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Return of Organization Exempt From Income Tax 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements For the 2010 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number American Principles in Action Doing Business As 26-4613397 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Termin-1420 K Street, NW, Suite 300 202-503-2010 Amended City or town, state or country, and ZIP + 4 G Gross receipts \$ 1,069,235. Applica-Washington, DC 20005 H(a) Is this a group return pending F Name and address of principal officer: Francis Cannon Yes X No for affiliates? same as C above H(b) Are all affiliates included? Yes Tax-exempt status. \square 501(c)(3) \square 501(c) (4) \triangleleft (insert no.) \square 4947(a)(1) or If "No," attach a list, (see instructions) J Website: ▶ www.americanprinciplesinaction.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Year of formation: 2009 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities To promotoe and advocate for a return to America's founding principles. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 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) 3 Total number of individuals employed in calendar year 2010 (Part V. line 2a) 0 5 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (ne 12 0. b Net unrelated business taxable income from Form 990-T, 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 170,000 1,069,235. Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 11 170,000. 1,069, 5. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column ATAmes its) 0. Benefits paid to or for members (Part IX, column (A) fine 4F VED 0. 0. 71,000. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 289,151. 16a Professional fundraising fees (Part IX, column (A), line [Fe)() 2 2015 0. b Total fundraising expenses (Part IX, column (D), line 25) 0. 97,529. 718,552. 17 Other expenses (Part IX, column (A), lines 11a-11d, TPR-40RANCH 1,007,703. 168,529 Total expenses Add lines 13-17 (must equal Part IX, color of Annine 25) Revenue less expenses. Subtract line 18 from line 12 1,471 61,532. Ssets of **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 1.471 63,003. Total liabilities (Part X, line 26) 0. 471. Net assets or fund balances. Subtract line 21 from line 20 63,003. ├Part II | Signature Block under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is eclarat<u>ion of prepare</u>r (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here Andresen Blom, Executive Director Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Cynthia B Laporta, CPA Paid self-employed Firm's name Kositzka, Wicks and Company Preparer Firm's EIN

Sn

Phone no. (703) 642-2700

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address 5500 Cherokee Ave, Suite 400 Alexandria, VA 22312

Use Only

<u>4e</u>	i otal program service expenses ► 084, 910.		90 (2010)
40	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 884,916.		
4d	Other program services. (Describe in Schedule O)	`	
		. 11270-	
4c	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$)
			 -
4b	(Code:) (Expenses \$ including grants of \$) (R	evenue \$)
	sovereignty in education; and 6) promoting public pension	on reform.	
	return to the gold standard and sound money; 5) advocat	ing parental	
	Fiorina's Senate campaign based on her positions on issue to legislators regarding immigration; 4) promoting and		
	outreach in CA; 2) independent expenditure campaign in	support of C	arly
	US share the same foundational principles and reach out shared values, including conducting a "Vote Your Values		s an
	Educated the public and advocated for: 1) ways in which	Latinos in	the
4a	(Code) (Expenses \$ <u>884,916.</u> including grants of \$) (Re)
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported.	grants and	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	LYes	X No
	If "Yes," describe these new services on Schedule O.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes	X No
	principles.		
•	To promotoe and advocate for a return to America's found	ding	
1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission		
Pai	rt III Statement of Program Service Accomplishments		r
	1990 (2010) American Principles in Action	<u> 26-4613397</u>	Page 2

Page 3

	·			T
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	270		
C	any tax-exempt bonds?	24c		
A	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	270		
258	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
_	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	20a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200	ļ	
26	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
27	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	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	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
c				
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			T
O.E	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
04	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	x	1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		х
a				
a	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
50		36	1	x
37	If "Yes," complete Schedule H, Part V, line 2. Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	"	 	<u> </u>
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
	110te. All 1 of the 200 lileto are required to complete ochedule o		990	(2010)

Form 990 (2010) American Principles in Action 26-4613397 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? <u>1c</u> 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х За If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **b** If "Yes," enter the name of the foreign country: See instructions for 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 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? X 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? **7**b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? Х 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7f** If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter 11 Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers.

