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

	For t	ne 2009 calend	lar year, o	r tax year beginning		, 2009	θ , and θ	ending								
		f applicable		C Name of organization						D Employ	er Iden	tification N	umber			
	Па	ddress change	Please use IRS tabel	International Ass	ociation for Im	pact A	ssess	sment.	, Inc.	58-1	1433	3922				
	\vdash	ame change	or print or type.	Number and street (or P O				Room/suite		E Telepho		· 				
	Ħ	mal return	See specific	1330 23rd St. S			-	Suite	٠ ر	(701	11 2	297-79	112			
	-	ermination	Instruc-	City, town or country	· · · · · · · · · · · · · · · · · · ·	State				 (,,,,						
	H		tions.	1		ND	581					. 1 22	0 007			
	=	mended return	F N	Fargo		ND	201		(a) is thre	G Gross receipts \$ 1,239,807. this a group return for affiliates?						
	∐ ^	oplication pending	l	and address of principal officer	=		- F00	l.,								
				istritz 138 49th Av			D 580	770		attach a list (structions)	Yes	∐ мо		
<u> </u>		-exempt status		(c) (3) ((insert i	10.) 4947(a)	(1) or	527	7								
<u>1</u>			w.iaia					<u> </u> H		exemption nur						
K_		of organization	X Corpora	ation Trust Associat	on Other►	<u> L</u>	Year of F	Formation	198	1 M s	tate of	legal domic	ile ND			
Pa	rt I	Summa														
i	1	-	_	anization's mission or mos	_	: <u>T</u>	o_di	ssemi	inate	_infor	n <u>at</u> :	ion_or	<u>-</u>			
ا و		envirome	<u>ntal i</u>	mpact assessmen	t.			~		- .		- -		- -		
Activitles & Governance																
Ę			·													
٥	2			if the organization discont	•	or dispos	ed of n	nore tha	an 25%	of its asse		1				
æ	3		~	pers of the governing body	•							10				
89	4		•	voting members of the go	verning body (Part V	i, line it	9)				4	10				
*	5			rees (Part V, line 2a)							<u>5</u>	30				
₹	6			ers (estimate if necessary		10		•			- о 7а					
~		-		usiness revenue from Part		12		•		1	7a 7b	+		$\frac{0.0}{0.0}$		
	D	ivet unrelated	business	taxable income from Form	1 990-1, line 34			· - 1				 				
									-	Prior Year		Cı	rrent Ye			
9	8		_	s (Part VIII, line 1h)		•				738,1				077.		
Revenue	9	•		ie (Part VIII, line 2g)						857,4		<u> </u>		564.		
š	10		•	rt VIII, column (A), lines 3	•					14,2		 		<u>336.</u>		
~	11			l, column (A), lines 5, 6d,				ļ		8,6				<u>830.</u>		
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1, 61										77.		L <u>,239,</u>	<u>807.</u>		
1	13	Grants and si	mılar amo	unts paid (Part IX, column	(A), lines 1-3)							1				
	14	Benefits paid	to or for n	nembers (Part IX, column	(A), line 4)							<u></u>				
_	15	Salaries, othe	r compens	sation, employee benefits	(Part IX, column (A),	lines 5-	10)			331,7	14.	1	335,	616.		
96	16a	Professional f	undraising	g fees (Part IX, column (A)	. line 11e)						_	Ī				
Ехрепэөэ				ses (Part IX, column (D),			76,8	93				1				
ă					· · · · · · · · · · · · · · · · · · ·		70,0	55.		1 150 5	7.4	 	0.52	067		
	17	Other expens	es (Part 1)	K, column (A), lines 11a-1	1a, 111-241)			7	\vdash	1,158,5				<u>967.</u>		
	18			es 13-17 (must equal Par		30 E	AEF	ا پیر	H	1,490,2			L,288,			
	19	Revenue less	expenses	. Subtract line 18 from line	- 1 21			일	H	128,2	89.	ļ.	<u>-48,</u>	<u>776.</u>		
900					S NC)V] 6	2010	SO	Begi	nning of Y	ear		nd of Yea			
10	20	Total assets (Part X, lın	e 16)	"" <u>[</u> إينا	, , ₍ , -	7.919	' S	1	1,203,6		1 1	L,205,	790.		
Net Asset	21	Total liabilities	s (Part X,	line 26)	25.77	7-51-76		الحالية يتم		8,5	51.		<u>1</u> ,	<u>747.</u>		
	22	Net assets or	fund balar	nces. Subtract line 21 from	n line 20 1	油具机	4. []	1 [[, :	1,195,0	63.		L,204,	043.		
Pa	rt II	Signatu	ıre Bloc	k												
		Under penalties	s of perjury, I	declare that I have examined this r Declaration of preparer (other than	eturn, including accompanyi	ng schedule	es and sta	atements,	and to the	best of my kn	owledg	e and belief	, it is			
		true, correct) a	nd complete	Declaration of preparer (other than	officer) is based on all infor	mation of w	rhich prep	parer has	any knowl	edge	_					
Sig	n	$ \triangleright P_i \rangle$	$+ \sim \nu$	& Wistrik						8 n	ov	1//				
He		Signature	of officer	- Williams					Di	ate						
		▶ Bita	Leist	rita												
		<u> </u>	int name and													
					1	1	Date		T.	heck if	I F	Preparer's in	jentifyina nu	ımber		
Dai	4	() ()4///										Preparer's identifying number (see instructions)				
Pai Pre		Preparer's								mployed >		DN1	2 / / / //	12		
	- er's	signature	- XII	MU NYU	<i></i>		11/0	6/10				" W	36449	_		
Us	5 2 5 2	Firm's name (a	Jam	es Clifton PPA,	Ltd.					,,	_					
On		yours if self- employed),	► PO	BOX 2425					E	IN + 43	5-C	145/	137			
4 11	٠,	address, and ZIP + 4	Far	qo op	ND	5810	08-24	425	Р	Phone no	(70	1) 72	9-485	8		
Mav	the l			th the preparer shown abo									es	No		
		*		work Reduction Act Notic			ons.			TEEA0101	07/20		Form 990			

