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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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	A F	or the	2009 calendar year, or tax year beginning and endi	ng		
	B c	heck if	Please use IRS	D	Employer identific	cation number
		Addres	ss label or DODIII AMTON CONNECTION			
		Name change	type		94-1	703155
		Initial return	See Number and street (or P 0 box if mail is not delivered to street address) Room	n/suite E	Telephone number	,
		Termir ated	Specific 2120 L STREET, NW 500		202-	332-2200
		Amend	City or town, state or country, and ZIP + 4	G	Gross receipts \$	2,518,432.
		Applic tion pendir	MADITIOTORY DC 20037 1334	H(a	a) Is this a group re	
			F Name and address of principal officer: JOHN SEAGER		for affiliates?	Yes X No
			SAME AS C ABOVE empt status: X 501(c) (3)	—— H(t) Are all affiliates incl	
			empt status: X 501(c)(3)	— ни	ii No, attach a Group exemption	list (see instructions)
						1 State of legal domicile DC
		rt I	Summary			
	9	1	Briefly describe the organization's mission or most significant activities. $\overline{ ext{SEE}}$ $\overline{ ext{PAF}}$	RT III	, LINE 1.	
	Activities & Governance				· · · · · · · · · · · · · · · · · · ·	
	erni	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed o	of more that	n 25% of its net as	
	ò		Number of voting members of the governing body (Part VI, line 1a)		3	18
	8 (Number of independent voting members of the governing body (Part VI, line 1b)		4	18
	ties		Total number of employees (Part V, line 2a)		5	19 600
	tivi		Total number of volunteers (estimate if necessary)		6 7a	0.
	Ä		Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990,T, line 34		7b	0.
					Prior Year	Current Year
3 0 2010	9	8	Contributions and grants (Particulus HI)		,107,665.	2,464,961.
7(Revenue		1 (77)			
0	3ev	10	Program service revenue (Part VIII, line 29) 7010 (O) Investment income (Patt VIII, Add Inn (A) Hires 3, 4, 449 7d)		17,517.	18,100.
ണ	_	11	Other revenue (Part VIII) odlumn (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		43,792.	28,598.
AUG		12	Total revenue - add lines 8 through 5 mpdt ebyal Part VIII, column (A), line 12)	3	,168,974.	2,511,659.
			Grants and similar amounts part (Part X, column (A), lines 1-3)			
الل			Benefits paid to or for members (Part IX, column (A), line 4)	1	,304,504.	1,104,184.
3	ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)	-	,301,301.	1/101/101.
SCANNED	Expenses		Total fundraising expenses (Part IX, column (D), line 25) 247,881.			
	ũ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		,850,544.	1,588,732.
0,5			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3	,155,048.	2,692,916.
		19	Revenue less expenses. Subtract line 18 from line 12		13,926.	-181,257.
	Net Assets or Fund Balances				ing of Current Year	End of Year
	sset Bala		Total assets (Part X, line 16)	2	,229,893.	2,037,144.
	nd A		Total liabilities (Part X, line 26)	1	534,180.	522,688.
		22 rt	Net assets or fund balances Subtract line 21 from line 20 Signature Block		,093,713.	1,514,456.
	1 6		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and state	ements, and to	the best of my knowledg	ge and belief, it is true, correct,
			and complete Declaration of preparer (other than officer) is based on all information of which preparer has any known	owledge		
	Sigr	1			17/271	2016
	Her		Signature-ef officer (v)		Date	
			JOHN SEAGER, PRESIDENT			
			Type or print name and title	Charle of	- Ta	
	Paid		Preparer's Date 7.71.10	Check if self-	(see ins	er's identifying number structions)
	Prep	arer's	signature Vary Firm's name (or GELMAN, ROSENBERG & FREEDMAN	employe		
	Use	Only	yours if self-employed), 4550 MONTGOMERY AVE., SUITE 650 NO)RTH	EIN ►	- · · · · · · · · · · · · · · · · · · ·
			address, and ZIP +4 BETHESDA, MARYLAND 20814-2930		Phone no ► (301) 951-9090
	Mav	the II	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No
		01 02-0		te instruct	tions.	Form 990 (2009)

