

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



990 Form

## **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

2011

Department of the Treasury

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

Open to Public Inspection

	ai Novoilo				· ·									
<u>A</u> F	or the	2011 calend				·		i, and e	nding			<u>_</u>	20	
<b>B</b> 0	For the 2011 calendar year, or tax year beginning , 2011, and er  Check if applicable												er identifical	tion no.
_ A	ddress cl	change Doing Business As										36-39	75580	
N	lame cha	nge	Number a	and street (or P O bo	ox if mail is not delivere	ed to street address)			Room/s			E Teleph	one number	
☐ Ir	nitial retur	m	9900	MAIN STREE	ET		. <u>-</u>		303					
П т	erminate	d	City or tov	wn, state or country,	and ZIP + 4								826,94	2
A	mended	return	Fair	fax, VA 22	031							G Gross receipts \$		
$\overline{\Box}$ A	pplication	n pending	F Name a	and address of princi	ipal officer			_						
_									H(a) Is this a group return for affiliates? Yes					X No
ī	ax-exemp	ot status	501(c)(3)	X 501(c) ( 4	) <b>(</b> insert no )	4947(a)(1) or	527		H(b) Are all affiliates included? Yes					No.
J V	Vebsite:	▶ get	liberty						If "No," attach a list (see instructions)  H(c) Group exemption number					
		<del></del> =	Corporation		sociation Other	<b>•</b>	L Year of for	nation 1	994	M State	of leg	gal domicile	DC	
Pai		Summar							· · · · · · · · · · · · · · · · · · ·	<del></del>	•	<u> </u>		
<u> </u>				anization's mis	ssion or most sign	uficant activities	TO ADVOCAT	E FOR	VARIO	ous iss	SUE	S RELAT	'ING TO	<u> </u>
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Fe					ın calendar year			<del>- 1</del>			5	<u> </u>		10
ິ່ <b>ຂ</b>	6	Total numbe	r of volunte	eers (estimate i	if necessary)						6			
•	7a	Total unrelat	ed busines	ss revenue from	n Part VIII, colum	n (C), line 12		$\{\}\}$			7a	1	3	6,145
Ď	b	Net unrelated	d business	taxable incom	e from Form 990-	T,∫line 34	·n·f· • 649 · ·				7b	)		0
<u> </u>						A NOV	BI TAIL	92		rior Year		C	urrent Year	
ַ נ	8	Contributions	s and grant	ts (Part VIII, lin	e 1h)		_ 0 0 _ 0, & _ 0 0 0 0			9,049	,29	6	79	0,797
<b>D</b> •														0
) e i n	10	Investment ii	rogram service revenue (Part VIII, line 2g)									3	6,145	
	1		•			-				19	, 36	3		
5 <b>6</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								_	82	6,942		
<del>{                                    </del>					t IX, column (A), i					1,506				3,450
5					IX, column (A), lii						<u>, , _</u>			0,450
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х Р		•	•		ree benefits (Part			_		204	, , ,			9,980
8	i			-	, column (A), line			_						
8					olumn (D), line 25		103,417	—- ⊢						
9 8	1	-	-		lines 11a-11d, 11					6,902				5,489
	1	•		•	st equal Part IX, o			_ <u>_</u>		8,613		_+		8,919
	19	Revenue les	s expenses	s Subtract line	18 from line 12.					455	,10	7	(21	1,977
Net									Beginning	of Current Y	'ear	E	ind of Year	
Assets or	20	Total assets	(Part X, lin	ne 16)				L		1,698	, 70	2	1,47	7,268
Fund Bal-	21	Total liabilitie	es (Part X,	line 26)				[		521	, 21	0	51	1,753
ances	22	Net assets o	r fund bala	inces Subtrac	t line 21 from line	20		[		1,177	, 49	2	96	5,515
Par		Signatu			<del>-</del>							•		
Under	penalties	of perjury, I decla	are that I have	examined this retur	m, including accompan				owledge	and belief, it	ıs			
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May t	he IRS	discuss this	return with	n the preparer s	shown above? (se	e instructions) .							Yes	No
					eparate instruct						EEA		Form 990	
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Form 990 (2011)

Pa	K W		nt of Progra hedule O conta										
1	_	escribe the o	organization's n	nission							_••••		• • • <u> </u>
	TO AD	VOCATE FO	OR VARIOUS	ISSUES	RELATING	TO LIMIT.	ED GOVER	KNMENT.					
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2		_	undertake any 0-EZ?	_							[	Yes X	No
	If "Yes,"	describe the	ese new service	s on Sche	dule O								
3	services	?	cease conduct			-			•	· • • • • •		Yes X	No
4			ese changes on ation's progran			nts for each o	f its three la	raest nro	aram serv	ires as mea	sured by		
•	expense	s Section 5	01(c)(3) and 50	11(c)(4) org	anizations an	d section 494	7(a)(1) trust	ts are req	uired to re	port the amo			
	grants a	nd allocation	s to others, the	total expe	nses, and rev	епие, if any, f	for each pro	ogram ser	vice repor	ted			
4a	(Code		_) (Expenses	· <del></del>		ıncludıng gra	_		<del></del>	) (Revenue	\$	826,9	943 )
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4d	Other pro	gram servic	es (Describe ii	n Schedule	0)			-		-			
	(Expense				g grants of			) (Reve	nue \$		)		
4e	Total pro	ogram servi	ce expenses	<u> </u>	781,	347							

Form 990 (2011) AMERICANS FOR LIMITED GOV'T, INC.