Form 990 (2010)

14a

X

c Enter the amount of reserves on hand

a Is the organization licensed to issue qualified health plans in more than one state? ...

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

Note. See the instructions for additional information the organization must report on Schedule O.b Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13b

13c

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

	Check if Schedule O contains a response to any question in this Part VI				X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	3			
b	Enter the number of voting members included in line 1a, above, who are independent	3			_ ~
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct su	pervision			
	of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fil	ed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		_X_
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of	the			
	governing body?		7a		X
b	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:				-
а	The governing body?		_8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	ne			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	·	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode.)			ı
				Yes	No
	Does the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	•	10b	77	
_	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the fo	rm?	11a	X	 -
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	, , , ,	-	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give its	e	1		
	to conflicts?		12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," des	cnbe			
40	in Schedule O how this is done		12c		37
13	Does the organization have a written whistleblower policy?	•	13		X
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and approval by indep	pendent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		45-		
a	The organization's CEO, Executive Director, or top management official		15a		X
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		15b		
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with				
···a	taxable entity during the year?	a	16a		X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its p		IVa	-	122
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's				
	and the second state of th	•	16b		
Sec	exempt status with respect to such arrangements?			_	
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	ls only) available	for		
.5	public inspection. Indicate how you make these available. Check all that apply.	jo omyj avallable	,01		
	Own website 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 notice a	nd fina	ncial	
13	statements available to the public	interest policy, a	iu iiiia	iriciai	
20	State the name, physical address, and telephone number of the person who possesses the books and record.	s of the organiza	tion: 🕨	•	
	Andresen Blom - 202-503-2010	o or the organiza			
	1420 K Street, NW, Suite 300, Washington, DC 20005				
	Delegation and the second secon	·	<u> </u>	000	(2010)

032006 12-21-10

Form 990 (2010) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B))			(D)	(E)	(F) Estimated
Name and Title	Average hours per	(C)		Posi		app	kΛ	Reportable compensation	Reportable compensation	amount of
	week (describe hours for related organizations in Schedule O)	ustee or director	Institutional trustee	Officer		compensated te		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Francis P. Cannon										
President	10.00	X		X				47,000.	106,500.	0
Luis Tellez										
Director	1.00	X						0.	0.	0
Ellen Barrosse										
Director	1.00	X						0.	0.	0
Sean Filer										
Director	1.00	X	L	_	L			0.	0.	0
Andresen Blom								•		
Executive Director	15.00	l		X				56,250.	93,750.	0
Alfonso Auguilar										_
Executive Director, Latino	40.00		ļ		<u></u> .	X		28,000.	74,500.	0
Emmett McGroarty					İ					
Director, Preserve Innocence	40.00		_			X		20,000.	96,000.	0
Jeff Bell										
Policy Director	40.00				_	X	<u> </u>	30,000.	90,000.	0
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Part VII Section A. Officers, Directors, (A)	(B)	npic	oyee		<u>nd I</u> C)	nigh	est	Compensated Employ (D)	ees (continued) (E)	$\overline{}$	(F)	
Name and title	Average			Pos	itior			Reportable	Reportable	E	stimate	ed
	hours per week (describe hours for related organizations in Schedule O)	ustee or director	Institutional trustee	all 1		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	con f orç ar	mount other npensa from the ganizat nd relat janizati	ation e ion ied
		_										
		_										_
1b Sub-total c Total from continuation sheets to Part	VII, Section A					<u> </u>		181,250.	460,750 0		<u> </u>	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but compensation from the organization	<u>.</u>	nose	liste	ed al	bove	e) wh	o r	181,250. eceived more than \$100	460,750 ,000 in reportable			0.
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J fo			, ke	y em	plo	yee,	or h	nighest compensated en	nployee on	3	Yes	No X
4 For any individual listed on line 1a, is the and related organizations greater than \$	sum of reportab	le co							the organization	4	x	
5 Did any person listed on line 1a receive of rendered to the organization? If "Yes," co							elat	ted organization or indivi	dual for services	5		х
Complete this table for your five highest the organization.	compensated inc	depe	ende	nt c	onti	acto	rs t	that received more than	\$100,000 of compe	nsation	from	<u> </u>
(A) Name and busine	ss address							(B) Description of s	ervices	(compe	C) ensatio	n
Capital City Partners, NW #700, Washington, DC) I	H S	Sti	ree	et,	- 1	Consulting		11	.3,5	00.
												_
		_										
2 Total number of independent contractors		ot lii	mite	d to	tho	se lis	ted	i above) who received m	ore than			_
\$100,000 in compensation from the orga	nization					<u> </u>				Form	990 (2010)