Pa	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
	TO PROMOTE SOCIAL WELFARE BY EDUCATING OPINION LEADERS AND THE GENERAL
	PUBLIC ABOUT POPULATION AND GROWTH ISSUES, AS WELL AS TO PROMOTE
	ADOPTION OF PUBLIC POLICIES WHICH WILL BRING HUMAN POPULATION AND
	ACTIVITIES INTO BALANCE WITH EARTH'S ENVIRONMENTAL AND NATURAL
2	Did the organization undertake any significant program services during the year which were not listed on
2	the prior Form 990 or 990-EZ? Yes X No
	·
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No.
3	
	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(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code.) (Expenses \$ 648,518 • including grants of \$) (Revenue \$
	COMMUNICATIONS - TO KEEP POPULATION CONNECTION MEMBERS, PUBLIC
	OFFICIALS, MEDIA REPRESENTATIVES AND OTHER UP-TO-DATE ON U.S. AND
	GLOBAL POPULATION ISSUES.
4b	(Code.) (Expenses \$ 454,876 • including grants of \$) (Revenue \$
	POPULATION EDUCATION- TO PROMOTE POPULATION LITERACY AMONG AMERICAN
	YOUTH BY (1) PROVIDING TEACHERS WITH INFORMATION ABOUT POPULATION
	DYNAMICS AND THEIR IMPACTS AND BY DEMONSTRATING WAYS THAT THESE
	CONCEPTS CAN BE INCORPORATED INTO CLASSROOM ACTIVITIES; AND (2)
	PREPARING A NUMBER OF EDUCATORS TO OFFER TRAINING TO OTHER TEACHERS
	THROUGH THE POPULATION EDUCATION TRAINING NETWORK (PETNET). FINALLY, TO
	PROVIDE FOLLOW-UP ASSISTANCE AND INFORMATION ENABLING FORMER TRAINEES
	TO APPLY THEIR TRAINING MOST EFFECTIVELY.
	450 055
4c	(Code:) (Expenses \$ 458,055 • including grants of \$) (Revenue \$)
	MEMBERSHIP- SUCCESS IN THE AREAS OF ADVOCACY AND PUBLIC EDUCATION
	DEPENDS LARGELY ON THE SUPPORT AND DEDICATION OF THE ORGANIZATION'S
	MEMBERS. PRESENTLY, WE HAVE 50,000 MEMBERS, SUPPORTERS AND
	PARTICIPATING TEACHERS ACROSS THE NATION HELPING REACH OUR GOALS BY
	TRAINING TEACHERS, EDUCATING STUDENTS, INFORMING ON POPULATION ISSUES,
	WRITING LETTERS TO CONGRESSIONAL LEADERS, SIGNING PETITIONS, GETTING
	OPINION LETTERS PUBLISHED ON LOCAL PAPERS, AND SPEAKING ABOUT
	POPULATION ISSUES AT LOCAL COMMUNITY EVENTS. WE SUPPORT OUR MEMBERS BY
	HOLDING TRAINING AND INFORMATION SESSIONS, RESPONDING TO THEIR
	CORRESPONDENCE, REQUEST FOR INFORMATION, AND ORDERS FOR OUR PRODUCTS
	AND/OR PUBLICATIONS.
	MD/OK TODDICATIONO.
	Other recovery (Provide to Other Life O)
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 573,007 • including grants of \$) (Revenue \$)
_4e	Total program service expenses ▶\$ 2,134,456.

932002 02-04-10

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POPULATION CONNECTION Part IV Checklist of Required Schedules

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
_	If "Yes," complete Schedule A	12	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
3	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	Α
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total	:		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			ŀ
•	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			
10	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	х	
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12	- 11	
IZA	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	_	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	aan /	うりしつい

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 19 If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	ł		
	column (A), line 2 ⁹ 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	l		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ł		
	any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	1		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	1		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ļ		
	contributor, or a grant selection committee 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 transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
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	ļ		
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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		X
34	Was the organization related to any tax-exempt or taxable entity?	l		
	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)?	1		
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O.	38	X	
		Form	99 0 (2009)