Form		143392	2		Page 2
Par	t III Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission:				
	To disseminate information on environmental impact assessment				
	enviromental impact assessment.				
2	Did the organization undertake any significant program services during the year which were not listed on the prior				
	Form 990 or 990-EZ?		Yes	X	No
	If 'Yes,' describe these new services on Schedule O.				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O.				
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	. Section	501((3)	
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations expenses, and revenue, if any, for each program service reported.	to others	, the t	otai	
	onponents, and retended, it diffy for each program service reported.				
48	a (Code:) (Expenses \$ 53,288. including grants of \$ 0.) (Revenue	\$			0.)
	Paid publications/subscriptions and journals	- -			
	resold to members at a reduced rate.	- -		<u>-</u> .	
					- -
4 t	(Code) (Expenses \$ 106,576. including grants of \$ 0.) (Revenue	\$			0.)
	Impact assessment bulletin - 4 issues of a referred				
	journal distributed to all members.				
			-		
			- - -		
40	: (Code:) (Expenses \$ 905,900. including grants of \$ 0.) (Revenue	\$	62	2,0	41.)
	Issued conference announcements, brochures, collected dues,				
	arranged conferences, performed other membership				
	and educational services.				
			-		
		-			
				- - -	
			-		
		-			
40	d Other program services. (Describe in Schedule O.)				
	(Expenses \$ including grants of \$) (Revenue \$			<u>) </u>	
46	e Total program service expenses ► 1,065,764.				

Form **990** (2009) 58-1433922 International Association for Impact Assessment, Part IV Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Х Schedule A . . . 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete 4 X Schedule C, Part II 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 provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to 6 Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х 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 9 Schedule D, Part IV X Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or 11 Х 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 167 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 12A Was the organization included in consolidated, independent audited financial statement for the tax Yes Nο 12 A year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? Х **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If 'Yes,' complete Schedule F, Part I* 14b Х 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 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 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

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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

lines 1c and 8a? If 'Yes,' complete Schedule G, Part II

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

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Form 990 (2009) International Association for Impact Assessment, Inc.

Part IV | Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		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		Х
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</i> 'Yes,' <i>complete Schedule J</i>	23		х
24 a	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		X _
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	1	
C	I 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	25 a		<u> </u>
Ł	o 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		X_
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 current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		x
		20a		
	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		X
•	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
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	!	_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		_x_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u> </u>
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	
		C	000	0000

Form 990 (2009)

41	TV Statements Regarding Other INST linings and Tax Compilation			
	•		Yes	No
18	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 1a 0			
t	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	- (
•	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
28	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			
2ŧ	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	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)			
38	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
ŧ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		_
42	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)?	4 <u>a</u>	х	
t	olf 'Yes,' enter the name of the foreign country: See Foreign Countries			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5Ь		Х
ď	: 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 <i>a</i>	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		x
ŧ	of Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6Ь	•	-
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
H	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			
Ì	Form 8282?	7с		X
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X_
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u>X</u>	
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Х	
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		х
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		х
t	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on Part VIII, line 12		1	
Ł	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	}	}	
11	Section 501(c)(12) organizations. Enter.	l	Į	
a	Gross income from other members or shareholders	ĺ		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
E	of 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			

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Form 990 (2009)