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Part IX | Statement of Functional Expenses

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

	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21			_	
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	181,250.	141,250.	40,000.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	105,750.	105,750.	·	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	2,151.		2,151.	
0	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	1,820.		1,820.	
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	249,706.	237,220.	12,486.	
12	Advertising and promotion				
13	Office expenses	5,930.		5,930.	
14	Information technology	43,134.	28,037.	15,097.	
15	Royalties				
16	Occupancy	22,890.		22,890.	
17	Travel	136,302.	122,614.	13,688.	
18	Payments of travel or entertainment expenses				<u> </u>
	for any federal, state, or local public officials		1	:	
19	Conferences, conventions, and meetings	13,950.	5,225.	8,725.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	Media promotions	240,736.	240,736.		
b	Membership dues	2,500.	2,500.		
c	Printing	1,584.	1,584.		
d	1111111		2,302.		
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,007,703.	884,916.	122,787.	
<u>26</u>	Joint costs. Check here Jif following SOP	1,001,1031	003,910.		
£ ♥	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

032010 12-21-10

Pai	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	1,471.	1	63,003.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II	·		
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			•
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			•
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment. cost or other			
		basis. Complete Part VI of Schedule D 10a			*
	b	Less: accumulated depreciation 10b		10c	<u> </u>
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,471.	16	63,003.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	—a
	19	Deferred revenue		19	·
	20	Tax-exempt bond liabilities	· · · · · · · · · · · · · · · · · · ·	20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
ä		highest compensated employees, and disqualified persons. Complete Part II			-
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	_0.	26	0.
		Organizations that follow SFAS 117, check here X and complete			
င်လေ		lines 27 through 29, and lines 33 and 34.	1 471		62 002
<u>a</u>	27	Unrestricted net assets	1,471.	27	63,003.
Net Assets or Fund Balances	28	Temporarily restricted net assets		28	
미	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117, check here and			
Š	00	complete lines 30 through 34.		_	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	·
Net	32	Retained earnings, endowment, accumulated income, or other funds	1 471	32	62 002
_	33	Total net assets or fund balances	1,471.	33	63,003.
	34	Total liabilities and net assets/fund balances	1,471.	34	63,003. Form 990 (2010)

Form	990 (2010) American Principles in Action	26-461	3397	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,069		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,007	<u>',7</u>	03.
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>32.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	. , 4	<u>71.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			<u>0.</u>
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	63	, 0	<u>03.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other				1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			l
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	a no t			ĺ
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ıgle Audıt	1 1		ĺ
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			l
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		Щ_
			Form 9	90 (t	2010)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