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•				
			Yes	No
та	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 36			
L				
	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			
С		1.	х	
0-	(gambling) winnings to prize winners?	1c	Λ.	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 19			
_	filed for the calendar year ending with or within the year covered by this return 2a 19 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	-
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	20		
20	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	00		
40	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country:	70		
Ü	See the instructions for exceptions and filling 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			·
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C 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? N/A	8		F
0	· · · · · · · · · · · · · · · · · · ·	0		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? N/A	9a		
a b	NI/A	9b		
10	Section 501(c)(7) organizations. Enter:	30		
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			ŀ
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			İ
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders N/A 11a			ŧ
-	Gross income from other sources (Do not net amounts due or paid to other sources against	ĺ		
_	amounts due or received from them)	}		ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		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 Body and Management						
				-		Yes	No
1a	Enter the number of voting members of the governing body	1a		18			
b	Enter the number of voting members that are independent	1b		18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?			<u> </u>	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	e dıre	ct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?			<u> </u>	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 99	0 was filed?	1	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	s?		-	5		X
6	Does the organization have members or stockholders?			ļ.	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the				
	governing body?		_		7a		X
	Are any decisions of the governing body subject to approval by members, stockholders, or other per			ļ	7b	:	<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year				
	by the following				.	.,	
	The governing body?				3a	X	
	Each committee with authority to act on behalf of the governing body?			F.	3 b	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the		9		Х
Sac	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Re	01/08/	(o Codo)	<u> </u>	9		
oec	tion B. Folicies (this Section B requests information about policies not required by the internal Ac	evenic	e Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			Г	0a	X	
	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates.				
-	and branches to ensure their operations are consistent with those of the organization?	-	,,	1	0ь	Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fil	lına ti	ne form?		11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
	Does the organization have a written conflict of interest policy? If "No," go to line 13			1	2a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ıld gıv	e rise				
	to conflicts?			1	2b	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			1	2c		<u>X</u>
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?			<u></u>	14	X	
15	Did the process for determining compensation of the following persons include a review and approva	al by I	ndependent	ŀ			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
	The organization's CEO, Executive Director, or top management official				5a	_X_	
b	Other officers or key employees of the organization			1	5b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment	with a				17
	taxable entity during the year?				6a		<u>X</u>
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate the control of the			n :			
	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization of the control o	anızat	ion's	- [٠.		
500	exempt status with respect to such arrangements? tion C. Disclosure			1	6b		
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, C	Α. ('О ₋ Ст ₋ FT	GA.	TT.	- KS	. KY
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T					, KO	, 1(1
	public inspection. Indicate how you make these available. Check all that apply.	(50)	(U)(U) OI IIY) av	anable 10	•		
	X Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	onflic	t of interest po	olicy, and	fına	ncıal	
	statements available to the public.		•	-			
20	State the name, physical address, and telephone number of the person who possesses the books at JOHN SEAGER $-$ (202) 332-2200	nd red	cords of the or	ganızatıo	n· ▶	-	
	2120 L STREET, NW, SUITE 500, WASHINGTON, DC 2003	7-1	534	· · ·			
				F	orm	990 (2009)

932006

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"

Check this box if the organization did not compensate any current officer, director, or trustee.

- 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.

Name and Title	(A)	(B)	1		((,		(D)	(E)	(F)
Nours		1)		4				
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Form **990** (2009)

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Form 990 (2009) POPULATION									94-1		155	Р	age 8
Part VII Section A. Officers, Directors, Tru	ıstees, Key E	mple	oyee	es, a	nd l	ligh	est	Compensated Employ	ees (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	ł		Pos				Reportable	Reportable	е	E	stimate	∍d
	hours	(c	heck	k all	that	app	ly)	compensation	compensati		a	mount	of
	per week	ector						from the	from relate organization		000	other	****
	Week	or di	92			ated		organization	(W-2/1099-M		•	npensa rom th	
		trustee or director	truste		R.	Suadi		(W-2/1099-MISC)	(** 2) : 555 //	••,	ŀ	ganızat	
		thal tr	institutional trustee	١.	oldu	yee St					ar	d relat	ed
		Individual	Institu	Office	Key employee	Highest compensated employee	Former		•		org	anızatı	ons
MILTON H. SAIER JR.						├-	ļ				<u> </u>		
BOARD MEMBER	2.00	X						0.		0.			0.
THEODORE STECK							├	-		<u> </u>	<u> </u>		
BOARD MEMBER	2.00	X						0.		0.			0.
SUSAN A. STOUT		1	 -	ļ	1								
BOARD MEMBER	2.00	X						0.		0.			0.
DAVID WEISS													
BOARD MEMBER	2.00	X				<u> </u>	<u> </u>	0.		0.			0.
STACEY YOUNG		l											_
BOARD MEMBER	2.00	X	 		 —	<u> </u>	<u> </u>	0.		0.			0.
JOHN SEAGER PRESIDENT	37.50			X				130,973.		0.		0 4	06
FRESIDENI	37.30	-		^	-	 -	├	130,973.		<u> </u>		9,4	00.
		1	 		-		H						
							Ì						
						Ļ	l	100 000					
1b Total			_					130,973.		0.		9,4	86.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wl	no re	eceived more than \$100	,000 in reportab	əle			1
compensation from the organization								 	· ·			Yes	No
3 Did the organization list any former officer,	director or tru	stee	ke'	v em	ndo	vee	or h	unhest compensated er	molovee on	ľ		1.00	
line 1a? If "Yes," complete Schedule J for s			, no	y C11	ipio,	ycc,	01 1	ngnest compensated er	iipioyee oii		3		Х
4 For any individual listed on line 1a, is the su			amo	ensa	ation	and	d oth	her compensation from	the organization				
and related organizations greater than \$150									g-		4		Х
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	rom	any	unr	elat	ed organization for serv	ices rendered to	,			į
the organization? If "Yes," complete Sched	ule J for such	pers	son								5		X
Section B. Independent Contractors													
Complete this table for your five highest co	mpensated in	depe	ende	ent c	onti	acto	ors t	hat received more than	\$100,000 of cor	npens	ation	from	
the organization							Г	/P\				<u> </u>	
(A) Name and business	address							(B) Description of s	ervices	_ c		C) ensatio	n
LEWIS DIRECT										╁	2,		-
										1			

