

Department of the Internal Revenue	e Treasury Service	-	► File a separ	rate application for e	each return.				
		Automatic 3-Month E	xtension, comple	ete only Part I and c	neck this box			► X	
-	-	Additional (Not Auto	-	-		ge 2 of this fori	n).		
•	-	<i>less</i> you have alread	•	•		•	•		
Part I	Automatic	3-Month Extens	ion of Time. (Only submit orig	inal (no copies	s needed).			
A corporation	required to fi	ile Form 990-T and r	equesting an auto	omatic 6-month exte	nsion — check this	s box and comp	olete Part I onl	y -	
All other corp income tax re		udıng 1120-C filers),	partnerships, RE	MICS, and trusts mi	ust use Form 7004	to request an	extension of ti	me to file	
returns noted the additional Form 990-T	below (6 moi I (not automat Instead, you r	enerally, you can ele nths for a corporation tic) 3-month extension must submit the fully v/efile and click on e	n required to file l on or (2) you file f completed and s	Form 990-T) Howey Forms 990-BL, 6069, agned page 2 (Part l	er, you cannot file or 8870, group re	Form 8868 ele	ectronically if (1) you want solidated	
Type or	Name of Exempt	Organization				E	mployer identificat	on number	
print	NEW AMER	CICA FOUNDATION	ON			5	2-2096845	<u>,</u>	
File by the due date for	Number, street,	and room or suite number	If a P O box, see inst	ructions					
filing your return See	1899 L S	TREET, NW #4	00						
instructions	City, town or pos	st office, state, and ZIP coo	le For a foreign addre	ss, see instructions					
	WASHINGT	ON, DC 20036							
Check type o	f return to be	filed (file a separate	application for e	ach return).					
X Form 990)	·	Form 990-T (co	rporation)		Form 4720			
Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227									
Form 990)-EZ			ist other than above	· · · · · ·	Form 6069			
Form 990)-PF		Form 1041-A		ĺ	Form 8870			
		are of ► <u>SIMONE</u> 2) 986-2700	FRANK	FAX No. ►					
		s not have an office	or place of busine		tos chock this ho			▶ □	
-		s not have an onice eturn, enter the orga	•				a a far tha	ماء محمده	
	`	itum, enter the orga. If it is for part of th	-	· —		. If the		•	
	J	•	ie group, check ti	iis box - 🗌 and	attach a list with t	ne names and	EINS OF AIR THE	muers	
	sion will cover	r. ic 3-month (6 month	- faula	n recovered to file For	000 T) autonous	- of b			
until _	8/15	_, 20 <u>10</u> _, to file the organization's ref	the exempt organ	•	•				
		r 20_ <u>09</u> _ or	arr ioi						
_	tax year begi		, 20,	and ending	, 20	-			
2 If this ta	ax year is for l	less than 12 months.	, check reason.	Initial return	Final return	n Cha	nge in accoun	ting period	
		or Form 990-BL, 990 s. See instructions	-PF, 990-T, 4720,	, or 6069, enter the	tentative tax, less	any	3a \$	0.	
		or Form 990-PF or 9 or year overpaymen			d estimated tax pa	ayments	3Ь\$	0.	
deposit	e Due. Subtrac with FTD cou tructions	ct line 3b from line 3 pon or, if required, t	a Include your pa by using EFTPS (ayment with this forr Electronic Federal T	n, or, if required, ax Payment Syste	em)	3c \$	0.	
Caution. If yo		o make an electronic	fund withdrawal	with this Form 8868	, see Form 8453-E	O and Form 88	379-EO for		

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.



Form 8868	(Rev 4-2009)				Page 2			
♣ If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check the	s box		► X			
Note. Only	complete Part II if you have already been granted an automatic 3-month exter	nsion on a previousl	y filed Form 8	868				
• If you a	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 origina	I (no copie	s neede	d).			
	Name of Exempt Organization	143	Employer identi	ication numb	per			
Type or print	NEW AMERICA FOUNDATION		52-20968	45				
•	Number, street, and room or suite number. If a P.O. box, see instructions	1 1	For IRS use only					
File by the extended due date for filing the	BERRY GROUP, CPA'S 3131 MOUNT VERNON AVENUE			· ·				
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions] ^			,			
	ALEXANDRIA, VA 22305		11		,			
Check type	of return to be filed (File a separate application for each return)							
X Form 9	<u> </u>	Form 1041-A		Form	6069			
Form 9		Form 4720		Form	8870			
Form 9		Form 5227			33.5			
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.								
	oks are in care of ► SIMONE FRANK							
	No. No. No. No. No. No. No. No. No. No.							
•	rganization does not have an office or place of business in the United States,		-		▶ □			
	s for a Group Return, enter the organization's four digit Group Exemption Num			If th	is is for the			
whole grou	p, check this box	and attach a list will	th the names	and EINs	of all			
members tl	ne extension is for							
4 requ	lest an additional 3-month extension of time until $11/15$, 20 1	1.0		-				
		, and ending_		, 20				
		Final return	Change ii	n accounti	ng period			
	in detail why you need the extension TAXPAYER RESPECTFULLY							
	HER INFORMATION NECESSARY TO FILE A COMPLETE AND							
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tental fundable credits. See instructions	tive tax, less any	8a \$;				
paym	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable crents made. Include any prior year overpayment allowed as a credit and any a form 8868.	edits and estimated mount paid previous	tax sly 8b\$	}				
c Balan	ice Due. Subtract line 8b from line 8a. Include your payment with this form, or TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	, if required, deposition (System). See instrs						
	Signature and Verification		······					
Under penaltie	s of periury. I declare that I have examined this form, including accompanying schedules and statemen		knowledge and b	elief, it is true),			
correct, and co	Implete, and that I am authorized to prepare this form							
Signature -	19-A. For Title + CPA		Date	<u>, ► 8</u>	- y-10			
	·							

BAA

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Form 8868 (Rev 4-2009)