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 V, 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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Costing E01(a)(A) (E) or (G) arganize	· · · · · ·	ky rux,, or r orm oso i	LL, I dit V, inte ood (i roxy i	ax,, alon
 Section 501(c)(4), (5), or (6) organization 	tions Complete Part III		Emple	over identification number
•	n Principles in	Action		26-4613397
Part I-A Complete if the org	ganization is exempt unc	der section 501(c)	or is a section 527 or	rganization.
			,	
Provide a description of the organize	ration's direct and indirect politi	cal campaign activities	in Dart IV	
•	ation's direct and indirect point	cai campaign activities		243,544.
2 Political expenditures				
3 Volunteer hours	•			
Part I-B Complete if the org	ganization is exempt un	der section 501/c	\(3)	
1 Enter the amount of any excise tax			<u>,,,⊙,.</u> ▶\$	
2 Enter the amount of any excise tax				
3 If the organization incurred a section			· · · · · ·	Yes No
4a Was a correction made?	11 4555 tax, did it lie i 0111 4720	o for triis year.		Yes No
b if "Yes," describe in Part IV			-	Lites Linu
Part I-C Complete if the org	ganization 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	, , ,	•		
• •	ization's lunds contributed to o	uner organizations for s	\$ \$	
exempt function activities	Add been 4 and 0. Fater have			
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
line 17b			•	
4 Did the filing organization file Form	•			Yes No
5 Enter the names, addresses and er	• •	•	-	
made payments. For each organiza				
contributions received that were pr political action committee (PAC) If			•	te segregated fulld of a
· · · · · · · · · · · · · · · · · · ·		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
			filing organization's funds if none, enter 0.	promptly and directly
				delivered to a separate
				political organization.
				If none, enter -0
		7-11-17-11-11-11-11-11-11-11-11-11-11-11		
-				
	I			l .

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

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Part II-A Complete if the organization	American P	rinciples i	n Action on 501(c)(3) and file	26 - 4 ed Form 5768	4613397 Page 2
(election under sect	tion 501(h)).				
A Check if the filing organizat	ion belongs to an affil	lated group			
B Check 🕨 🔲 if the filing organizat	ion checked box A ar	nd "limited control" pr	ovisions apply.		· · · · · · · · · · · · · · · · · · ·
	s on Lobbying Exper itures" means amou	nditures ints paid or incurred.	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	ence a legislative boo	ly (direct lobbying)			
c Total lobbying expenditures (add lir	nes 1a and 1b)				
d Other exempt purpose expenditure	s				
e Total exempt purpose expenditures	s (add lines 1c and 1d)			ļ
f Lobbying nontaxable amount. Ente	r the amount from the	e following table in bo	th columns		
If the amount on line 1e, column (a) or	(b) is: The lob	bying nontaxable am	nount is:		
Not over \$500,000	20% of	the amount on line 1e	·		
Over \$500,000 but not over \$1,000	,000 \$100,00	0 plus 15% of the ex	cess over \$500,000.	-	
Over \$1,000,000 but not over \$1,50	00,000 \$175,00	0 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000 \$225,00	0 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000	\$1,000,0	000			
g Grassroots nontaxable amount (en	tor 250/ of line 16				
g Grassroots nontaxable amount (en: h Subtract line 1g from line 1a If zero	•				
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than zer	•	line 1), did the organiz	ration file Form 4720		
reporting section 4911 tax for this					Yes No
	•	eraging Period Under	r Section 501(h)	•	
, ,	ations that made a s	ection 501(h) electio	n do not have to comp es 2a through 2f on pag		
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	(ь) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))	-				
c Total lobbying expenditures			<u> </u>		
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
					1
f Grassroots lobbying expenditures					

		(a)	<u>(t</u>	o)
		Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of.				
а	Volunteers?		l		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504()	(5)	L	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on suric	(5), or se	ection	
	001(0)(0).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	, , ,	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	2		_
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		2		_
1	"Yes." Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year	_	2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			-
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?		. 4		
	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; an	d Part II-B,	line 1ı Also	o, complete	this part
	y additional information.	_			
Mac	le independent expenditures in support of Carly Fio	<u>rina,</u>	candi	<u>date f</u>	or
_					
Ser	ate in CA			_	
		 .			

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.

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

Attach to Form 990. See separate instructions.