	Description of services	Compensation
LEWIS DIRECT		
325 EAST OLIVER STREET, BALTIMORE, MD 212	202PRINTER/MAILING	309,680
Total number of independent contractors (including but not limited to those		

Form **990** (2009)

1 a Foderand campagns	Pa	rt VII	Statement of Rever	nue					
Business Code Page 1							Related or exempt function	Unrelated business	excluded from tax under sections 512,
Business Code Page 1	nts nts	1 a	Federated campaigns	1a					
Business Code Page 1	og a	b	Membership dues	1b	643,771.				[
Business Code Page 1	S, S	С	Fundraising events	1c					
Business Code Page 1	agi.	d	Related organizations	1d					
Business Code Page 1	n, S	е	Government grants (contribut	tions) 1e					
Business Code Page 1	r Si	f	All other contributions, gifts, gran	nts, and					
Business Code Page 1	를림		similar amounts not included abo	ove 1f	1821190.				
Business Code Page 1	늘위	g	Noncash contributions included in lines	s 1a-1f \$					
2 a Business Code Business Code C C C C C C C C C	용制	_				2464961.			
Number N					Business Code				:
Number N	e l	2 a							
Number N	ار کے								
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18 100 100 18 100 18 100 18 100 18 100 18 100 18	مّة	_		enue					
3 Investment income (including dividends, interest, and other similar amounts) 18,100. 18,		q			>				
A Income from investment of fax-exempt bond proceeds 14,222. 14,222.				dividends, inter	est, and				
A Income from investment of fax-exempt bond proceeds 14,222. 14,222.			other similar amounts)		>	18,100.			18,100.
The state of the		4	Income from investment of ta	x-exempt bond r	oroceeds ►				
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12 Total revenue. See instructions ► 2511659. 0. 0. 46,698.						921.			1
							0.	n	46,698.
	93200		TOTAL TENENTE . SEE INSTRUCTIONS				J		'

Part IX | Statement of Functional Expenses

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

	All other organizations must compl		not required to comple		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1.0			
	trustees, and key employees	140,459.	98,321.	22,474.	19,664.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	015 075	620 065	05 271	101 020
7	Other salaries and wages	815,275.	628,065.	85,271.	101,939.
8	Pension plan contributions (include section 401(k)	17 250	12 500	1 051	1 000
_	and section 403(b) employer contributions)	17,358.	13,599.	1,851. 6,954.	1,908. 7,030.
9	Other employee benefits	62,430.	48,446.	0,954.	7,030.
10	Payroll taxes	68,662.	51,732.	8,340.	8,590.
11	Fees for services (non-employees):				
a	Management	6,609.	160.	6,449.	
b	Legal	111,741.	100.	111,741.	
	Accounting	111,/41.		111,741.	
d	, , , , , , , , , , , , , , , , , , ,				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	84,948.	69,150.	7,972.	7,826.
9 12	Other Advertising and promotion	04,540.	07,130.	1,512.	7,020.
12 13	Office expenses	571,769.	538,812.	7,038.	25,919.
14	Information technology	3/1//03.	330,012.	7,030.	23,717.
15	Royalties				
16	Occupancy	264,987.	201,638.	31,677.	31.672.
17	Travel	136,379.	115,395.	1,331.	31,672. 19,653.
18	Payments of travel or entertainment expenses				20,00
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	51,321.	39,969.	5,134.	6,218.
23	Insurance	12,619.	9,996.	1,565.	1,058.
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				· · · · · · · · · · · · · · · · · · ·
а	MECHANICAL SERVICES	333,639.	307,029.	11,575.	15,035.
b	MISCELLANEOUS	14,720.	12,144.	1,207.	1,369.
c			,		
d					
e					
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	2,692,916.	2,134,456.	310,579.	247,881.
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	384,489.	337,774.	0.	46,715.
					F 000 (0000)