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

Sec	tion A.	Governing E	Body and	d Man	ageme	ent														
								-										Ti	'es	No
1 a	Enter the	number of votin	g member	rs of th	e goverr	nna bo	ody					1 a	a 1	0				7		
		number of votin	-		•	-	•				1.		6 1			-	_{	1	- {	
		ifficer, director, t	-					relatio	nshin or	a husine	ec rel:		•		h anv	other	_]	
	officer, d	rector, trustee or	r key emp	loyee?			-		-				Ī		•		2	\downarrow		Х
3	Did the o	rganization deleg s, directors or tru	gate contro ustees, or	ol over key en	manage iployees	ment on the state of the state	duties cu nanagen	ustom nent c	arily peri company	formed b or other	y or ur persoi	nder n?	the	dire	ct sup	ervisio	n <u>3</u>	\perp		x
4	Did the o	rganization make	e any signi	ificant o	changes	to its i	organiza	ational	docume	ents							4	$oldsymbol{\perp}$		Х
	since the	prior Form 990 v	was filed?																- 1	
5	Did the o	rganization becom	me aware	during	the yea	rofaı	material	diven	sion of th	ne organi	zation'	's as	sets	s?			5			X
		organization hav															6	T	x	
7 <i>a</i>	Does the	organization hav	ve membe	rs, stoo	ckholder	s, or o	ther per	sons	who may	elect on	e or m	ore	mer	mber	s of t	he	7	1	x	
t	•	lecisions of the g	governing	body s	ubject to	appro	oval by n	nemb	ers, stoc	kholders	or oth	ner p	ers	ons?			7			х
8	Did the o	rganization conte	emporaneo	ously d	ocument	the m	ieetings	held (or writter	actions	underl	taker	n du	ırıng	the y	ear by				
a		ming body?															8	a	x	
	•	nmittee with auth	ority to ac	et on he	half of t	he anv	vernina t	hody?							•		8		x	
	Is there a	iny officer, direct	or or trust	tee, or l	key emp	olovee I	listed in	Part '	VII, Sect	ion A, wl	no cani	not b	oe ro	each	ed at	the		1	`	
		ion's mailing add											·		11.		9	丄		<u> </u>
	tion B. enue Code	•	This Sec	tion B	reque	sts in	ntorma	tion i	about p	oolicies	not r	equ	ure	a by	tne t	Interi	nai			
•																-		TY	'es	No
10a	Does the	organization hav	ve local ch	apters,	, branch	es, or a	affiliates	s?									10	a		X
b	If 'Yes,' o	oes the organiza	ation have	written	policies	s and p	orocedur	res go	verning (the activi	ties of	such	h ch	apte	rs, af	filiates,	10	T		
11		organization prov	•						•		ody he	efore	a filo	nn th	e for	m?	11	+	\dashv	x
		in Schedule O th		-					_	_	-	0.0.0	, ,,,,,,	g		•••	<u> </u>			
		organization hav	•			•	•				11 330.						12	\top	x	
		ers, directors or t				•	•		-		racte H	hat c	- Aud	d and	0 516.0		, <u>,,,</u>	~	^	
	to conflic	is?		•						-				-			12	ь	\dashv	Х
C	Does the Schedule	organization reg O how this is do	jularly and one .	consis	tently m	onitor	and enfo	orce o	complian	ce with t	ne poli	cy? I	If 'Y	'es,'	descr	ibe in	12	c	\perp	х
13	Does the	organization hav	ve a writtei	n whist	leblower	policy	/?										13	\perp		Х
14	Does the	organization hav	ve a writte	n docu	ment ret	ention	and des	structi	on policy	/?							14	\perp		X
15	Did the p	rocess for detern comparability da	nining con	npensa	tion of th	ne follo s subs	wing pe	ersons	include ne delibe	a review	and ap	pproj	val ?	by in	depe	ndent				
	·=	nization's CEO, E		-													15	a	x	
		cers of key empl			-		3 • · · · · · · ·										15	1	-	Х
		line 15a or 15b,	•	•			ule O. C	See in	struction	ns)								1		
16a	Did the o	rganization inves		•			•			•	nılar a	ırranı	gen	ent	with a	a taxabi				
h	-	ing the year?	on adonte	ad a wr	itten nol		nrocedu	re ren	uurina thi	e organis	ration t	ło ev	alu:	ate it	s nar	ticinatio	16	<u>a</u>	\dashv	<u>X</u>
	in joint ve status wil	as the organizatenture arrangement of respect to such	ents under h arranger	application ments?	able fed	eral ta	x law, a	nd tak	en steps	to safe	uard t	he o	rgai	nizat	ion's	exempt	16	Ь		
Sec	tion C.	Disclosures																		
17	List the s	tates with which	a copy of	this Fo	rm 990 ı	s requ	red to b	e file	d ►											
18	Section 6	104 requires an i	organizatio	on to m these a	iake its l ivailable	Forms . Checl	1023 (or k all tha	r 1024 t appl	I if applic	able), 99	0, and	990)-T ((501(c)(3)s	only)	avaılable	for	pub	lic
	E	website	X Anot				_		request											
19	Describe statemen	in Schedule O w ts available to th	hether (an e public.	nd if so	, how) th	ne orga	anızatıon	n mak	es its go	verning o	locume	ents,	. cor	nflict	of int	erest p	olicy, ar	d fır	nanc	ıal
20	State the	name, physical	address, a	and tele	phone r	number	r of the p	perso	n who po	ssesses	the bo	ooks	and	i rec	ords o	of the o	rganızat	on.		
٠	Bridge	et_John	~	_1330	<u>23rd S</u>	<u>t. , S</u> ı	uite C,	<u>F</u>	argo		<u>N</u>	D	_58	<u> 310</u>	<u>3</u>		<u>(701)</u>	29	7-7	<u>912</u>

Form 990 (2009)

BAA

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

Employees, and Independent Contractors

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

- 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.

Column C	tion e on ed
Rita Hamm CEO 50.00 X 83,884 0.	O.
Rita Hamm CEO 50.00 X 83,884 0. Sachihiko Harashina Past President 2.00 X 0. President 2.00 X 0. Jonathan Allotey President Elect 2.00 X 0. Jonathan Allotey President 2.00 X 0. Jonathan Allotey President 2.00 X 0. Jonathan Allotey President 2.00 X 0. Luis Montañez - Cartaxo Director Secretary 2.00 X X 0. Julio je Jesus	O.
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Director, Secretary 2.00 X X 0. 0. Julio je Jesus	0.
Julio je Jesus	0.
Director 2.00 X 0. 0.	0.
Maya Gabriela Villaluz	
Director 2.00 X 0.	0.
Lea den Broeder	
Director 2.00 x 0.	0.
Weston Fischer	
Director 2.00 X 0.	0.
	

TEEA0107

11/10/09

from the organization Yes No 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual 3 X 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 ındıvıdual X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person X **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) Name and business address Description of Services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization BAA TEEA0108 01/30/10 Form 990 (2009)

<u>I Cai</u>	. Statement of Nevenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
v	1a Federated campaigns 1a					0.0, 0.0, 0.
AN	b Membership dues 1b 130	5,767.				
85	c Fundraising events 1c					H.
E &	d Related organizations 1 d					
S,S	e Government grants (contributions)					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 39:	1,310.				
E S	g Noncash contribns included in lns 1a-1f: \$					
8₹	h Total. Add lines 1a-1f	▶	528,077.			
¥	Busine	ss Code			_	
2	2a Administration Fees 900099		77,393.	77,393.	0.	0.
將	b Conference Income 900099		617,670.	617,670.	0.	0.
ž	c Miscellaneous 900099		4,678.	4,678.	0.	0.
A SE	d Book Sales 900099	' ——	823.	823.	0.	0.
¥	f All other program service revenue					
စ္အ	q Total. Add lines 2a-2f	▶	700,564.			
_	3 Investment income (including dividends, interest	and	700,301.			
1	other similar amounts)	ariu -	4,336.	0.	0.	4,336.
- [4 Income from investment of tax-exempt bond pro-	ceeds ►				
- 1	5 Royalties	•				L
l	(i) Real (ii) F	ersonal				
	6a Gross Rents					
	b Less. rental expenses		1			
	c Rental income or (loss)					
	d Net rental income or (loss)	-				·····
	7a Gross amount from sales of assets other than inventory (i) Securities (ii)	Other				
	b Less. cost or other basis and sales expenses					
Ì	c Gain or (loss)					
	d Net gain or (loss)	•				
NOE	8a Gross income from fundraising events (not including \$;	
Ę.	of contributions reported on line 1c)					
OTHER REVEN	See Part IV, line 18					
	b Less: direct expenses b			1		
_ [c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19					
	b Less: direct expenses . b					
- 1	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances					
(b Less. cost of goods sold b				į	
	c Net income or (loss) from sales of inventory	▶				
		ss Code	6 000	C 020	_	^
Ì	11a Foreign Currency Translation 900099		6,830.	6,830.	0.	0.
	b					
	d All other revenue					
	e Total. Add lines 11a-11d		6,830.			
}	12 Total revenue. See instructions	. ►	1,239,807.	707,394.	0.	4,336.