Employer identification number

American Principles in Action 26-4613397 **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 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 Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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: Receive a severance payment or change-of-control payment from the organization or a related organization? X 4a X Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: The organization? X 5a Х Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Х 6a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 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 Х 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III X 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2010

Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies 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)	(O)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nontaxable benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	Ξ	47,000.	0	0	0	0.	47,000.	0
1 Francis P. Cannon	: 🖹	106,		0	0	0.	106,500.	0.
	ε			0	0	0	7	0
2 Andresen Blom	(E)	93,		0	0	0	~	0
	Ξ	28,		0	0	0		0.
3 Alfonso Auguilar	: <u>(ii</u>	74,	0	0	0	0	74,500.	0.
	Ξ	20,	• 0	0	0	0.		0
4 Emmett McGroarty	≘	96	0	0	0	0	٠,	0
	Ξ	30,	0.	0.	0	0	30,000.	0
s Jeff Bell	▣	.000,06	0	0.	0	0	.000,06	0.
	Ξ							
9	▤							
	Ξ							
7	≘							
	Ξ							;
8	Ξ							
	Ξ							
6	(ii)							
	Ξ							
10	≘							
	Ξ							
11								
	Ξ							
12	Ξ							
	Ξ							
13	Ξ							
	Ξ							
14	≘							
	Ξ							
15	Ξ							
	Ξ							
16	≞							

Schedule J (Form 990) 2010

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

➤ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

2010

Open To Public Inspection

Name of the organization	•							Employer	identif	ication r	umber
Am	<u>erican l</u>	in Act	ion			26-46	1339) 7			
Part I Excess Benefi	t Transaction	ons (section	on 501(c)(3) and sectio	n 501(c)(4) organization	ns only).					
Complete if the org	anızatıon answ	ered "Yes'	on Form	990, Part IV,	line 25a or 25b, or Fo	m 990-E2	, Par	t V, line 40)b		
1 (a) Name of d	squalified pers	on			(b) Description	of transac	tion			(c) Con	
	.oquaou poro				(b) becomplien					Yes	No
						_					
										 	
										-	
			-							 	
2 Enter the amount of tax im	posed on the o	rganization	manager	s or disqualifi	ied persons during the	e vear und	ler				·
section 4958	,			· · · · · · · · · · · · · · · · · ·				. > \$			
3 Enter the amount of tax, if	any, on line 2, a	above, reim	bursed by	the organiza				▶ \$			
					<u>-</u>						
Part II Loans to and/	or From Inte	erested	Persons	5.							
					line 26, or Form 990-E	1			aravad		
(a) Name of interested	(b) Loan to	nal principal nount	(d) Balance due	(e) defai		by bo	oroved ard or	(g) W agreei			
person and purpose	person and purpose the organization?							- I -	uttee?_	 	
	То	From				Yes	No	Yes	No	Yes	No
						1				+	
										_	
				·		+				+-	
						1					
			<u> </u>		<u> </u>						
Total	· · · · · · · · · · · · · · · · · · ·			<u> </u>							
Part III Grants or Ass		_									
Complete if the org		<u>/ered "Yes'</u> [1				
(a) Name of interested		een interested person ganization	and			iount ar assistar	nd type o	T			
				+							
				•			+				
							1				
											
				· ·							
							_				
							\bot				

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

Schedule L (Form 990 or 990-EZ) 2010

SCHEDULE M (Form 990)

