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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 Open to Public

Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2009 calendar year, or tax year beginning JUL 1. 2009 and ending JUN 30, Check if C Name of organization D Employer identification number use IRS label o SMART GROWTH AMERICA pant or Name change type 27-0038938 Doing Business As Initial Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-1707 L STREET, N.W. 1050 202-207-3355 Instruc-Amended City or town, state or country, and ZIP + 4 3,464,934. G Gross receipts \$ Applica-WASHINGTON, DC 20036 H(a) Is this a group return pending F Name and address of principal officer: GEOFF ANDERSON Yes X No for affiliates? 1707 L STREET, N.W. STE 1050, WASH., 200 H(b) Are all affiliates included? Yes No I Tax-exempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.SMARTGROWTHAMERICA.ORG H(c) Group exemption number ▶ K Form of organization X Corporation Trust Association L Year of formation 2002 M State of legal domicile DC Part I Summary Briefly describe the organization's mission or most significant activities: FORMED TO CONSERVE ENERGY, SCANNED JAIN Activité 8 & Governance NATURAL RESOURCES, PROTECT ENVIRONMENTAL AND AESTHETIC QUALITY. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 12 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 12 4 Total number of employees (Part V, line 2a) 38 5 0 Total number of volunteers (estimate if necessary) 6 Ō. Total gross unrelated business revenue from Part VIII, column (C), line 12 7a Ō. Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 10,143,024 3,120,732. Contributions and grants (Part VIII, line 1h) 274,782. 184,181. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), Hes 1-1, Intel 78,203. 10 24,914. Other revenue (Part VIII, column (A), Imes 5, 6d, 8c, 9c, 10c, and 11e) 17,706. 81,818. 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)
Grants and similar amounts paid (Part IX, column (A), lines 1-3 10,460,426. 3,464,934. 400,000. 13 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employed Cone Rart IX, column (A), lines 5-10) 2,159,160. 1,391,852. 16a Professional fundraising fees (Part IX, column (A), line 11e) 34,656. b Total fundraising expenses (Part IX, column (D), line 25) 3,512,<u>195</u> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 4,330,726. 4,904,047. 6,889,886. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 5,556,379. -3,424,952.Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year End of Year** 8,397,280. 20 Total assets (Part X, line 16) 4,816,611. 707,433. 551,716. 21 Total liabilities (Part X, line 26) 22 7,689,847. 4,264,895. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here GEOFF ANDERSON Type or print name and title Preparer's identifying number (see instructions) Check If Preparer's Paid signature 27/1d employed ► Preparer's Firm's name (or THOMPSON, COBB, BAZILIO AND ASSOC. EIN > Use Only yours if self-employed), 1101 15TH ST., N.W., SUITE 400 address, and WASHINGTON, DC 20005 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes __ No

| 4d | Other program services (| Describe in Schedule O.) | | | |
|----------------|--------------------------|--------------------------|---------------|--------------------|------|
| | (Expenses \$ | including grants of \$ |) (Revenue \$ |) | |
| 4e | Total program service ex | kpenses▶\$ 6,673,025. | | | |
| | | | | Form 990 (2 | 009) |
| 3200: 2-04- | 2 10 | | | | |

Form 990 (2009) SMART GROWTH AMERICA 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 Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | <u> </u> |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| 4 | public office? If "Yes," complete Schedule C, Part I | 3 | 177 | 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 |] | | ١,, |
| 6 | reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | X |
| v | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to | | | v |
| 7 | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6_ | | X |
| • | Did the organization receive or hold a conservation easement, including easements to preserve open space, | _ | | v |
| 8 | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| Ü | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | _ | | 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 | 8 | | _^ |
| • | credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | ١ | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? | 9 | | Λ |
| . • | If "Yes," complete Schedule D, Part V | 10 | | Х |
| 11 | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X | 10 | | |
| | 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 | | | |
| • | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX. | | | |
| • | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | | | |
| • | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. | | | |
| 12 | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | ., | |
| 404 | Schedule D, Parts XI, XII, and XIII. | 12 | X | |
| 12A | Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D. Parts XI. XII. and XIII is optional 12A X | | | |
| 13 | , | 40 | | X |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? | 13 14a | | X |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | 144 | | |
| _ | 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 | 145 | | |
| | 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 | ļ | X |
| 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 | | X |
| 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 | | <u>X</u> |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | Ţ | |
| | complete Schedule G, Part III | 19 | | X |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | <u>X</u> |
| | | Form ! | <u>ባር ሰ</u> ቦ | יםחחמי |

Part IV Checklist of Required Schedules (continued)

| | | 1 | Yes | No |
|-----|---|-------------|---------------------|------------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the | | | |
| | United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | X | ļ |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, | | | |
| •• | column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | X | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | , , |
| | Schedule K. If "No", go to line 25 | 24a | | X |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| C | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | ļ |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a | | | |
| | disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 2 <u>5b</u> | | Х |
| 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 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete | | | ١ |
| | 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 |
| | 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 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | ., |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | 1 | 1,7 |
| | sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | <u>X</u> |
| 34 | Was the organization related to any tax-exempt or taxable entity? | | | 17 |
| | If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | <u> X</u> |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? | | | v |
| | If "Yes," complete Schedule R, Part V, line 2 | 35 | \rightarrow | <u> X</u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | v |
| ^- | If "Yes," complete Schedule R, Part V, line 2 | 36 | | <u> X</u> |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | v |
| 00 | 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? | _ | x | |
| | Note. All Form 990 filers are required to complete Schedule O. | 38 | | 2000' |
| | | Form 9 | 9 9 0 (2 | 2009) |

| | 990 (2009) SMART GROWTH AMERICA 27-0038 | 3938 | P | age 5 |
|--------|---|------------|-----|---------------------|
| Pa | Statements Regarding Other IRS Filings and Tax Compliance | | | |
| • | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of | | | |
| | U.S. Information Returns. Enter -0- if not applicable | 5 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable |) | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | X | |
| 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 38 | 3 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | <u> </u> |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X |
| b | If "Yes," enter the name of the foreign country: | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and | | | |
| | Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| C | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited | | | |
| | Tax Shelter Transaction? | 5c | | |
| 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 | | X |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | _ | | 37 |
| | to file Form 8282? | 7c | | X |
| | 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 | - . | | Х |
| | benefit contract? | 7e | | X |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| 9 | For contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g 7h | | $\frac{\Lambda}{X}$ |
| ь 8 | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the | | | |
| Ū | supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings | | - | |
| | at any time during the year? | 8 | 1 | X |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| a | Did the organization make any taxable distributions under section 4966? | 9a | 1 | Х |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | X |
| 10 | Section 501(c)(7) organizations. Enter: | - 3 | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | [| | |
| 11 | Section 501(c)(12) organizations. Enter. | | | |
| а | Gross income from members or shareholders | | 1 | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | 1 | |
| | amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a |] | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |

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

| <u>Sec</u> | tion A. Governing Body and Management | | | |
|------------|---|---------|----------|----------|
| | | | Yes | No |
| 1a | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | |
| b | Enter the number of voting members that are independent 12 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | İ | | |
| | officer, director, trustee, or key employee? | 2 | <u> </u> | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | l | 1 | |
| | of officers, directors or trustees, or key employees to a management company or other person? | 3 | <u> </u> | X |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | X |
| 6 | Does the organization have members or stockholders? | 6 | ļ | <u>X</u> |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the | | | |
| | governing body? | 7a | <u> </u> | X |
| _ | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | | | |
| _ | by the following: | | v | |
| a | The governing body? | 8a | X | |
| 9 | Each committee with authority to act on behalf of the governing body? | 8b | ^ | |
| • | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | Х |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | 9 | | |
| | Tono Control of the requests information about policies not required by the internal neverble code.) | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | 103 | X |
| | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, | 100 | | _=== |
| | and branches to ensure their operations are consistent with those of the organization? | 10b | | |
| 11 | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | 11 | Х | |
| 11A | 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 | 12a | X | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise | | | |
| | to conflicts? | 12b | Х | |
| C | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | ın Schedule O how this is done | 12c | Х | |
| 13 | Does the organization have a written whistleblower policy? | 13 | Х | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | Х | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | ĺ | ., | |
| | The organization's CEO, Executive Director, or top management official | 15a | X | |
| D | Other officers or key employees of the organization | 15b | X | |
| 16- | If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) | | | |
| iva | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | 1 | Х |
| h | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation | 104 | | |
| • | In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's | | | |
| | exempt status with respect to such arrangements? | 16b | ĺ | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE | | | • |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available | for | | |
| | public inspection. Indicate how you make these available. Check all that apply. | | | |
| | Own website X Another's website X Upon request | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, an | nd fina | ncial | |
| | statements available to the public | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization. | ion: 🕨 | | |
| | SMART GROWTH AMERICA - 202-207-3355 | | | |
| | 1707 L STREET, N.W. SUITE 1050, WASHINGTON, DC 20036 | | | |