Form 990 (2009)

Statement of Functional Expenses Part IX

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

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

Do l	not include amounts reported on lines 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	83,884.	41,942.	25,165.	16,777.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	221,761.	110,881.	66,528.	44,352.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	7,138.	3,569.	2,141.	1,428.
10	Payroll taxes	22,833.	11,417.	6,850.	4,566.
11	Fees for services (non-employees)				
ā	Management	7,734.	7,734.	0.	0.
ŧ	Legal				
•	: Accounting .	14,520.	0.	14,520.	0.
(l Lobbying				
•	Prof fundraising svcs. See Part IV, In 17				-
f	Investment management fees .				
Ç	Other				
12	Advertising and promotion				
13	Office expenses	66,394.	59,444.	4,170.	2,780.
14	Information technology	14,349.	7,174.	4,305.	2,870.
15	Royalties				
16	Occupancy .	13,200.	6,600.	3,960.	2,640.
17	Travel	13,473.	1,040.	12,017.	416.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	812,806.	812,806.	0.	0.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,320.	2,660.	1,596.	1,064.
23 24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	2,898.	0.	2,898.	0.
a	Miscellaneous	2,273.	500.	1,773.	0.
t					·····
c					
c					
•					
f	All other expenses				
_25	Total functional expenses. Add lines 1 through 24f	1,288,583.	1,065,767.	145,923.	76,893.
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA		· · · · · · · · · · · · · · · · · · ·	·		Form 990 (2009)

725,484.

10,247. 468,063.

1,996.

1,747.

1,747.

1,096,091.

1,204,043.

30

31

32

33

34

1,195,063.

1,203,614

107,952.

1,205,790.

End of year

Form 990 (2009) 58-1433922 International Association for Impact Assessment, Inc. Part X Balance Sheet (A) Beginning of year 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 978,941 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a 43,508. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b b Less: accumulated depreciation. 33,261 12,302. 10c 209,333. 11 11 Investments - publicly-traded securities 12 investments - other securities. See Part iV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 3,038 15 1,203,614 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 8,551 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities, Complete Part X of Schedule D 8,551 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 1,106,961. 27 28 Temporarily restricted net assets . 88,102. 28 29 Permanently restricted net assets R

Organizations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, building, and equipment fund

32 Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances.

Total net assets or fund balances.

lines 30 through 34.

30

31

33

1,205,790. BAA Form 990 (2009)

and complete

	Page	12
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58-1433922

Parl	XI	Financial Statements and Reporting			
				Yes	No
1	Acco	unting method used to prepare the Form 990: X Cash Accrual Other			
		organization changed its method of accounting from a prior year or checked 'Other,' explain hedule O.	ļ		
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
b	Were	the organization's financial statements audited by an independent accountant?	2b		X
С	If 'Ye	s' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, w, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
		organization changed either its oversight process or selection process during the tax year, explain hedule O.			
d		s' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a blidated basis, separate basis, or both:			
	\mathbf{x}	Separate basis Consolidated basis Both consolidated and separate basis			
3a		result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Act and OMB Circular A-133?	3a		х
		s,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit dits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