932010 02-04-10

Form **990** (2009)

Pa	rt X	Balance Sheet		· · · · · · · · · · · · · · · · · · ·			
					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			400.	1	400.
	2	Savings and temporary cash investments			1,139,893.	2	1,036,904.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		230,552.	4	224,331.	
	5	Receivables from current and former officers, di	rectors	s, trustees, key			
		employees, and highest compensated employe	es Co	mplete Part II			<u> </u>
		of Schedule L				5_	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)) and persons described in section 495	58(c)(3)(B) Complete			
		Part II of Schedule L				6	
sts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			14,939.	8	14,102. 110,477.
Ä	9	Prepaid expenses and deferred charges			100,628.	9	110,477.
	10a	Land, buildings, and equipment: cost or other					
		basis Complete Part VI of Schedule D	10a	358,913.			
	b	Less accumulated depreciation	10b	273,672.	128,995.	10c	85,241.
	11	Investments - publicly traded securities	5,586.	11	1,785. 546,702.		
	12	Investments - other securities See Part IV, line		591,698.	12	546,702.	
	13	Investments - program-related See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	17,202.	15	17,202.		
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	2,229,893.	16	2,037,144.
	17	Accounts payable and accrued expenses			121,760.	17	163,692.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	rs, trus	tees, key employees,			
iab		highest compensated employees, and disqualif	ed per	sons Complete Part II			
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated th	ırd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities. Complete Part X of Schedule D			412,420.	25	358,996.
	26	Total liabilities. Add lines 17 through 25			534,180.	26	522,688.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.			1 666 045		
auc	27	Unrestricted net assets			1,666,947.	27	1,458,357.
Bal	28	Temporarily restricted net assets			27,766.	28	55,099.
힏	29	Permanently restricted net assets			1,000.	29	1,000.
Ē		Organizations that do not follow SFAS 117, c	heck l	nere 🕨 📖 and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	1 2 2 2 2 2 2
Z	33	Total net assets or fund balances			1,695,713.	33	1,514,456.
	34	Total liabilities and net assets/fund balances			2,229,893.	34	2,037,144.

Form **990** (2009)

Pa	rt 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		2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			:
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	:		ŀ
	consolidated basis, separate basis, or both X Separate basis Consolidated basis Both consolidated and separate basis			
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?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			ĺ
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990 (2009)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

Public Charity Status and Public Support

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

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number 94-1703155

		POPULAT	TON CONNECTI	ON					24	-1/03	<u> </u>	
Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this par	t) See inst	ructions				
he organ	ızatıon ıs not a	private foundation	because it is: (For lines 1	I through 1	1, check o	only one b	ox)					
1	A church, cor	nvention of churches	s, or association of churc	ches descr	ıbed ın se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗀	A hospital or	a cooperative hospr	tal service organization o	described i	n section	170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	pıtal descr	ibed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	e hospital	's nam	e,
	city, and state											
5 🔲			benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental un	t describe	d In		
	section 170(b)(1)(A)(iv). (Complete Part II.)											
6			ent or governmental unit	t described	l in sectio	n 170(b)(1	i)(A)(v).					
7 X			eives a substantial part					r from the	general p	ublic desc	rıbed ı	n
•	-	b)(1)(A)(vi). (Comple		or its supp		90.0			9-11-1-1			
8 🔲	-		ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🗔	-		eives (1) more than 33			om contri	hutions m	ambarshi	n fees and	d aross rea	einte:	from
اللبا			nctions · subject to certa									
			axable income (less sect									
		509(a)(2). (Complete	•	lion of ta	A) 110111 Du	311103303	acquired b	y the orga	inization a	itei oune o	0, 157	
10			perated exclusively to te	et for publi	c safety S	ee cectic	n 500(a)(d	1\				
10			perated exclusively to te						y out the r	nurnosas o	of one	or
11	-		ations described in section									J1
							.). Oee se c	cion sos _t	ajtoj. Onet	SK (HE DOX	tilat	
			organization and comple		e III • Func		tograted		d 🔲	Type III - C	Othor	
_ [a Type I		」Type II			-	-	r mare die				n
e												11
			han one or more publicly						e(a)(1) or s	ection 509	(a)(2)	
f			ten determination from t	ine ins tha	atitisa iy	ре і, туре	ell, or Type)				
		rganization, check th		6					0			
g			organization accepted ar									
			lirectly controls, either al	one or tog	ether with	persons o	described	in (ii) and i	(III) below,		Yes	No
	_		upported organization?							11g(i)		
			n described in (i) above?							11g(ii)		
			person described in (i)							11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
				1		I						
(i) Name	e of supported (ii) EIN (iii) Type of organization						u notify the	(vi) is	on in col	(vii) An	nount o	f
org	anization		(described on lines 1-9	in col (i) listed in your governing document?		1 7		THE DIVANCEU III HIS		sup	port	
			above or IRC section									
			(see instructions))	Yes	No	Yes	No	Yes	No			
		-			[
				1			ļ		1			
				1								
					<u> </u>			<u> </u>				
Total		†						1				