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

| Check this box if the organization did not co | | y cu | rren | | | , dire | ecto | | (=) | |
|---|------------------|--|------------------------|----------|----------|------------------------------|----------|--|--|--|
| (A) | (B) | | (C) Position | | | | | (D) | (E) | (F) |
| Name and Title | Average hours | (6 | | | | ı app | M | Reportable compensation | Reportable compensation | Estimated amount of |
| | per week | Individual frustee or director Institutional frustee | | Officer | | Highest compensated complete | | from the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other compensation from the organization and related organizations |
| GEOFFREY ANDERSON | | | _ | | | | | | | |
| PRESIDENT/CEO | 40.00 | Х | | X | | | | 152,371. | 0. | 8,739. |
| JOHN BAILEY | | | | | | | | | | |
| BOARD MEMBER | 1.00 | Х | | | | | | 0. | 0. | 0. |
| F. KAID BENFIELD | | | | | | | | | | |
| BOARD MEMBER | 1.00 | X | | | | | | 0. | 0. | 0. |
| DAVID CROSSLEY | | | | | | | | | | |
| BOARD MEMBER | 1.00 | X | | | | | | 0. | 0. | 0. |
| TIM DAVIS | - | | | | | | | | | |
| BOARD MEMBER | 1.00 | X | | İ | | | | 0. | 0. | 0. |
| HATTIE DORSEY | | | | Ī | | | | | | |
| BOARD MEMBER | 1.00 | X | | | | | | 0. | 0. | 0. |
| BRIDGET JONES, ED.D | | | | ļ | | | | | | |
| BOARD MEMBER | 1.00 | X | | | | | | 0. | 0. | 0. |
| SCOT SPENCER | | | | ĺ | | | | | | |
| BOARD VICE CHAIR | 1.00 | X | | X | | | | 0. | 0. | 0. |
| EMILY WADHAMS | | | ļ | ļ | | | | | | |
| BOARD MEMBER | 1.00 | X | | | | | | 0. | 0. | 0. |
| RACHEL WINER | | | | | | | | | | • |
| BOARD MEMBER | 1.00 | X | ļ | | | | | 0. | 0. | 0. |
| SCOTT WOLF | 4 00 | | | 1 | ļ | | | | | • |
| BOARD MEMBER | 1.00 | X | <u> </u> | ļ | ļ | _ | | 0. | 0. | 0. |
| MICHAEL K. WOO | 1 00 | ,, | | ,, | | | | | 0 | 0 |
| BOARD CHAIR | 1.00 | X | - | X | <u> </u> | _ | | 0. | 0. | 0. |
| PARRIS N. GLENDENING | 40 00 | ļ | ļ | ,, | | | | 117 600 | 0. | A 157 |
| PRESIDENT, SGLI | 40.00 | | | X | _ | | <u> </u> | 117,690. | | 4,157. |
| DAVID GOLDBERG DIR. OF COMMUNICATION | 40.00 | | | ļ | ļ | U | | 102,744. | 0. | 0. |
| WILLIAM SCHROEER | 40.00 | - | ├ | ├ | | X | - | 102,744. | | |
| DIR OF POLICY & RESEARCH | 40.00 | | | | ļ | x | l | 113,534. | 0. | 13,337. |
| DIN OF POLICE & RESEARCH | 40.00 | | \vdash | <u> </u> | \vdash | 1 | <u> </u> | 113/334. | | 13/33/6 |
| | | | | | | | | | | |
| | | | Ι | t | | † | Η- | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| Par | 1 VII Section A. Officers, Directors, Tru | ıstees, Key Eı | mplo | эуес | es, a | nd l | High | est | Compensated Employ | rees (continued) | | | |
|------|--|-----------------------------|--------------------------------|-----------------------------|----------------|--------------|------------------------------|---------|---------------------------|-------------------------------|--------------|-----------------|----------|
| • | (A) | (B) | | (C) | | | | | (D) | (E) | | (F) | |
| | Name and title | Average | 1 | Position (check all that ap | | | | | Reportable | Reportable | E | stımat | ed |
| | | hours | (c | heck | (all | that | app | yly) | compensation | compensation | a | mount | |
| | | per week | actor | | | | | | from the | from related organizations | CON | other opensa | |
| | | Wook | ig b | 8 | | | ate | | organization | (W-2/1099-MISC) | 1 | rom th | |
| | | | Individual trustee or director | Institutional trustee | | 88 | Highest compensated employee | | (W-2/1099-MISC) | , | 1 | ganızat | |
| | | | drag t | rtona | _ | Key employee | | | | | 1 | id relat | |
| | | 1 | ig ig | Tage 1 | Officer | ke, | Highe | Former | | | org | anızat | ions |
| | | | | | | | ┝ | | <u> </u> | | | | |
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| | | | | | | | | | | | | | |
| 1b | Total | | L | L | I | · | | <u></u> | 486,339. | 0. | 2 | 6,2 | 33. |
| 2 | Total number of individuals (including but n | ot limited to th | ose | liste | ed al | | e) wh | no re | | | | | |
| | compensation from the organization | | | | | | • | | | | | | 4 |
| | | | | | | | | | | _ | | Yes | No |
| 3 | Did the organization list any former officer, | director or tru | stee | , ke | y em | plo | yee, | or h | ighest compensated en | nployee on | | | |
| | line 1a? If "Yes," complete Schedule J for such individual | | | | | | | | | 3 | | X | |
| 4 | For any individual listed on line 1a, is the su | | | | | | | | | the organization | | | ĺ |
| | and related organizations greater than \$150 | | | | | | | | | | 4 | X | <u> </u> |
| 5 | Did any person listed on line 1a receive or a | | | | rom | any | unr | elate | ed organization for servi | ces rendered to | | | ., |
| | the organization? If "Yes," complete Schedi | ule J for such _I | <u>oers</u> | <u>on</u> | | | | | | | 5 | | X |
| -Sec | tion 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 |
| RECONNECTING AMERICA | | |
| 436 14TH ST. STE. 1005, OAKLAND, CA 94615 | CONSULTING EXPENSES | 432,710. |
| M&R STRATEGIC SERVICES, 2120 L ST., NW 6TH | MEDIA ASSISTANCE & | |
| FLOOR, WASHINGTON, DC 20037 | COMMUNICATIONS OUTRE | 251,883. |
| ENVIRONMENTAL SUPPORT CENTER, 1500 MASS. | COMMUNICATIONS | |
| AVE., NW WASHINGTON D.C. STE 25, | ASSISTANCE AND OPERA | 167,145. |
| RAFFA, P.C., 1899 L STREET, NW 9TH FL, | ACCOUNTING & HUMAN | |
| WASHINGTON, DC 20036 | RESOURCES SERVICES | 156,661. |
| PUBLIC OPINION STRATEGIES, LLC, 214 NORTH | | |
| FAYETTE ST. , ALEXANDRIA, VA 22314 | MARKET RESEARCH | 140,661. |
| 2 Total number of independent contractors (including but not limited to those liste | ed above) who received more than | |
| \$100,000 in compensation from the organization 10 | | |