BAA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

0MB No 1545-0047 **2009**

Open to Public Inspection

Employer identification number

International Association for Impact Assessment, Inc. Part Reason for Public Charity Status (All organizations must complete the												58-1	433922	2						
Par	<u>l</u> [Rea	son f	or Pu	ıblic	Charit	y Statu	s (Al	l orga	anizatior	ns m	ust cor	nplete	this pa	rt.) Se	e instr	uctions			
The c	rgar	ızatıor	is no	t a pri	vate f	oundatio	on becaus	se it is	: (For	lines 1 thi	rough	11, che	k only o	ne box)					
1		A chu	rch, c	onventi	ion of	churche	es or asso	ociatio	n of ch	nurches de	escrib	ed in se	ction 17	0(b)(1)(A	A)(i).					
2	\Box	A sch	ool de	scribed	d in se	ection 1	70(b)(1)(A)(ii).	(Attac	h Schedu	le E.)									
3	П	A hos	pital c	r coop	erativ	e hospit	al service	orga	nizatio	n describe	ed in s	section '	70(b)(1)	(A)(iii).						
4	П	A med	lical r	esearcl	h orga	nization	operate	d in co	onjunci	tion with a	a hosp	oital desc	ribed in	section	170(b)(1)(A)(iii)	. Enter th	he hospital's	ŝ	
	_	name,	city,	and sta	ate:															
5		An ord 1 70(b)	janiza K1)(A	tion op (iv). (perate (Comp	d for the lete Pai	e benefit rt II.)	of a c	ollege	or univers	sity ov	vned or o	perated	by a go	vernmei	ntal unit	describe	d in section	ī	
6 7	\mathbb{H}	An org	janiza	tion th	at nor	mally re	eceives a	subst	antial į	I unit desi part of its			-			rom the	general p	oublic descr	ıbed	
8	\Box					-	mplete P			vi). (Com	nioto	Doet II V								
9	$\overline{\mathbf{x}}$			-							-	•	t from o	ontributu	one mo	mhorchu	a foot o	nd gross red	nounte	
3	_	from a	ictiviti ment	es rela Income	ited to e and	its exei unrelate	mpt funct	tions - ss tax	– subje able in	ect to certa come (les	aın ex	ceptions	s, and (2	?) no mo	re than .	33-1/3 %	of its su	upport from janization a	gross	
10	Ц	An org	ganıza	tion or	ganız	ed and o	operated	exclus	sively t	to test for	public	c safety.	See se c	tion 509	(a)(4).					
11	Ц	more i	public bes th	ly supp e type	oorted	organi	zations d g organiz	escrib ation	ed iń s	section 50 implete lin	9(a)(1 nes 11	l) or sec le throug	tion 509: jh 11h.	(a)(2). S	ee secti			poses of or neck the bo		
			Туре			b	Type II					Func	-	_			d 📙	Type III-		
е	Ш	By che than for 509(a)	ounda	this b	ox, I d anage	ertify thers and o	nat the orgother than	ganıza n one	or moi	not contr re publicly	oiled supp	directly of orted or	or indirei ganizatio	ctly by o	ne or me ribed in	ore disqu section :	ualified p 509(a)(1)	ersons other or section	er	
f	If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box																			
g	g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?																			
																			Yes	No
		(i)	a pers below	on who , the go	o dire overni	ctly or ir ng body	ndirectly of the si	contro upport	ls, eith ed org	er alone o anization?	or toge ?	ether wit	h persor	ns descri	bed in (ıı) and (ı	н)	11g (i)	 	
		(ii)	a fam	ily men	nber	of a per	rson desc	ribed	ın (i) a	bove?						•		11g (ii)		ļ
		(iii)	a 35%	contro	olled e	entity of	a person	ı desc	ribed ii	n (i) or (ii)	abov	re?						11g (iii)	L	
<u>h</u>		Provid	e the	follow	ng inf	ormatio	n about t	he sur	portec	d organiza	tions.	<u></u>		,						
	(1) Name o Orga	of Suppo nization			(ii) E	ĖIN		(describ above	of organizati led on lines 1 or IRC sections))	-9 m	organizat (i) lister	s the ion in col i in your rning ment?	the organ	rou notify nization in (i) of upport?			(vii) Amour	t of Sup	port
												Yes	No	Yes	No	Yes	No			
					 			\dagger												
					+-			+-				 -	-					··		
					 			-												
Total																				

	edule A (Form 990 or 990-EZ) 2009		onal Associatio						Page 2		
Pai	rt II Support Schedule for C	Organizations	Described in	Sections 170(b)(1)(A)(iv) an	d 170(b)(1)	(A)(vi)				
	(Complete only if you checke	ed the box on line	5, 7, or 8 of Part	1.)							
Sec	ction A. Public Support		T								
Cale begi	ndar year (or fiscal year inning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009)	(f) Tota	al 		
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')										
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf										
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										
4	Total. Add lines 1-through 3										
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)										
	Public support. Subtract line 5 from line 4										
Sec	tion B. Total Support		r								
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	,	al 			
7	Amounts from line 4										
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources										
9	Net income from unrelated business activities, whether or not the business is regularly carried on										
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)										
11	Total support. Add lines 7 through 10			j							
12	Gross receipts from related activi	ities, etc. (see in:	structions)				12				
13	First five years. If the Form 990 is organization, check this box and		ation's first, secon	d, third, fourth, o	or fifth tax year as	a section 501	(c)(3)		►		
Sec	tion C. Computation of Pub	lic Support P	ercentage								
14 15	Public support percentage for 20 Public support percentage from 2	• •	• • • • • • • • • • • • • • • • • • • •	e 11, column (f)		}	14		% %		
	a 33-1/3 support test - 2009. If the	organization did	not check the box		the line 14 is 33-1	∟ 3 % or more/		his box			
,	16a 33-1/3 support test − 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test − 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box										
	and stop here. The organization qualifies as a publicly supported organization.										
17	7a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.										
I	o 10%-facts-and-circumstances tes or more, and if the organization r organization meets the 'facts-and	meets the 'facts-a	and-circumstances	test, check this	box and stop her	e. Explain in F	Part IV ho		▶		
18 BAA	Private foundation. If the organiz		-		or 17b, check th		e instruct		<u>►</u>		

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.)