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 3,532,376 2,903,059 3 286 496 3,107,665 2,464,961 15,294,557. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 3,107,665 2,464,961 3,532,376 2,903,059. 3,286,496 15,294,557. 4 Total. Add lines 1 through 3 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) 264,101. 15,030,456. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 2,464,961 3,532,376, 2,903,059 3,286,496 3,107,665. 15,294,557. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 109,976. 32,322. 409,290. 90,231. 133,862. 42,899. and income from similar sources 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 5,096. 2,416. 1,650 921. 12,411. 2,328. assets (Explain in Part IV.) 15,716,258. 11 Total support. Add lines 7 through 10 130,836. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 95.64 14 % 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 15 92.12 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop 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 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2009

Pá	rt III Support Schedule for C	Organizations	Described in S	Section 509(a	(Complete on	y if you checked the bo	ox on line 9 of Part I)
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513]				
4	Tax revenues levied for the organ-						
	ization'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						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and				 ``		
7 6	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					,	
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	ction B. Total Support		<u> </u>			 	<u> </u>
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6	1	(, = 5 5	(5) 255.	(0) 2000	10/2000	(-) 1010.
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		:				
t	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 in line 10b, whether or not the business is regularly carried on	-					
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)			-			
	First five years. If the Form 990 is for	r the organization's	s first, second, third	d, fourth, or fifth t	ax vear as a sect	on 501(c)(3) organiz	ation.
	check this box and stop here	J		, ,	,		▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2009 (olumn (f))		15	%
16	Public support percentage from 2008	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve						
	17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 %						
18							
198	33 1/3% support tests - 2009. If the	organization did r	not check the box o	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a						▶□
ŀ	33 1/3% support tests - 2008. If the						and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						▶□
						hedule A (Form 99	0 or 990-EZ) 2009

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internat Revenue Service

Complete if the organization is described below.

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

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

- Section 501(c)(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
- 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), then

- 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.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nar	ne of organization			Empl	oyer identification number
		ION CONNECTION	_		94-1703155
P	ert I-A Complete if the org	anization is exempt und	der section 501(c)	or is a section 527 o	rganization.
1	Provide a description of the organiz	ation's direct and indirect politic	cal campaign activities	in Part IV.	
2	Political expenditures			▶\$	
3	Volunteer hours				
Pa	art I-B Complete if the org	anization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un-	der section 4955	▶\$	
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5 ▶\$	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
48	a Was a correction made?				Yes No
	o If "Yes," describe in Part IV.	·			\(0)
P	art I-C Complete if the org	anization is exempt und	der section 501(c)	·	
1	Enter the amount directly expended	l by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	zation's funds contributed to o	ther organizations for s	ection 527	
	exempt function activities			▶\$	
3	Total exempt function expenditures	. Add lines 1 and 2 Enter here a	and on Form 1120-POL	. ,	
	line 17b			▶\$	
4	Did the filing organization file Form	•			Yes No
5	Enter the names, addresses and en	• •			• •
	For each organization listed, enter t		•	•	
	that were promptly and directly deli (PAC) If additional space is needed	• • •		parate segregated fund or a	a political action committee
	· · · · · · · · · · · · · · · · · · ·	···		100	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
					11 110110, 01101
		·····		·	
		· · · · · · · · · · · · · · · · · · ·		**-	· · · · · · · · · · · · · · · · · · ·

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LHA

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009

48,903.

30,000.

461,513.

78,903.