| Pa | rt VI | II Statement of Rever | nue | | | | | |
|--|-----------|---|-------------------|-------------------------|-----------------------------|--|---|---|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| nts | 1 a | Federated campaigns | 1a | | | | | |
| Contributions, gifts, grants and other similar amounts | b | Membership dues | 1b | 37,280. | | | | |
| ts, a | c | Fundraising events | 1c | | | | | |
| <u>a</u> gi | đ | Related organizations | 1d | | | | | |
| S.E | е | Government grants (contribut | ions) 1e | 411,653. | | | | |
| er s | f | All other contributions, gifts, gran | ts, and | | | | | |
| ξŘ | | similar amounts not included abo | ve 1f | 2671799. | | | | |
| בַּק | g | Noncash contributions included in lines | 1a-1f \$ | | | | | |
| <u>Š</u> ē | h | Total. Add lines 1a-1f | | | 3120732. | | | |
| | | | | Business Code | | | | |
| 8 | 2 a | FEE FOR SERVICE | | 900099 | 169,545. | 169,545. | | |
| و ڲٙ | ь | | | 900099 | 8,839. | 8,839. | | |
| Program Service Revenue | c | CONFERENCE REGI | STRATIO | 900099 | 5,435. | 5,435. | | |
| ě a | d | PUBLICATIONS | | 900099 | 362. | 362. | | |
| 5 E | е | | | | | | | |
| ۹. | f | All other program service reve | nue | | | | | |
| | g | Total. Add lines 2a-2f | | • | 184,181. | | | |
| | 3 | Investment income (including | dividends, intere | est, and | | | | |
| | | other similar amounts) | | • | 78,203. | | | 78,203. |
| | 4 | Income from investment of ta | x-exempt bond p | oroceeds 🕨 | | | | |
| İ | 5 | Royalties | | > | | | - | |
| i | | | (i) Real | (II) Personal | | | | |
| | 6 a | Gross Rents | | | | | | |
| | b | Less: rental expenses | | | | | | |
| | С | Rental income or (loss) | | | | | | |
| | d | Net rental income or (loss) | | > | | | | |
| | 7 a | Gross amount from sales of | (i) Securities | (iı) Other | | | | |
| | | assets other than inventory | | | | | | |
| | b | Less: cost or other basis | | | | | | |
| | | and sales expenses | | | | | | |
| | С | · · · · · · · · · · · · · · · · · · · | | L | | | | |
| | | Net gain or (loss) | | > | | | | |
| e l | 8 a | Gross income from fundraisin | g events (not | | | | | |
| Ş | | Including \$ | of | | | | | |
| Other Revenue | | contributions reported on line | 1c). See | | | | | |
| je | _ | Part IV, line 18 | a | | | | | |
| 8 | | Less: direct expenses | . b | | | | 1 | |
| | | Net income or (loss) from fund | = | | | | | |
| | 9 a | Gross income from gaming ac | | | | | | |
| | L | Part IV, line 19 | a | | | | | |
| 1 | | Less: direct expenses | b | | | • | | |
| 1 | | Net income or (loss) from gam | - | | | | | |
| | iv a | Gross sales of inventory, less and allowances | | | | | | |
| | L | | a | | | | | |
| Ì | | Less: cost of goods sold | b | | | | | |
| + | <u> </u> | Net income or (loss) from sale | | Puerson Carl | | | | |
| } | 11 a | Miscellaneous Revenu SUBLEASE INCOME | | Business Code 900099 | 54,826. | ŀ | 1 | 54,826. |
| | ıı a b | | | 900099 | 17,331. | | | 17,331. |
| | 2 | MISCELLANEOUS F | | 900099 | 9,661. | - | - | 9,661. |
| | d | 4.11 | | | 2,001. | | | 2,001. |
| | | Total. Add lines 11a-11d | | — | 81,818. | | | |
| | 12 | Total revenue. See instructions | | > | 3464934. | 184,181. | 0. | 160,021. |

Part IX Statement of Functional Expenses

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

| | All other organizations must comp 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 | 400,000. | 400,000. | 3 | |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | · | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 283,405. | 192,168. | 88,239. | 2,998. |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 1.566.050 | | | |
| 7 | Other salaries and wages | 1,566,072. | 1,295,259. | 253,727. | 17,086. |
| 8 | Pension plan contributions (include section 401(k) | 25 011 | 0.5.5.1 | | |
| _ | and section 403(b) employer contributions) | 35,211. | 26,671. | 8,066. | 474. 1,425. 1,617. |
| 9 | Other employee benefits | 126,477. | 100,788. | 24,264. | 1,425. |
| 10 | Payroll taxes | 147,995. | 118,851. | 27,527. | 1,617. |
| 11 | Fees for services (non-employees): | | | | |
| a | Management | 725 | 7.75 | | · |
| | Legal | 735. 124,321. | 735. | 104 201 | |
| | Accounting | 124,321. | | 124,321. | |
| | Lobbying Professional fundamental and a Park No. 1972 | | | | |
| | Professional fundraising services See Part IV, line 17 | | ····· | | |
| f | Investment management fees Other | 3,091,265. | 2,989,201. | 102,064. | |
| 12 | | 3,091,203. | 2,909,201. | 102,004. | |
| 13 | Advertising and promotion Office expenses | 131,322. | 86,022. | 45,290. | 10. |
| 14 | Information technology | 36,980. | 25,658. | 11,322. | 10. |
| 15 | Royalties | 30/300. | 23,030. | 11,522. | |
| 16 | Occupancy | 395,970. | 195,341. | 200,629. | |
| 17 | Travel | 295,007. | 270,638. | 23,969. | 400. |
| 18 | Payments of travel or entertainment expenses | | 2.07000 | 20/3031 | 100. |
| _ | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 112,770. | 100,283. | 12,487. | |
| 20 | Interest | · | • | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 66,350. | 40,743. | 25,607. | |
| 23 | Insurance | 11,846. | | 11,846. | |
| 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 | PUBLICATIONS | 35,089. | 34,868. | 199. | 22. |
| b | DUES AND SUBSCRIPTIONS | 14,255. | 13,856. | 399. | |
| c | PAYROLL ADMINISTRATION | 11,519. | | 11,519. | |
| d | MISCELLANEOUS | 3,297. | 1,967. | 1,330. | |
| е | INDIRECT ALLOCATION | 0. | 779,976. | -790,600. | 10,624. |
| f | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 6,889,886. | 6,673,025. | 182,205. | 34,656. |
| 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 | | | | |