_							
Sec	tion A. Public Support					,	
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007_	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	748,111.	1,256,345.	306,337.	738,193.	528,077.	3,577,063.
-	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	526,349.	1,048,664.	1,071,661.	861,737.	711,766.	4,220,177.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons Amounts included on lines 2	1,274,460.	2,305,009.	1,377,998.	1,599,930.	1,239,843.	7,797,240.
	and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6)						7,797,240.
Sec	tion B. Total Support		***				· • · _ · _ · _ · _ · _ · · · ·
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
					\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	-		2 305 009	1 377 998	1.599.930	1 239 843	7 797 240
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,274,460.		32 959			7,797,240.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	20,331.	34,070.	32,959.	14,279.	4,336.	105,975.
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses	1,274,460.					
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	20,331.	34,070.	32,959.	14,279.	4,336.	105,975.
9 10 a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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	20,331.	34,070.	32,959.	14,279.	4,336.	105,975.
9 10 a b 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add fire 9, 10c, 11, and 12.) First five years. If the Form 990 in organization, check this box and	20, 331. 20, 331.	34,070.	32,959. 32,959.	14,279. 14,279.	4,336. 4,336.	105,975. 105,975. 7,903,215.
9 10 a b 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add lins 9, 10c, 11, and 12.) First five years. If the Form 990 in organization, check this box and tion C. Computation of Put	20, 331. 20, 331. 20, 331.	34,070. 34,070. tion's first, second	32,959. 32,959.	14,279. 14,279.	4,336. 4,336.	105,975. 105,975. 7,903,215.
9 10 a b 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Put	20, 331. 20, 331. 20, 331.	34,070. 34,070. tion's first, secondercentage (f) divided by line	32,959. 32,959.	14,279. 14,279.	4,336. 4,336.	105,975. 105,975. 7,903,215. 98.66%
9 10a b 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add lins 9, 10c, 11, and 12.) First five years. If the Form 990 in organization, check this box and tion C. Computation of Put Public support percentage from 20.	20, 331. 20, 331. 20, 331. s for the organiza stop here plic Support Po 09 (line 8, column 2008 Schedule A,	34,070. 34,070. 34,070. tion's first, secondercentage (f) divided by line Part III, line 15	32, 959. 32, 959. 31, 959. 32, 959.	14,279. 14,279.	4,336. 4,336.	105,975. 105,975. 7,903,215.
9 10a b 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add firs 9, 10c, 11, and 12.) First five years. If the Form 990 in organization, check this box and tion C. Computation of Put Public support percentage from 2 tion D. Computation of Invettion D. Computation of Invettion 1.	20, 331. 20, 331. 20, 331. s for the organiza stop here ofic Support Po 09 (line 8, column 2008 Schedule A, estment Incon	34,070. 34,070. 34,070. tion's first, secondercentage (f) divided by line Part III, line 15 ne Percentage	32, 959. 32, 959. d, third, fourth, or	14,279. 14,279.	4, 336. 4, 336. a section 501(c)(3	105,975. 105,975. 7,903,215. 98.66% 98.55%
9 10a b 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities foans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add lins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Put Public support percentage from 2 tion D. Computation of Investment income percentage for	20, 331. 20, 331. 20, 331. 20, 331. s for the organization here lic Support Po 99 (line 8, column 2008 Schedule A, estment Incon or 2009 (line 10c,	34,070. 34,070. 34,070. tion's first, secondercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided	32, 959. 32, 959. 32, 959. d, third, fourth, or e 13, column (f))	14,279. 14,279.	4,336. 4,336. a section 501(c)(3	105,975. 105,975. 7,903,215. 98.66% 98.55%
9 10 a b 11 12 13 14 Sec: 15 16 Sec: 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities foans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add lins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Put Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2009. If the	20, 331. 20, 331. 20, 331. 20, 331. 20, 331. 20, 331. 20, 331.	34,070. 34,070. 34,070. 34,070. tion's first, secondercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line I not check the bo	32, 959. 32, 959. 32, 959. d, third, fourth, or 13, column (f)) by line 13, column 17 ex on line 14, and	14,279. 14,279. 14,279. In (f)) line 15 is more th	4, 336. 4, 336. 4, 336. 15 16 17 18 an 33-1/3%, and	105,975. 105,975. 105,975. 7,903,215. 98.66% 98.55% 1.34% 1.45%
9 10a b 11 12 13 14 Sec 15 16 Sec 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 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.) Total support. (add firs 9, 10c, 11, and 12.) First five years. If the Form 990 in organization, check this box and tion C. Computation of Put Public support percentage from 2 tion D. Computation of Investment income percentage for livestment lives live	20, 331. 20, 331. 20, 331. 20, 331. 20, 331. 20, 331. 20, 331.	34,070. 34,070. 34,070. 34,070. tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line in to check the both organization in the check a box	32, 959. 32, 959. 32, 959. d, third, fourth, or 13, column (f)) by line 13, column 17 ox on line 14, and qualifies as a pub on line 14 or 19a,	14,279. 14,279. 14,279. In (f)) line 15 is more the solicly supported or and line 16 is more and line 16 is more than 16 i	4, 336. 4, 336. 4, 336. 4, 336. 15 16 17 18 18 19 19 19 19 19 19 19 19	105,975. 105,975. 7,903,215. 98.66% 98.55% 1.34% 1.45% Inne 17 is not

Schedule a	A (Form 990 or	990-EZ) 2009	Internation	al Associatio	n for Impact	Assessment, Inc	c. 58-1433922 equired by Part II, lin- formation. See instru	Page 4
Part IV	Supplemen	ntal Informat	tion. Complete	this part to	provide the	explanations re	equired by Part II, lin	e 10;
•	Part II, line	17a or 17b	; and Part III, I	ine 12. Prov	ide any oth	er additional inf	ormation. See instru	ctions.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545 0047