Noncash Contributions

2010

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

American Principles in Action Employer identification number 26-4613397

ı dı	ti Types of Froperty							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1q	(d) Method of de noncash contribu	etermin		:s
1	Art - Works of art							
2	Art - Historical treasures	-	W					
3	Art - Fractional interests	-			_			
4	Books and publications				-			
5	Clothing and household goods				-	•		
6	Cars and other vehicles	_	·					
7	Boats and planes						-	
8	Intellectual property					•	•	
9	Securities - Publicly traded	X	1	193,085.	Mean value			
10	Securities - Closely held stock			-1, -				
11	Securities - Partnership, LLC, or							
	trust interests .			,				
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other			··				
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts	- .						
23	Scientific specimens .							
24	Archeological artifacts							
25	Other ()	 .						
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz		•					
	for which the organization completed Form 828	83, Part IV, I	Donee Acknowledg	gement 29		-	r	
							Yes	No
30a	During the year, did the organization receive by							
	at least three years from the date of the initial of	contribution,	, and which is not i	required to be used for exen	npt purposes for			
_	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.					-		~
31	Does the organization have a gift acceptance p					31		_X_
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash				
_	contributions?		••			32a		<u> X</u>
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) f	or a type of proper	ty for which column (a) is ch	ecked,		ļ	ļ
	describe in Part II.					ŀ		

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Schedule M (Form 990) (2010)

SCHEDULE O

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number American Principles in Action 26-4613397 Form 990, Part VI, Section A, line 8b: There are no committees to the board. Form 990, Part VI, Section B, line 11: The board of directors will review the Form 990. Form 990, Part VI, Section C, Line 19: Governing documents, internal policy statements and financial statements are not available to the public, except as required by law.

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

Related Organizations and Unrelated Partnerships

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

2010 Open to Public Inspection

OMB No 1545-0047

Employer identification number 26-4613397Direct controlling entity End-of-year assets Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) American Principles in Action Primary activity Name, address, and EIN of disregarded entity Name of the organization Part

(2) Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) 9 9 ₹ 3 3 Part II

) 12(b)(13) billed ty?	No	i :		×				
(g) Section 512(bX13) controlled entity?	Yes							
(f) Direct controlling entity								
P	501(c)(3))							
(d) Exempt Code section				501(c)(3)				
(c) Legal domicile (state or foreign country)				District of Columbia 501(c)(3)				
(b) Primary activity				Education				
(a) Name, address, and EIN of related organization		American Principles Project - 26-4442148	1420 K Street, NW, Suite 300	Washington, DC 20005				

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Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year)

Percentage ownership Schedule R (Form 990) 2010 Seneral or Percentage managing ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 3 Yes No Share of end-of-year assets Code V.UBI amount in box 20 of Schedule K-1 (Form 1065) Share of total income ate allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets **e** Direct controlling entity Share of total income \boldsymbol{arphi} Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) <u>ပ</u> e 27 Primary activity (d)
Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization æ 032162 12-21-10 Part IV

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Yes No

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

omplete line 1 if any entity is listed in Parts II, III, or IV of this schedule	ring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
Note. Complete line 1	 During the tax ye

- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 - b Giff, grant, or capital contribution to other organization(s)
 c Giff, grant, or capital contribution from other organization(s)
 - d Loans or loan guarantees to or for other organization(s)
 - e Loans or loan guarantees by other organization(s)
- f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
 - h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)

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- k Performance of services or membership or fundraising solicitations for other organization(s)
- 1 Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- o Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

thresholds	4 3
inships and transaction	
ing covered relatio	_
te this line, includ	
who must comple	í
," see the instructions for information on	
If the answer to any of the above is "Yes,	
8	

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) American Principles Project	M	16,850.FMV	FMV
(2) American Principles Project	N	242,000.	242,000.% of salaries
(3) American Principles Project	0	1,150.FMV	FMV
(4)			
(5)			
(9)			

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

that was not a related organization. See instructions regarding exclusion for certain investment partnerships	usion for certain investment partners	sdius					
(a)	(2)	(0)	<u>©</u>	(e)		(6)	
Name, address, and EIN	Primary activity		Are all partners' section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI	General or managing
of entity		(state or toreign	organizations?	year assets		of Schedule K-1	parti
		(famo)	Yes		Yes	(1000)	Yes
							-
							-
	-						-

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Part VII	Supplemental Infor				
	Complete this part to pro	vide additional info	rmation for responses	to questions on Schedule R (see in	structions)
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