| | 2009) SMART GROWTH A | MERI | CA | | 27- | 0038938 Page |
|-----|--|--|---|---|--|-----------------------|
| | Dollarde Offeet | | | (Δ) | 1 1 | (B) |
| | | | j | Beginning of year | | End of year |
| 1 | Cash · non-interest-bearing | | 5,039,961. | 1 | 2,827,11 | |
| 2 | Savings and temporary cash investments | | Ī | | | 1,297,75 |
| 3 | Pledges and grants receivable, net | | Ī | | | 376,70 |
| 4 | Accounts receivable, net | | | 12,76 | | |
| 5 | Receivables from current and former officers, di | ······································ | | ······································ | | |
| | | · · · | | | | |
| | of Schedule L | | | 5 | | |
| 6 | Receivables from other disqualified persons (as | under section | | | | |
| | | | | | | |
| | Part II of Schedule L | | , | | 6 | |
| 7 | Notes and loans receivable, net | | ļ | · <u>- · ·</u> | 7 | |
| 8 | Inventories for sale or use | | | 1 | 1 | |
| 9 | Prepaid expenses and deferred charges | | | 40,229. | | 55,18 |
| 10a | - | 1 1 | | | | · , , |
| | | 10a | 351,010. | | | |
| ь | • | 10b | 130,672. | 272,275. | 10c | 220,33 |
| 11 | • | | | | - | |
| 12 | | 227. | _ | . 10 | | |
| 13 | | | | | | |
| 14 | | · · | 1 1 | | | |
| 15 | • | | 26,751. | _ | 26,75 | |
| 16 | | al line 34 | , | | | 4,816,61 |
| 17 | | | 517,324. | | 350,04 | |
| 18 | | · · | 18 | | | |
| 19 | Deferred revenue | | 20,293. | | 53,19 | |
| 20 | Tax-exempt bond liabilities | | | | | • |
| 21 | • | Part IV of | Schedule D | | 21 | |
| 22 | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | l) | | | |
| | of Schedule L | • | , | | 22 | |
| 23 | Secured mortgages and notes payable to unrela | ated third | l parties | | | |
| | | | · – | | | , |
| | | • | | 169,816. | | 148,47 |
| 26 | • | | | 707,433. | 26 | 551,71 |
| | | ere 🕨 | X and complete | | | |
| | lines 27 through 29, and lines 33 and 34. | | | | | |
| 27 | Unrestricted net assets | | | 372,558. | 27 | 303,13 |
| 28 | Temporarily restricted net assets | | | 7,317,289. | 28 | 3,961,75 |
| 29 | Permanently restricted net assets | | | 29 | | |
| | Organizations that do not follow SFAS 117, cl | e 🕨 🔲 and | | " | | |
| | complete lines 30 through 34. | | | | | |
| 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | | juipment | fund | | 31 | |
| | Retained earnings, endowment, accumulated in | | | | 32 | |
| | | | | 7 (00 047 | | 1 264 001 |
| 33 | Total net assets or fund balances | | | 7,689,847. 8,397,280. | 33 | 4,264,895 4,816,61 |
| | 1 2 3 4 5 6 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 29 30 31 | 1 Cash · non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, diemployees, and highest compensated employer of Schedule L 6 Receivables from other disqualified persons (as 4958(f)(1)) and persons described in section 49th Part II of Schedule L 7 Notes and loans receivable, net Inventones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments · publicly traded securities 12 Investments · other securities. See Part IV, line 13 Investments · program-related. See Part IV, line 14 Intangible assets 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equipment) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete I 22 Payables to current and former officers, director highest compensated employees, and disqualified of Schedule L 23 Secured mortgages and notes payable to unrelate 24 Unsecured notes and loans payable to unrelate 25 Other liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check her lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 129 Permanently restricted net assets 120 Organizations that do not follow SFAS 117, check her lines 27 through 29, and lines 30 through 34. 28 Organizations that do not follow SFAS 117, check her lines 27 through 29, and lines 30 through 34. 29 Organizations that do not follow SFAS 117, check lines 27 through 29, and lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or ed | 1 Cash · non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, i employees, and highest compensated employees Composition of Schedule L 6 Receivables from other disqualified persons (as defined 4958(f)(1)) and persons described in section 4958(c)(3)(E Part II of Schedule L 7 Notes and loans receivable, net Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 11 Investments · publicly traded securities 12 Investments · other securities. See Part IV, line 11 13 Investments · program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. Add lines 1 through 15 (must equal line 34 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Payables to current and former officers, directors, truster highest compensated employees, and disqualified persor of Schedule L 23 Secured mortgages and notes payable to unrelated third payables to current and former officers, directors, truster highest compensated employees, and disqualified persor of Schedule L 23 Secured mortgages and notes payable to unrelated third payables to current and former officers, directors, truster highest compensated employees, and disqualified persor of Schedule L 23 Secured mortgages and notes payable to unrelated third payables to current and former officers, directors, truster highest compensated employees, and disqualified persor of Schedule L 24 Unsecured notes and loans payable to unrelated third payables to current of the payable to unrelated third payables to current of the payable to unrelated third payables to the payable to the payable to unrelated third payables to payables to current that follow SFAS 117, check here lines 27 through 29, and lines | 1 Cash · non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Receivables from their disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or other basis. Complete Part IV of Schedule D 10a 130,672. 11 Investments · publicly traded securities 11 Investments · program-related. See Part IV, line 11 13 Investments · program-related. See Part IV, line 11 14 Intangible assets 16 Other assets. See Part IV, line 11 17 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current | Cash - non-interest-bearing S, 039, 961. | 1 |

Form **990** (2009)

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

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

X Separate basis Consolidated basis Both consolidated and separate basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

consolidated basis, separate basis, or both:

Act and OMB Circular A-133?

Form **990** (2009)

За

X

SCHEDULE A (Form 990 or 990-EZ)

(* ---- --- --- --- --- --- ---- <u>--</u>---

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name of the organization

SMART GROWTH AMERICA

Employer identification number 27-0038938

| Do | rt I | Poscon | for Dublic Cha | with Ctotus (All | | | | | | | 0000 | 750 | |
|------|---------------|-----------------|-----------------------------|--|----------------|-------------------|-------------------------|-------------|--|--|---------------------|-------------|------|
| •••• | | | | rity Status (All organi | | | | | structions | | | | |
| | organ | | | n because it is: (For lines | | | | | | | | | |
| 1 | 片 | | | es, or association of chur | | | ection 17 | 0(b)(1)(A)(| i). | | | | |
| 2 | = | | | 70(b)(1)(A)(ii). (Attach So | | | | | | | | | |
| 3 | 닏 | | | oital service organization | | | | | | | | | |
| 4 | | A medical res | search organization | operated in conjunction | with a hos | spital desc | cribed in s | ection 17 | 0(b)(1)(A)(| iii). Enter t | he hospita | l's nam | ne, |
| | | city, and stat | | | | | _ | | | | | | _ |
| 5 | Ш | An organizati | on operated for the | e benefit of a college or u | niversity o | wned or c | perated b | y a govern | ımental ur | ıt describe | ed in | | |
| | _ | section 170 | (b)(1)(A)(iv). (Comp | elete Part II.) | | | | | | | | | |
| 6 | | A federal, sta | ite, or local governr | ment or governmental uni | it describe | d in secti | on 170(b)(| (1)(A)(v). | | | | | |
| 7 | X | | | ceives a substantial part | | | | | or from the | e general p | oublic desc | ribed i | ın |
| | | | b)(1)(A)(vi). (Compl | | | | • | | | | | | |
| 8 | | A community | trust described in | section 170(b)(1)(A)(vi). | (Complete | Part II.) | | | | | | | |
| 9 | | | | ceives: (1) more than 33 | | | from contr | ibutions, i | membersh | ip fees, an | d aross re | ceints | from |
| | | | | unctions - subject to certa | | | | | | | | | |
| | | | | taxable income (less sec | | | | | | | | | |
| | | | 509(a)(2). (Complet | | | . , | | | -, s.g | | | , | • |
| 10 | | | | pperated exclusively to te | st for publ | ıc safetv. | See secti e | on 509(a)(| 4). | | | | |
| 11 | | | | pperated exclusively for the | | | | | | rv out the s | ourposes d | of one | or |
| | | | | zations described in secti | | | | | | | | | • |
| | | | | g organization and compl | | | | _, | | (-)(-) | | | |
| | | a Type I | | | | | ctionally in | tegrated | | d 🔲 | Type III - 0 | Other | |
| е | | | | at the organization is not | | | - | - | r more dis | | , , | | n |
| | | | | than one or more publicly | | | | | | | | | |
| f | | | | itten determination from | | | | | | <i>σ</i> (α)(1) σ1 σ | 0000000 | (α)(Σ). | |
| · | | | rganization, check t | | uie ii to tiit | at it is a 1 | ype i, Type | ii, Oi Typ | e III | | | | |
| g | | · · · · · | - | organization accepted ar | ov alft or o | ontributio | n from ony | of the fell | lowing nor | nono? | | | |
| 9 | | | | directly controls, either al | | | _ | | | | | Yes | No |
| | | •• | | supported organization? | ione or tog | eniei win | i persons (| Jeschbed | III (II) allu | (III) DEIOW, | 110(1) | 162 | 140 |
| | | | | on described in (i) above? | , | | | | | | 11g(i) | | |
| | | | | a person described in (i) o | | 2 | | | | | 11g(ii) 11g(iii) | | |
| h | | | | n about the supported or | | | | | | | 1.19(11) | | |
| •• | | r rovide the to | Silowing information | about the supported of | yanızanon | (5). | | | | | | | |
| | N I | | 410 | (iii) Type of | (in) to the c | | (v) Did vo | notifitha | (vi) !: | the | | | |
| (1) | | of supported | (ii) EIN | organization | in col (i) lis | - | (v) Did yo organizat | | organizati | on in col | (vii) Am | | f |
| | uiya | nization | | (described on lines 1-9 | governing | • | | r support? | (i) organiz U S | ed in the | sup | port | |
| | | | | above or IRC section (see instructions)) | Yes | No | Yes | No | Yes | No | | | |
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Schedule A (Form 990 or 990-EZ) 2009 SMART GROWTH AMERICA 27-0038938 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar 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.") 1,813,786. 1,347,627 3,668,526, 10,143,024. 3,120,732, 20,093,695. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 1,813,786. 1,347,627 3,668,526 10,143,024 3,120,732 20,093,695. 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) 374,600. 6 Public support. Subtract line 5 from line 4 19,719,095. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 1,813,786 1,347,627 3,668,526 10,143,024 3,120,732 20,093,695. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 597. 78,203. 115,935. 2,070. 35,065. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 55,007. 24,551. 6,439. 7,555. 81,818. 175,370. assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 20,385,000. 1,044,348. 12 Gross receipts from related activities, etc. (see instructions) 12 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 \triangleright Section C. Computation of Public Support Percentage 96.73 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 92.44 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 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 $\triangleright [X]$ 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 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