Open to Public Inspection Employer Identification number

In	ternational Association for 1	Impact Assessment, Inc.		58-1433922_
Pa	t Organizations Maintaining Donor	Advised Funds or Other Similar Fu	unds or Acco	unts Complete If
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.		•
		(a) Donor advised funds	(b) F	unds 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 don funds are the organization's property, subject to			Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	he benefit of the donor or donor advisor or f	unds may be for any other	Yes No
Pai	t II Conservation Easements Comple	ete if the organization answered 'Ye	s' to Form 99	0, Part IV, line 7.
	Purpose(s) of conservation easements held by			
	Preservation of land for public use (e.g., re	ecreation or pleasure) Preservation	on of an historica	ally important land area
	Protection of natural habitat	Preservati	on of certified his	storic structure
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservation contribution	in the form of a	conservation easement on the
				Held at the End of the Year
á	a Total number of conservation easements		2a	
ł	Total acreage restricted by conservation easer	nents	2b	
•	Number of conservation easements on a certif	ied historic structure included in (a)	2c	
•	Number of conservation easements included in	(c) acquired after 8/17/06	2d	
3	Number of conservation easements modified,	transferred, released, extinguished, or termi	nated by the org	anization during the tax
	year ►			
4	Number of states where property subject to co	nservation easement is located >		
5	Does the organization have a written policy regard enforcement of the conservation easement	garding the periodic monitoring, inspection, I it it holds?	handling of violat	ions, Yes No
6	Staff and volunteer hours devoted to monitorin during the year >	g, inspecting, and enforcing conservation ea	asements	
7	Amount of expenses incurred in monitoring, in during the year ▶	specting, and enforcing conservation easem	ents =	
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of	section	Yes No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements.	orts conservation easements in its revenue of the organization's financial statements that	and expense stated the o	tement, and balance sheet, and rganization's accounting for
Pai	t III Organizations Maintaining Collec	ctions of Art, Historical Treasures.	or Other Simi	lar Assets
-	Complete if the organization and	wered 'Yes' to Form 990, Part IV, lir	ne 8.	
	Complete if the organization ansi	wered rea to ronn 550, rait rv, in		
18	a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statemen	SFAS 116, not to report in its revenue state ic exhibition, education, or research in further	ement and balance	te sheet works of art, historical service, provide, in Part XIV,
	a If the organization elected, as permitted under treasures, or other similar assets held for publ	SFAS 116, not to report in its revenue state ic exhibition, education, or research in further that describes these items. SFAS 116, to report in its revenue statement.	ement and balance erance of public s	service, provide, in Part XIV,
	a if the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statemen of the organization elected, as permitted under treasures, or other similar assets held for publ	SFAS 116, not to report in its revenue state ic exhibition, education, or research in further its that describes these items. SFAS 116, to report in its revenue statement exhibition, education, or research in further	ement and balance erance of public s	service, provide, in Part XIV, heet works of art, historical service, provide the following \$\Bigsir \\$
	a if the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statemen of the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items.	SFAS 116, not to report in its revenue state ic exhibition, education, or research in further its that describes these items. SFAS 116, to report in its revenue statement exhibition, education, or research in further	ement and balance erance of public s	service, provide, in Part XIV,
l	a if the organization elected, as permitted under treasures, or other similar assets held for public the text of the footnote to its financial statement of the organization elected, as permitted under treasures, or other similar assets held for publiamounts relating to these items. (i) Revenues included in Form 990, Part VIII,	SFAS 116, not to report in its revenue state ic exhibition, education, or research in further its that describes these items. SFAS 116, to report in its revenue statemer ic exhibition, education, or research in further line 1 t, historical treasures, or other similar asset	ement and balance erance of public s int and balance st erance of public s	heet works of art, historical service, provide the following
2	a if the organization elected, as permitted under treasures, or other similar assets held for public the text of the footnote to its financial statement of the organization elected, as permitted under treasures, or other similar assets held for publicamounts relating to these items. (i) Revenues included in Form 990, Part VIII, (ii) Assets included in Form 990, Part X If the organization received or held works of an	SFAS 116, not to report in its revenue state ic exhibition, education, or research in further its that describes these items. SFAS 116, to report in its revenue statement exhibition, education, or research in further line 1 t, historical treasures, or other similar asset 116 relating to these items.	ement and balance erance of public s int and balance st erance of public s	heet works of art, historical service, provide the following

			ion for Impac				58-143			Page 2
Part III Organizations Maintai	ining Colle	ctions	of Art, Histo	orical T	reasures, c	or Oth	er Similar Asse	ts (co	ntinue	ed)
3 'Using the organization's acquisiting items (check all that apply):	on accession	and oth	er records, che	ck any c	of the following	g that ar	e a significant use	of its co	ollection	1
a Public exhibition			d 🗌 Loan	or exch	ange program	ns				
b Scholarly research			e Other	r						
c Preservation for future gener	ations									
4 Provide a description of the organ Part XIV.	nization's coll	ections	and explain how	v they fu	ırther the orga	anization	's exempt purpose) IN		
5 During the year, did the organizar assets to be sold to raise funds r								Yes		No
Part IV Escrow and Custodia 9, or reported an amo	Arrangen unt on Fori	nents (m 990,	Complete if on Part X, line	organiz 21.	ation answ	ered '\	es' to Form 99	}0, Par ———	t IV, I	ine
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodia	n, or oth	er intermediary	for con	tributions or o	ther ass	ets not	Yes	[No
b If 'Yes,' explain the arrangement	ın Part XIV a	nd comp	plete the following	ng table	:					
								Amoun	t	
c Beginning balance						L	1c			
d Additions during the year						L	1 d			
e Distributions during the year							1e			
f Ending balance							11			
2a Did the organization include an air	mount on For	m 990, I	Part X, line 21?					Yes		No
b If 'Yes,' explain the arrangement	in Part XIV.						_			
Part V Endowment Funds Cor	nplete if o	rganiza	ation answere	ed 'Ye	s' to Form 9	990, Pa	art IV, line 10.			
	(a) Current	t year	(b) Prior yea	ar	(c) Two years b	oack_	(d) Three years back	(e)	Four year:	s back
1a Beginning of year balance										
b Contributions										_
c Net Investment earnings, gains, and losses										
d Grants or scholarships								1		
e Other expenditures for facilities and programs	_									
f Administrative expenses								7		
g End of year balance								T		
2 Provide the estimated percentage	of the year	end bala	ince held as:							
a Board designated or quasi-endow	ment ►		8							
b Permanent endowment	8									
c Term endowment ►										
3a Are there endowment funds not in organization by.	n the possess	sion of th	ne organization	that are	held and adm	nınıstere	d for the	ſ	Yes	No
(i) unrelated organizations								3a(i)		1
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(ii), are the related o	rganizations	listed as	required on So	hedule	R?			3b		
4 Describe in Part XIV the intended	-		•							·
Part VI Investments-Land, B						K. line	10.			•
Description of investment		(a) Cos	t or other basis	(b) (Cost or other	(c) Accumulated Depreciation	(d) F	Book Va	alue
1a Land										
b Buildings					-					
c Leasehold improvements										
d Equipment					43,508	.	33,261.		10,	247.
e Other										
Total. Add lines 1a through 1e (Column	n (d) must eq	ual Forn	n 990, Part X, c	olumn (l	B), line 10(c).))	-		10,	247.