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990 EZ) 2009 POPULATION CONNECTION 94-1703155 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)	(t)
		Yes	No	Amo	unt
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:				
	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		
1	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes." Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ical			
а	Current year		2a		
	Carryover from last year		2b		
	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	p-1111-111	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		•
	t IV Supplemental Information				
•	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5,	and Part II-B.	line 1ı. Also	, complete	this part
	ny additional information.	·			,
				-	
		-			

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Inspection

Name of the organization

Employer identification number

	POPULATION CONNECT		94-1/03155
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds
J	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
6	-		•
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose of	Yes No
Par	impermissible private benefit?	representation and world "Vee" to Form 000. De	
			it IV, lifte 7.
1	Purpose(s) of conservation easements held by the organization		and all the same and and the same
	Preservation of land for public use (e.g., recreation or p		orically important land area
	Protection of natural habitat	Preservation of a certifi	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	f a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	2c	
d	Number of conservation easements included in (c) acquired	2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located -	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements dui	ring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during t	he year > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense s	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes th	ne organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Otl	her Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and bal	ance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of publ	lic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	e sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service,	provide the following amounts relating to
	these items:	·	-
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial	gain, provide
_	the following amounts required to be reported under SFAS 1		♥ - • • •
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		► \$ ► \$
	Alegara malagara in Francisco de Carta		· • • • • • • • • • • • • • • • • • • •

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Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

Part VII Investments - Other Securities.	See Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuate or end-of-year mark	
Financial derivatives				
Closely-held equity interests				
Other				
ANNUITY CONTRACTS	546,702	END-OF-YE	EAR MARKET	VALUE
Total. (Col (b) must equal Form 990, Part X, col (8) line 12) ▶	546,702	2 .		
Part VIII Investments - Program Related.				
			(c) Method of valuate	tion
(a) Description of investment type	(b) Book value		t or end-of-year mark	
				······
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ▶				······
Part IX Other Assets. See Form 990, Part X, III				
	a) Description			(b) Book value
			-	
				·
	17			
Total (Column (h) must squal Form 000, Part V, sol (P) I	(no 15)	·	•	
Total. (Column (b) must equal Form 990, Part X, col (B) I Part X Other Liabilities. See Form 990, Part			<u></u>	
1. (a) Description of liability	74, 1110 20	(b) Amount		
Federal income taxes				
GIFT ANNUITY LIABILITY		290,324.		
DEFERRED RENT		68,672.		
	-			
Total. (Column (b) must equal Form 990, Part X, col (B)	line 25.)	358,996.		<u></u>
2. FIN 48 Footnote. In Part XIV, provide the text of the f		on's financial statements	that reports the org	anization's liability for

uncertain tax positions under FIN 48. 932053 02-01-10 Schedule D (Form 990) 2009

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Sche	dule D (Form 990) 2009 POPULATION CONNECTION					Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finance	cial State	ment		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,511,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		2,692,	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		-181,	257.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net). Add lines 4 through 8		9			0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10		-181,	<u>257.</u>
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts with Rever	iue per H			622
1	Total revenue, gains, and other support per audited financial statements			1	2,795,	632.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1				
а	Net unrealized gains on investments	2a	7 200			
b	Donated services and use of facilities	i i	7,200.	1		
C	Recoveries of prior year grants	2c	(77)	- 1		
d	Other (Describe in Part XIV.)	2d	6 , 773.	- 1	202	072
е	Add lines 2a through 2d			2e	283, 2,511,	9/3.
3	Subtract line 2e from line 1			3	2,511,	659.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1		
b	Other (Describe in Part XIV.)	4b		1		_
С	Add lines 4a and 4b			4c	0 511	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,511,	659.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	nses per	Retu	rn 0 0 7 6	
1	Total expenses and losses per audited financial statements			1 1	2,976,	889.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		7 000			
а	Donated services and use of facilities	2a 2/	7,200.	- 1		
b	Prior year adjustments	2b		. 1		
С	Other losses	2c		↓ ∤		
d	Other (Describe in Part XIV.)	2d	6 , 773.	1		0.7.0
е	Add lines 2a through 2d			2e	283,	973.
3	Subtract line 2e from line 1			3	2,692,	916.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b		.		_
С	Add lines 4a and 4b			4c		0.
5				5	2,692,	<u>,916.</u>
	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II					4; Part
	e 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp				ınformatıon	
PA	RT X: IN JUNE 2006, THE FINANCIAL ACCOUNTIN	NG STANDAR	DS BOA	<u>IRD</u>		
4.77	AGD) DEFENCED FIGD AGG 740 10 INCOME MAYOU	C MILAM DO	OUTDE		TDANCE I	70D
(F.	ASB) RELEASED FASB ASC 740-10, INCOME TAXES	S, THAT PR	OVIDES	S GU	IDANCE I	OR_
RE	PORTING UNCERTAINTY IN INCOME TAXES. FOR T	HE YEAR EN	DED DE	CEM	BER 31.	
112	ONTINO ONOBINITATI IN THOOMS TIMBOUT OF					
20	9, POPULATION CONNECTION HAS DOCUMENTED I	rs conside	RATION	OF	FASB AS	SC
74	0-10 AND DETERMINED THAT NO MATERIAL UNCER	TAIN TAX P	OSITIO	ons (QUALIFY	FOR
ΕT	THER RECOGNITION OR DISCLOSURE IN THE FINAL	NCIAL STAT	EMENTS	5.		
==						
SC	HEDULE D, PART XII, LINE 2D AND PART XIII,	LINE 2D:				
<u>50</u>	TO THE MALE AND THE MALE		· · · · · · · · · · · · · · · · · · ·	Sched	lule D (Form 9	90) 2009