| Sch | edule A (Form 990 or 990-EZ) 2009 art III Support Schedule for (| Organizations | Described in | Section 509(a) | (2) (Complete ont | v if you checked the bo | Page 3 |
|---|--|--|--|---|--|---|-------------------------|
| Sec | ction A. Public Support | | | | | , <u>,</u> | |
| Cale | endar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| | Gifts, grants, contributions, and | 1.7 | | (0) 2.001 | (5) 2000 | (0) 2000 | ii) rotai |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | ļ | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, 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 | | | | | l | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ızatıon's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | 1 | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| _8 | Public support (Subtract line 7c from line 6) | | | , , | | | |
| | ction B. Total Support | | · · · · · · · · · · · · · · · · · · · | | | | |
| _ | endar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| | Amounts from line 6 | | | ,,,= | | | |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b | Unrelated business taxable income | | | | | T . | |
| | (less section 511 taxes) from businesses | | 1 | | | | |
| | 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 assets (Explain in Part IV.) | | | | | | |
| 13 | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) | | | | | | |
| | assets (Explain in Part IV.) | the organization' | s first, second, thir | d, fourth, or fifth ta | ax year as a secti | on 501(c)(3) organiz | ation, |
| | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) | the organization' | s first, second, thir | d, fourth, or fifth ta | ax year as a secti | on 501(c)(3) organiz | ation, |
| 14 | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo | | | d, fourth, or fifth ta | ax year as a secti | on 501(c)(3) organiz | ation, |
| 14 Sec | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here | ic Support Pe | ercentage | | ax year as a secti | on 501(c)(3) organiz | ation, |
| 14 Sec | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public support percentage for 2009 (| ic Support Pe | ercentage livided by line 13, o | | ax year as a secti | | ▶ □ |
| 14 Sec 15 16 | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here etion C. Computation of Publ Public support percentage for 2009 (Public support percentage from 2008) | ic Support Pe line 8, column (f) c 3 Schedule A, Part | ercentage Invided by line 13, o | | ax year as a secti | 15 | ▶ □ |
| 14 Sec 15 16 Sec | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public support percentage for 2009 (Public support percentage from 2008 ction D. Computation of Inve | ic Support Pe line 8, column (f) c 3 Schedule A, Part stment Incom | ercentage livided by line 13, o i III, line 15 ne Percentage | column (f)) | ax year as a secti | 15 | ▶ □ |
| 14 Sec 15 16 Sec | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public support percentage for 2009 (Public support percentage from 2008 ction D. Computation of Inve | ic Support Pe line 8, column (f) of Schedule A, Part stment Incom 109 (line 10c, colu | ercentage livided by line 13, o : III, line 15 ne Percentage mn (f) divided by lin | column (f)) | ax year as a secti | 15 16 | ▶ □ |
| 14 Sec 15 16 Sec 17 18 | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here extion C. Computation of Publ Public support percentage for 2009 (Public support percentage from 2006 extion D. Computation of Inve Investment income percentage from | ic Support Pe line 8, column (f) of 3 Schedule A, Part stment Incom 109 (line 10c, colui 2008 Schedule A, | ercentage divided by line 13, of the line 15 de Percentage mn (f) divided by line Part III, line 17 | column (f)) ne 13, column (f)) | | 15 16 17 18 | % % % |
| 14 Sec 15 16 Sec 17 18 | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here extion C. Computation of Publ Public support percentage for 2009 (Public support percentage from 2008 extion D. Computation of Inve Investment income percentage from a 31/3% support tests - 2009. If the | ic Support Perline 8, column (f) of Schedule A, Partistment Incom 109 (line 10c, colui 2008 Schedule A, organization did | ercentage divided by line 13, of the lill, line 15 de Percentage mn (f) divided by line Part III, line 17 not check the box | column (f)) ne 13, column (f)) on line 14, and line | e 15 is more than | 15 16 17 18 33 1/3%, and line 1 | % % % |
| 14 Sec 15 16 Sec 17 18 19a | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here etion C. Computation of Public support percentage for 2009 (Public support percentage from 2008 etion D. Computation of Inve Investment income percentage from a 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box a | ic Support Perline 8, column (f) of Schedule A, Partstment Incom 109 (line 10c, colur 2008 Schedule A, organization did ind stop here. The | ercentage divided by line 13, of the Percentage mn (f) divided by line 17 Part III, line 17 not check the box of the organization quality. | column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s | • 15 is more than upported organiz | 15 16 17 18 33 1/3%, and line 1 | % % 7 is not |
| 14 Sec 15 16 Sec 17 18 19a | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here extion C. Computation of Publ Public support percentage for 2009 (Public support percentage from 2008 extion D. Computation of Inve Investment income percentage from a 31/3% support tests - 2009. If the | ic Support Perline 8, column (f) of 8 Schedule A, Parl streent Incom 109 (line 10c, column 2008 Schedule A, organization did indstop here. The organization did in organization did in organization did in organization did in the organization did in | ercentage livided by line 13, of lill, line 15 lie Percentage mn (f) divided by line 17 not check the box of organization qualitation check a box or | column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s line 14 or line 19a | o 15 is more than upported organiz a, and line 16 is m | 15 16 17 18 33 1/3%, and line 1 action fore than 33 1/3%, a | % % 7 is not |
| 14 Sec 15 16 Sec 17 18 19a | assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here etion C. Computation of Public support percentage for 2009 (Public support percentage from 2008 etion D. Computation of Inve Investment income percentage from a 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box a a 33 1/3% support tests - 2008. If the | ic Support Pelline 8, column (f) of Schedule A, Part street Incom 109 (line 10c, column 2008 Schedule A, organization did ind stop here. The organization did lock this box and stop hos hos and stop hos and stop hos hos and stop hos hos and stop hos hos | ercentage divided by line 13, of the Percentage mn (f) divided by line 17 not check the box of the organization qualitation theck a box on the organization for the organization that the organization the organization that the or | column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s i line 14 or line 19a nization qualifies a | e 15 is more than upported organiz i, and line 16 is m is a publicly supp | 15 16 17 18 33 1/3%, and line 1 ation fore than 33 1/3%, a forted organization | % % % 7 is not |

| Part IV Supplemental Information. Complete this part to provide the explanations required by Part II. line 10: Part II. line 1 | |
|---|---------------|
| Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 1 and Part III, line 12. Provide any other additional information. See instructions. | 7a or 17b; |
| SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: | |
| SUBLEASE INCOME \$54,826 | |
| REIMBURSED EXPENSES \$17,331 | |
| MISCELLANEOUS REVENUE \$9,661 | |
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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