BAA

Schedule **D** (Form 990) 2009

Schedule [(Form 990) 2009 International Associa	ation for Impact Assessme		-1433922 Page 3
Part VII	Investments-Other Securities See			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
Financial d				
	ld equity interests			
Other				
-		_		
		_	· · · · · · · · · · · · · · · · · · ·	
		_		
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		_		······································
	mn (b) must equal Form 990 Part X, col. (B) line 12.)			·
Part VIII	Investments-Program Related (See			
	(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-year	valuation market value
			Cost of end-of-year	market value
				
				
		 		
	· · · · · · · · · · · · · · · · · · ·		·	
		- 		
				
			<u> </u>	<u>-</u> -
				
				
Part IX	nn (b) must equal Form 990, Part X, Col. (B) line 13.) Other Assets (See Form 990, Part X			
rart in				(h) Book value
0 - 6		Description		(b) Book value
Softwa	re		····	1,996.
			 	
			 	
				
				
				
				
Total (Co	turn (h) must squal Form 000 Port V sal (F)	tran 15)		1.996
Part X	lumn (b) must equal Form 990, Part X, col.(B), Other Liabilities (See Form 990, Part			<u>▶</u> 1,996.
raitA				
Cadaval Isa	(a) Description of Liability	(b) Amount		
rederal inc	come Taxes			
				
				
. <u> </u>				
	nn (b) must equal Form 990, Part X, col. (B) line 25)			
2. FIN 48 F for uncerta	footnote. In Part XIV, provide the text of the foo ain tax positions under FIN 48.	otnote to the organization's fina	ncial statements that reports	the organization's liability

Sche	dule D (Form 990) 2009 International Association for Impact Assessment, Inc.	58-1433922	Page 4
Par			
	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)	 	
3	Excess or (deficit) for the year. Subtract line 2 from line 1.		
4	Net unrealized gains (losses) on investments	 -	
_	Donated services and use of facilities		
5			
6	Investment expenses		
7	Prior period adjustments	<u> </u>	
8	Other (Describe in Part XIV) .	<u> </u>	
9	Total adjustments (net). Add lines 4 through 8	·	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments . 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants 2c		
c	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
,	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	1	
	Total expenses and losses per audited financial statements	1	
	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		
C	Other losses 2c		
C	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investments expenses not included on Form 990, Part VIII, line 7b	1 1	
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	
-	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 mation.	IV, lines 1b and 2b part to provide any	; Part V, additional
			 -
		. 	
		. 	

Schedule D	(Form 990) 2009	International Association for Impact Assessment, Inc.	58-1433922	Page 5
Part XIV	Supplementa	International Association for Impact Assessment, Inc. Information (continued)		
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Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

OMB No 1545 0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

58-1433922

	national Association				58-1433922
Part I			de the United Sta	tes. Complete if the o	organization answered 'Yes'
	to Form 990, Part IV, line	14b.			

1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	X Yes	No

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Sub-Saharan Africa	0	0	program service	conference	827,568
					
Fotals	0	0			827.568

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

Schedule F (Form 990) (2009)

Page 2 Part II | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed. 58-1433922 International Association for Impact Assessment, Inc. Schedule F (Form 990) 2009

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (g) Amount of non-cash assistance (f) Manner of cash disbursement (e) Amount of cash grant (d) Purpose of grant (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2009

TEEA3502 07/06/09

Page 3

International Association for Impact Assessment, Inc.

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. 58-1433922 Schedule F (Form 990) 2009 Part III

(h) Method of valuation (book, FMV, appraisal, other)										Schedule F (Form 990) 2009
(g) Description of non-cash assistance										Schedule F
(f) Amount of non-cash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										TEFA3503 07/06/00
(c) Number of recipients				:						
(b) Region	l	:								
(a) Type of grant or assistance										ВАА

Schedule I	F (Form 990) 2009	International Association for Impact Assessment, Inc.	58-1433922	Page 4
Part IV	Supplemental			
	Complete this par	rt to provide the information required in Part I, line 2, and any additional inform	nation.	
Pt_I_L	ine 2	_Substantiating_documentation_is_required_for	all	
		expenditures. This includes receipts and bank	statements.	
-				
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- -				
-	-			

International Association for Impact Assessment, Inc.	58-1433922	1
Form 990, Page 5, Line 4b Foreign Countries		
Ghana		
Australia		

Canada

United Kingdom

Supporting Statement of:

Form	990	n	9	/Other	amt.	not	included
LOTI	220	$\mathbf{\nu}$	•	/ Ochier	ame.	1100	THOTAGEA

Description	Amount
Operating	745.
UNEP	68,627.
Spec. Proj.	321,938.
Total	391,310.

Supporting Statement of:

Form 990 p 9/Line 2 Total Revenue-1

Description	Amount
Total Administration Fees Less: Internal Admin. Fee	474,852. -397,459.
Total	77,393.

Supporting Statement of:

Form 990 p 9/Line 2f Oth Rel/Exmpt -3

Description	Amount
Miscellaneous	106.
Royalties	4,572.
Total	4,678.

Supporting Statement of:

Form 990 p 9/Line 3 Column D

Description	Amount
Interest Income	4,336.
Total	4,336.

Supporting Statement of:

Sch. A, page 3/Line 10a-2

Description	Amount
Interest	11,371.
Dividends	22,699.
Total	34,070.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545 0047

2009

Open to Public Inspection

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

► Attach to Form 990. Department of the Treasury Internal Revenue Service

Employer identification number 58-1433922 International Association for Impact Assessment, Inc Pt_VI-A, Line 6 IAIA has individuals and businesses that pay dues to be members Pt VI-A, Line 7a The governing body is elected by the members Pt VI-B, Line 11AThe form 990 is reviewed by the finance officer and the CEO. A copy of provided to the governing board. Pt VI-B, Line 15 A cost of living adjustment identical for all staff is approved by the finance committe and then by the full board of directors.