Schedule D (Form 990) 2009 POPULATION CONNECTION	94-1703155 Page 5
Schedule D (Form 990) 2009 POPULATION CONNECTION Part XIV Supplemental Information (continued)	1 490 0
oupplemental information (continued)	
COCH OF COOKS COID NEWHORD ACATRICH DESCRIPTION OF MUSE Excessions	CONTRACTOR STOR
COST OF GOODS SOLD NETTED AGAINST REVENUE ON THE FINANCIAL	STATEMENTS AND
REPORTED AS AN EXPENSE ON FORM 990, PART VIII, LINE 10B.	
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization POPULATION CONNECTION

Employer identification number 94-1703155

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RESOURCE BASE.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
GOVERNMENT RELATIONS - TO INFORM CONGRESS, THE ADMINISTRATION AND STATE
LEGISLATURES ABOUT POPULATION ISSUES AND TO ADVOCATE THE ADOPTION OF
MEASURES TO MOVE THE UNITED STATES AND THE WORLD TOWARDS STABILIZING
POPULATION; TO INFLUENCE POPULATION-RELATED LEGISLATION; TO MOBILIZE
MEMBERS TO TAKE ACTION ON PENDING LEGISLATION.
EXPENSES \$ 347751. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FIELD AND OUTREACH- TO ASSIST THE POPULATION CONNECTION ACTIVISTS
NATIONWIDE IN BUILDING AND SUSTAINING STATE AND LOCAL EDUCATIONAL,
MEDIA AND LOBBYING EFFORTS ON BEHALF OF POPULATION CONNECTION THROUGH
ORGANIZING AND PROVIDING TRAINING, TECHNICAL ASSISTANCE AND FUNDING.
REPRESENT POPULATION CONNECTION IN COALITIONS FOCUSED ON GRASSROOTS
ACTION AND AT PUBLIC PRESENTATIONS AND EXHIBITIONS AS NEEDED.
EXPENSES \$ 225256. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN
OUTSIDE ACCOUNTANT AND REVIEWED BY THE PRESIDENT AND BOARD MEMBERS. A COPY
OF THE FINAL 990 IS GIVEN TO THE ENTIRE BOARD PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12: POPULATION CONNECTION MONITORS AND
ENFORCES COMPLIANCE OF A WRITTEN CONFLICT OF INTEREST POLICY WITH ITS BOARD

932211 02-03-10

OF DIRECTORS AND STAFF MEMBERS.

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Schedule O (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organiz	POPULATION CONNECTION		94-1703155
FORM 990,	PART VI, SECTION B, LINE 15A: COMPARABLE I	OATA W	AS USED TO
DETERMINE	THE CEO'S SALARY WHICH HAS REMAINED UNCHAN	IGED S	INCE JANUARY,
2006. IN	ADDITION, FOR COMPENSATION OF OFFICERS AND	KEY	EMPLOYEES, SIMILAR
ORGANIZATI	ONS ARE EXAMINED IN ORDER TO ASCERTAIN COM	<u>IPARAB</u>	LE PAY LEVELS. THE
BOARD DETE	RMINES COMPENSATION AND THE DECISION IS DO	CUMEN	TED.
FORM 990,	PART VI, LINE 17, LIST OF STATES RECEIVING	COPY	OF FORM 990:
AL, AK, AZ, A	R,CA,CO,CT,FL,GA,IL,KS,KY,LA,ME,MD,MA,MI,N	MN,MS,	NH, NJ, NM, NY, NC, ND
OH,OK,OR,P	A,RI,SC,TN,UT,VA,WA,WI,WV		
FORM 990,	PART VI, SECTION C, LINE 19: THE ORGANIZAT	M NOIT	AKES ITS
GOVERNING	DOCUMENTS, CONFLICT OF INTEREST POLICY AND	FINA	NCIAL STATEMENTS
AVAILABLE	UPON REQUEST.		
		_	
			
		_	