2009

Open to Public Inspection

Department of the Treasury Internal 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 | tions: Complete Part III | | | | |
|---|------------------------------------|---------------------------|---------------------------------|---|------------|
| Name of organization | | | Emp | loyer identification numb | er |
| | ROWTH AMERICA | | | 27-0038938 | |
| Part I-A Complete if the org | janization is exempt un | der section 501(c |) or is a section 527 o | rganization. | |
| 1 Provide a description of the organiz | ation's direct and indirect politi | ical campaign activities | s in Part IV | | |
| 2 Polítical expenditures | | | ▶\$ | |) . |
| 3 Volunteer hours | | | | |). |
| | | | · | | _ |
| | <u>janization is exempt un</u> | | | | _ |
| 1 Enter the amount of any excise tax | · | | > \$ | | <u>) .</u> |
| 2 Enter the amount of any excise tax | • • | • | 5 ▶ \$ | |) . |
| 3 If the organization incurred a section | n 4955 tax, did it file Form 4720 | 0 for this year? | | | 10 |
| 4a Was a correction made? | | | | └── Yes | ło |
| b if "Yes," describe in Part IV Part I-C Complete if the org | janization is exempt un | der section 501(c | except section 501 | (c)(3) | |
| 1 Enter the amount directly expended | | | | |). |
| 2 Enter the amount of the filing organ | • • | • | | | |
| exempt function activities | , | organizations for t | \$ \$ | . (|) . |
| 3 Total exempt function expenditures | . Add lines 1 and 2. Enter here | and on Form 1120-PO | | | |
| line 17b | | | | · - | |
| 4 Did the filing organization file Form | 1120-POL for this year? | | · | Yes N | ło |
| 5 Enter the names, addresses and en | nployer identification number (E | EIN) of all section 527 p | olitical organizations to which | ch payments were made. | |
| For each organization listed, enter t | , , | • | <u> </u> | | í |
| that were promptly and directly deli | vered to a separate political org | ganization, such as a se | eparate segregated fund or a | a political action committee | Э |
| (PAC). If additional space is needed | I, provide information in Part IV | | | | |
| (a) Name | (b) Address | (c) EIN | (d) Amount paid from | (e) Amount of political | |
| | | | filing organization's | contributions received ar | ηđ |
| | | | funds. If none, enter -0 | promptly and directly delivered to a separate | |
| | | | | political organization. | |
| | | | | If none, enter -0 | |
| | | | | - | |
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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

LHA

Schedule C (Form 990 or 990-EZ) 2009

81,101.

53,821.

27,280.

f Grassroots lobbying expenditures

27-0038938 Page 3

Schedule C (Form 990 or 990-EZ) 2009 SMART GROWTH AMERICA 27-003893
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 | 1) | (1 | <u>)</u> |
|--|---|-------------------------------|---|----------------------|----------|
| | | Yes | No | Amo | ount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or | | | | |
| ł | ocal legislation, including any attempt to influence public opinion on a legislative matter | | | | |
| (| or referendum, through the use of: | | | | |
| a ' | /olunteers? | L | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| c | Media advertisements? | | | | |
| d l | Mailings to members, legislators, or the public? | | | | |
| e l | Publications, or published or broadcast statements? | | | | |
| f (| Grants to other organizations for lobbying purposes? | | | | |
| gi | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | |
| h i | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| | Other activities? If "Yes," describe in Part IV | | <u>-</u> | | |
| 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)? | | | | |
| | f "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| c | f "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| | f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | ···- |
| Part | III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). | on 501(c) | (5), or se | ction | |
| | | | | Yes | No |
| | Nere substantially all (90% or more) dues received nondeductible by members? | | 1 | - | |
| 1 1 | the paper and the following of the following the fine fine fills and the fill of the fill | | , . | | |
| | | | 2 | | |
| 2 3 | Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and III-A, lines 1 and III-A, lines 1 and III-A, lines III-A, lines III-A, lines III-A, lines III-A, | | | | |
| 2 3 Part | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." | | 3 (5), or se ne 3 is a | | |
| 2 3 Part | Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Oues, assessments and similar amounts from members | rt III-A, lir | 3 (5), or se | | |
| 2 3 Part | Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) | rt III-A, lir | 3 (5), or se ne 3 is a | | |
| 2 3 Part | Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pauryes." Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | rt III-A, lir | 3 (5), or se ne 3 is a | | |
| 2 3 Part 1 2 3 a | Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year | rt III-A, lir | 3 (5), or se ne 3 is a | | |
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| 2 3 Part 1 2 6 6 6 6 6 6 6 6 6 | Old the organization make only in-house lobbying expenditures of \$2,000 or less? Old the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Party es." Oues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year | rt III-A, lir | 3 (5), or se ne 3 is a 1 2a 2b 2c | | |
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| Part a () b () c () f () Fert Domplor any SGA | Complete if the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Partyes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Durrent year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the except the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditure next year? Taxable amount of lobbying and political expenditures (see instructions) IV Supplemental Information ete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; are additional information. ENGAGES IN LIMITED GRASSROOTS AND DIRECT LOBBYING CATION CAMPAIGNS, PRIMARILY AROUND FEDERAL TRANSPORTATION CAMPAIGNS, PRIMARILY AROUND FEDERAL TRANSPORTATION CAMPAIGNS, PRIMARILY AROUND FEDERAL TRANSPORTATION CAMPAIGNS, PRIMARILY AROUND FEDERAL TRANSPORTATION. | cess colitical ACTIVERTATIO | 3 (5), or see a 3 is a 2 2 a 2 b 2 c 3 a 4 5 ITIES N AND MEMB | , complete FOR CLIMA | TE |
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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. Open to Public Inspection

OMB No 1545-0047

Name of the organization

SMART GROWTH AMERICA

Employer identification number 27-0038938

| Par | rt I Organizations Maintaining Donor Adv | ised Funds or Other Similar Fund | s or Accounts. Complete if the |
|-----|---|--|--|
| | organization answered "Yes" to Form 990, Part IV | , line 6 | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate contributions to (during year) | | |
| 3 | Aggregate grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors | s in writing that the assets held in donor advi | sed funds |
| | are the organization's property, subject to the organization | _ | Yes No |
| 6 | Did the organization inform all grantees, donors, and don | • • • • • • • • • • • • • • • • • • • | e used only |
| | for charitable purposes and not for the benefit of the don | <u> </u> | • |
| | impermissible private benefit? | , | Yes No |
| Par | rt II Conservation Easements. Complete if the | e organization answered "Yes" to Form 990, | |
| 1 | Purpose(s) of conservation easements held by the organi | | |
| | Preservation of land for public use (e.g., recreation | | storically important land area |
| | Protection of natural habitat | | rtified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a q | ualified conservation contribution in the form | of a conservation easement on the last |
| | day of the tax year. | | |
| | • | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a |
| ь | Total acreage restricted by conservation easements | | 2b |
| С | Number of conservation easements on a certified historic | structure included in (a) | 2c |
| d | Number of conservation easements included in (c) acquir | red after 8/17/06 | 2d |
| 3 | Number of conservation easements modified, transferred | d, released, extinguished, or terminated by th | e organization during the tax |
| | year ▶ | | |
| 4 | Number of states where property subject to conservation | n easement is located > | |
| 5 | Does the organization have a written policy regarding the | periodic monitoring, inspection, handling of | |
| | violations, and enforcement of the conservation easemer | nts it holds? | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspect | ing, and enforcing conservation easements of | during the year 🕨 |
| 7 | Amount of expenses incurred in monitoring, inspecting, a | and enforcing conservation easements during | g the year ▶ \$ |
| 8 | Does each conservation easement reported on line 2(d) a | above satisfy the requirements of section 170 | O(h)(4)(B)(i) |
| | and section 170(h)(4)(B)(ii)? | | Yes No |
| 9 | In Part XIV, describe how the organization reports conser | rvation easements in its revenue and expens | e statement, and balance sheet, and |
| | include, if applicable, the text of the footnote to the organ | nization's financial statements that describes | the organization's accounting for |
| | conservation easements. | <u></u> | |
| Par | rt 脚 Organizations Maintaining Collection | s of Art, Historical Treasures, or C | Other Similar Assets. |
| | Complete if the organization answered "Yes" to Fo | orm 990, Part IV, line 8. | |
| | | | |
| 1a | If the organization elected, as permitted under SFAS 116 | | |
| | treasures, or other similar assets held for public exhibition | n, education, or research in furtherance of pi | ublic service, provide, in Part XIV, the text of |
| | the footnote to its financial statements that describes the | ese items. | |
| b | If the organization elected, as permitted under SFAS 116 | · · · · · · · · · · · · · · · · · · · | |
| | or other similar assets held for public exhibition, education | on, or research in furtherance of public service | e, 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, historica | | al gain, provide |
| | the following amounts required to be reported under SFA | AS 116 relating to these items. | |
| а | | | \$ |
| Ь | Assets included in Form 990, Part X | | ▶ \$ |

| | | ROWTH AMER | | | | | | <u>7–00</u> | | | |
|-----|--|--------------------------------------|-----------------|-------------|--------------|-------------|---|--------------|------------|---------|------|
| Pa | 付削 Organizations Maintaining C | ollections of A | rt, Histori | cal Tre | asures, c | or Othe | r Simila | r Asse | ts (cont | inued | 2 |
| 8 | Using the organization's acquisition, accessi | on, and other record | ds, check an | y of the f | ollowing tha | t are a si | gnificant u | se of its | collection | n item | าร |
| | (check all that apply): | | | | | | | | | | |
| а | Public exhibition | d | I 🔲 Loai | n or exch | ange progra | ams | | | | | |
| ь | Scholarly research | e | e 🔲 Othe | er | | | | | | | |
| С | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explai | n how they f | urther the | e organizati | on's exer | npt purpos | se in Part | XIV. | | |
| 5 | During the year, did the organization solicit of | r receive donations | of art, histori | ical treas | ures, or oth | er sımılar | assets | | | | |
| | to be sold to raise funds rather than to be ma | aintained as part of | the organizat | tion's col | lection? | | | | Yes | | No |
| Par | Escrow and Custodial Arran reported an amount on Form 990, Par | | ete if organiz | ation ans | swered "Yes | s" to Forn | n 990, Par | t IV, line 9 | or, or | | |
| 1a | Is the organization an agent, trustee, custod | an or other intermed | diary for cont | tributions | or other as | sets not | ıncluded | _ | | | |
| | on Form 990, Part X? | | | | | | | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIV | and complete the fo | ollowing table | ə: | | | | | | | |
| | | | | | | | | | Amount | t | |
| c | Beginning balance | | | | | | 1c | | | | |
| d | Additions during the year | | | | | | <u>1</u> d | | | | |
| e | Distributions during the year | | | | | | 1e | | | | |
| f | Ending balance | | | | | | 1f | | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line | 21? | | | | | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIV | | | | | | | | | | |
| Pa | TY Endowment Funds. Complete | f the organization ar | swered "Ye | s" to Forr | n 990, Part | IV, line 10 | <u>). </u> | | | | |
| | | (a) Current year | (b) Prior | year | (c) Two year | s back (| d) Three ye | ars back | (e) Four | years | back |
| 1a | Beginning of year balance | | | | | | | | | | |
| b | Contributions | | | | | | | | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | | |
| đ | Grants or scholarships | | | | | | | | | <u></u> | |
| е | Other expenditures for facilities | | | | | | | | | | |
| | and programs | | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | | |
| g | End of year balance | | | | | | | | | | |
| 2 | Provide the estimated percentage of the year | r end balance held a | as: | | | | | | | | |
| а | Board designated or quasi-endowment | | % | | | | | | | | |
| b | Permanent endowment ▶ | % | | | | | | | | | |
| C | Term endowment | % | | | | | | | | | |
| 3a | Are there endowment funds not in the posse | ssion of the organiz | ation that are | e held an | d administe | red for th | e organiza | tion | _ | | |
| | by: | | | | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | | |
| | (ii) related organizations | | | | | | | | 3a(ii) | | |
| Ь | If "Yes" to 3a(ii), are the related organizations | s listed as required o | on Schedule | R? | | | | | 3b | | |
| 4 | Describe in Part XIV the intended uses of the | organization's ende | owment func | ls | | | | | | | |
| Par | t VI Investments - Land, Building | s, and Equipm | ent. See Fo | orm 990, | Part X, line | 10. | | | | | |
| | Description of investment | (a) Cost or of basis (investigation) | | (b) Cost o | | • • | cumulated reciation | ' | (d) Bool | (valu | е |
| 1a | Land | | | , | | | | | | | |
| | Buildings | | | | | _ | | | | | |
| | Leasehold improvements | 146, | 779. | | | | 22,93 | | | | 45. |
| | Equipment | 173, | 505. | | | | 96,47 | | | | 33. |
| | Other | 30, | 726. | | | | 11,26 | 6. | 19 |),4 | 60. |
| | l. Add lines 1a through 1e. (Column (d) must e | | | 3), line 10 |)(c)) | | | | 220 | J, 3 | 38. |

Schedule D (Form 990) 2009

1. (a) Description of liability (b) Amount

Federal income taxes

DEFERRED CONSTRUCTION ALLOWANCE 144,040.

SECUIRITY DEPOSIT PAYABLE 4,437.

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

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

| | dule D (Form 990) 2009 SMART GROWTH AMERICA | | | _ | | <u>-0038938</u> | Page 4 |
|-----|--|-------------|--------------|-------------|----------|------------------|---------|
| Pai | t XI Reconciliation of Change in Net Assets from Form 990 to | Audit | ed Financ | cial Sta | atemer | | |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | | | 1 | | 3,464, | 934. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | Ţ | 2 | | 6,889, | 886. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | | | 3 | | -3,424, | 952. |
| 4 | Net unrealized gains (losses) on investments | | | 4 | | | |
| 5 | Donated services and use of facilities | | | 5 | | | _ |
| 6 | Investment expenses | | | 6 | - | | |
| 7 | Prior period adjustments | | Ī | 7 | | | |
| 8 | Other (Describe in Part XIV) | | | 8 | | | |
| 9 | Total adjustments (net). Add lines 4 through 8 | | Ī | 9 | | | 0. |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and | id 9 | | 10 | | -3,424, | 952. |
| Par | XII Reconciliation of Revenue per Audited Financial Stateme | ents W | ith Reven | ue pei | Retur | n | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | | 1 | 3,466, | 134. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | | | - |
| а | Net unrealized gains on investments | 2a | | | ļ | | |
| b | Donated services and use of facilities | 2b | | 1,200 | J. | | |
| С | Recoveries of prior year grants | 2c | - | | 7 | Ì | |
| đ | Other (Describe in Part XIV.) | 2d | | | | | |
| е | Add lines 2a through 2d | ستت | | | 2e | 1, | 200. |
| 3 | Subtract line 2e from line 1 | | | | 3 | 3,464, | 934. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | | <u> </u> | _ |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | ŀ | | |
| b | Other (Describe in Part XIV.) | 4b | | _ | | | |
| | Add lines 4a and 4b | | | _ | 4c | | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | | 5 | 3,464, | 934. |
| | t XIII Reconciliation of Expenses per Audited Financial Statem | ents V | Vith Expe | nses p | er Retu | | |
| 1 | Total expenses and losses per audited financial statements | | | | 1 | 6,891, | 086. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25. | | | | | | |
| а | Donated services and use of facilities | 2a | | 1,200 |). | | |
| b | Prior year adjustments | 2b | | | | | |
| c | Other losses | 2c | | | | | |
| d | Other (Describe in Part XIV.) | 2d | | | | | |
| е | Add lines 2a through 2d | | | | 2e | 1, | 200. |
| 3 | Subtract line 2e from line 1 | | | | 3 | 6,889, | 886. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 | | | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | | | |
| | Other (Describe in Part XIV.) | 4b | | | | | |
| | Add lines 4a and 4b | | | | 4c | | 0. |
| | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | | | 5 | 6,889, | |
| | t XIV Supplemental Information | | | | | | |
| | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II | II. lines 1 | a and 4: Par | t IV, lines | s 1b and | 2b; Part V, line | 1; Part |
| | e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp | | | | | | |
| | EDULE D, PART X, LINE 2, FIN48 FOOTNOTE. | | | | | | S |
| | | | | | | | |
| REC | UIRE RECOGNITION IN THE STATEMENT OF FINA | NCIA | L POSI | rion | FOR | ANY | |
| | | | | | | | |
| JNC | ERTAIN TAX POSITIONS. THE THRESHOLD FOR | RECO | GNIZINO | TAX | K RET | URN | |
| | | | | | | | |
| 209 | SITIONS IS DEFINED AS "MORE LIKELY THAN NO | T" T | HAT THE | E POS | SITIO | N IS | |
| | | | | | | | |
| SUS | TAINABLE, BASED ON ITS TECHNICAL MERITS. | IN | THE OP | INION | 1 OF | MANAGEME | NT |
| | | | | | | | |
| THE | APPLICATION OF THESE STANDARDS RESULTS I | N NO | IMPACT | ON T | THE | FINANCIA | ${f L}$ |
| | | | <u></u> | | | | |
| STA | TEMENTS OF SMART GROWTH. | | | | | | |

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

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

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

| OMB No 1545,0047 | 2009 | Open to Public |
|------------------|------|----------------|
| | | |

ջ Employer identification number Schedule I (Form 990) 2009 27-0038938 Inspection (h) Purpose of grant TRANSPORTATION FOR or assistance AMERICA EXPENSES X Yes recipient that received more than \$5,000. Check this box if no one recipient ame and address of organization (b) EIN (c) IRC section if applicable are and address of organization (c) IRC section if applicable assistance or government (c) IRC section if applicable (c) IRC section (d) Amount of assistance (e) Amount of assistance (e) Amount of assistance (f) Method of (g) Description of (h) Purpose (organization (book, appraisal, assistance (c) IRC section (d) Amount of assistance (e) Amount of assistance (f) Method of (h) Purpose (organization (book, appraisal, assistance (c) IRC section (d) Amount of assistance (e) Amount of assistance (f) Method of (h) Purpose (organization (book, appraisal, assistance (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose (organization (book, appraisal, assistance (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose (organization (book, appraisal, assistance (c) IRC section (d) Amount of (e) Amount of (f) Method of Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantlate the amount of the grants or assistance, and the selection o Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. 400,000 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of section 501(c)(3) and government organizations SMART GROWTH AMERICA General Information on Grants and Assistance 52-2020542 criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization ORGANIZATION - 436 14TH STREET, RECONNECTING AMERICA, 501 C(3) STE 1005 - OAKLAND, CA 94612 Name of the organization Part Part #

Schedule I (Form 990) 2009

932102 02-02-10

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► 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

SMART GROWTH AMERICA

Questions Regarding Compensation

Employer identification number 27–0038938

| | | | Tu | T |
|----|--|----|-----|---------------|
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, | Γ. | Yes | No |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | - | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| | r disorial services (e.g., maid, chadheur, cher) | | | |
| þ | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or | | | |
| | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, | 15 | | |
| | trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | | |
| | The state of the s | - | | |
| 3 | indicate which, if any, of the following the organization uses to establish the compensation of the organization's | | | |
| | CEO/Executive Director, Check all that apply. | | | |
| | Compensation committee Written employment contract | | | |
| | Independent compensation consultant X Compensation survey or study | | | |
| | Form 990 of other organizations X Approval by the board or compensation committee | | | |
| | The board of compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing | | | |
| | organization or a related organization: | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | X |
| | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | | X |
| | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | $\frac{1}{X}$ |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | 10 | | |
| | , and the special and special and series to the series and series are series and series and series and series and series and series and series and series and series are series and series and series and series are series and series and series are series and series and series are series and series and series are series and series and series are series and series and series are series and series and series are series and series are series and series and series are series and series are series and series are series and series are series and series are series and series are series are series and series are series and series are series are series and series are series are series are series and series are series are series are series are series are series are series are series are series are series are series are series are series | | | |
| | Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the revenues of: | | | |
| а | The organization? | 5a | 1 | X |
| Ь | Any related organization? | 5b | | X |
| | If "Yes" to line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | 1 | |
| | contingent on the net earnings of: | | - 1 | |
| а | The organization? | 6a | 1 | X |
| b | Any related organization? | 6b | | X |
| | If "Yes" to line 6a or 6b, describe in Part III. | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments | |] | |
| | not described in lines 5 and 6? If "Yes," describe in Part III | 7 | - | X |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | _ |
| | initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | | X |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in | | | |
| | Regulations section 53 4958-6(c)? | a | | |

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

Schedule J (Form 990) 2009

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

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

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

| | B) |) Breakdown of | (B) Breakdown of W-2 and/or 1099-MISC compensation | SC compensation | (C) | (Q) | (E) | (F) |
|-------------------|---------------|--------------------------|--|-------------------------------------|--|------------------------|--------------------------------|--|
| (A) Nате | O | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | Hetirement and other deferred compensation | Nontaxable benefits | Total of columns (B)(I)-(D) | Compensation reported in prior Form 990 or Form 990-EZ |
| | | 152,371. | 0 | | 4,579. | 4,160. | 161,110. | 116,146. |
| GEOFFREY ANDERSON | (E) (E) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| |) (ii) | | | | | | | |
| | (6) | | | | | | | |
| | (<u>ii</u>) | | | | | | | |
| | (6) | | | | | | | |
| | <u>(ii)</u> | | | | | | | |
| | <u> </u> | | | | | | | |
| | (E) | | | | | | | |
| | | | | , | | | | |
| | ▣ | | | | | | | |
| | (1) | | | | | | | |
| | <u>(E</u> | | | | | | | |
| | € | | | | | | | |
| 3 | (ii) | | | | | | | |
| | <u> </u> | | | | | | | |
| i) | (i) | | | | | | | |
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| ij | (E) | | | | | | | |
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|) | (1) | | | | | | | |
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| 9 | (E) | | | | | | | |

Schedule J (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SMART GROWTH AMERICA

Employer identification number 27-0038938

| FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: |
|--|
| AND LOCAL GROUPS WORKING ON BEHALF OF THE ENVIRONMENT, HISTORIC |
| PRESERVATION, SOCIAL EQUITY, LAND CONSERVATION, NEIGHBORHOOD |
| REDEVELOPMENT, FARMLAND PROTECTION, LABOR AND TOWN PLANNING. |
| |
| FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS DISTRIBUTED |
| TO THE BOARD OF DIRECTORS AUDIT COMMITTEE FOR REVIEW AND COMMENT PRIOR TO |
| FILING. |
| |
| FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTORS AND TRUSTEES |
| ARE REQUIRED TO SIGN A DISCLOSURE FORM RELATED TO CONFLICTS OF INTEREST ON |
| AN ANNUAL BASIS. THE DISCLOSURES ARE REVIEWED AND ANY POTENTIAL CONFLICTS |
| ARE ADDRESSED ACCORDING TO THE ORGANIZATION'S BYLAWS. |
| |
| FORM 990, PART VI, SECTION B, LINE 15: EXECUTIVE COMMITTEE REVIEW |
| CANDIDATES AND COMPENSATION FOR THE CEO AND PRESIDENT AND APPROVES |
| COMPENSATION BASED ON COMPARABLE DATA AVAILABLE. ALL EXECUTIVE COMMITTEE |
| MEETINGS AND DECISIONS ARE DOCUMENTED IN MEETING MINUTES. |
| |
| FORM 990, PART VI, SECTION C, LINE 19: SGA MAKES ITS GOVERNING DOCUMENTS, |
| CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE |
| PUBLIC UPON REQUEST. |
| |
| |
| |