36-3975580

Page 2

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? (see instructions)?	2	<u>X</u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			- 21
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	$\vdash$		
•	complete Schedule D, Part III	8		37
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	۳		<u>X</u>
J				
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	,		
4.0	complete Schedule D, Part IV	9	_	<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	E-MESTAGE	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	10		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	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	11b		_ X
C	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	11c		Х
d	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	11d	ĺ	X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	ĺ	X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	1	Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b			+	Λ
~	fundraising, business, investmetnt, and program service activities outlisde the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		v
16	• • • • • • • • • • • • • • • • • • • •	-13		X
.0	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		3.7
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	ا ــــا		
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.0		
	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?		1	
	If "Yes," complete Schedule G, Part III.	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return?	20b		

Checklist of Required Schedules (continued)

Part IV

Page 4

Yes Did the organization report more than \$5,000 of grants and other assistance to any government or organization 21 21 X 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 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 24a Х 24b b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 24d d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a 25a Х 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? 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . . . . . 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 Х 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) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.......... 28a Х A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV ........... 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . . . . . . . . . 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 35a 35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the 35b X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Х 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38

Form 990 (2011) AMERICANS FOR LIMITED GOV'T, INC. 36-3975580 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . . . . . . . . . . . 1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . . . . . . . 14 b Did the organization comply with backup withholding rules for reportable payments to vendors and 1c Х 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 . . . . . . If at least one is reported on line 2a, did the organization file all required federal employment tax returns?..... Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X X At any time during the calendar year, did the organization have an interest in, or a signature or other authority 4a over, a financial account in a foreign country (such as a bank account, securities account, or other financial 4a 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 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?......... 5a C Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a X If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b X 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a Х 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с d 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 X q If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring Sponsoring organizations maintaining donor advised funds. X Did the organization make a distribution to a donor, donor advisor, or related person? . . . . . . . X Section 501(c)(7) organizations. Enter 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . . . . 11 Section 501(c)(12) organizations. Enter Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.... 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which

X

14a

14b

Enter the amount of reserves on hand ..............

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

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

Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below. and for a "No" Part VI 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 Section 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 . . . . . . . . . . . . If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent . . . . . . . . . . . . b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . . . . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Each committee with authority to act on behalf of the governing body? ................ X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes." did the organization have written policies and procedures governing the activities of such chapters. 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 X 14 Did 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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions ) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a Х If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed VA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the

organization. > ALG (703) 383-0880

9900 MAIN STREET SUITE 303 Fairfax, VA 22031

36-3975580

Page 7

# 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.

- 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)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	box, t	rand I t n r s u t s i t	a dire	on is ector/t	an one both an rustee) H c e I o m I o m I e e o I s n y I e e I o	F o m e r	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) DAVE RENSIN									· · · · · · · · · · · · · · · · · · ·	
DIRECTOR	5.00	Х						o	0	0
(2) DAVID VANDERVEEN										
DIRECTOR	5.00	Х								
(3) ED CRANE										-
DIRECTOR	5.00	Х								
(4) HOWARD RICH										
CHAIRMAN	5.00	Х		X				•		·
(5) MICHAEL DOKUPIL										
DIRECTOR	5.00	X								
(6) PAUL FARAGO										•
DIRECTOR	5.00	X								
(7) PETER CONLIN										
SECRETARY	5.00	X		X						
(8) TRAVIS ANDERSON										
DIRECTOR	5.00	X								
(9) WILLIAM WILSON										
PRESIDENT	15.00	Х		X	X			35,417		
(10)RAY WOTRING										
TREASURER	10.00			Х				17,250		
(11)										
(12)								_		
(13)										
(14)										

LL C	Section A. Officers, Directors, Trustees	, Key Emplo	yees,	and	1 Life	Jues	St COII	ipei	isated Employee:	s (continued)		
	(A) Name and Title	(B) Average hours per week (describe	box.	unles	Pos eck m s per	son is	nan one both an ustee)	1	(D) Reportable compensation from the	(E) Reportable compensation froi related organizations	m a	(F) Estimated mount of other npensation
		hours for related organizations in Schedule O)	Itd nru dur sec vtc deo u r ao I	n r s u t s t t e u e	f f c e	e y	H c e m g p p o s n e e t e d	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	or	from the ganization nd related ganizations
(15)												
(16)												<del></del>
(17)												
(18)						 						
(19)												
(20)				-								
(21)				-								
(22)												
(23)										-		
(24)												
(25)												
1b c d	Sub-total	Α				• • •	• • •	<b>* * *</b>	52,667		0	0
2	Total number of individuals (including but not limited to reportable compensation from the organization							nore	than \$100,000 in		0	
3	Did the organization list any former officer, director of	r trustee, key	empl	ove	e. or	high	hest co	omp	ensated			Yes No
4	employee on line 1a? If "Yes," complete Schedule J for any individual listed on line 1a, is the sum of reportant organization and related organizations greater than \$1.00 to	or such indiv rtable compe 150,000? If "	ridual ensatio	on a	nd o	ther	comp	ensa	ation from the		3	X
5	Did any person listed on line 1a receive or accrue confor services rendered to the organization? If "Yes," co	npensation f		-			-		on or individual			X
Sec	tion B. Independent Contractors					·						
1	Complete this table for your five highest compensated compensation from the organization. Report compens year											
	(A) Name and business address								(B) Description of se	ervices		(C) ensation
		-				_						
2	Total number of independent contractors (including bureceived more than \$100,000 of compensation from the				stec	abo	ove) w	ho				

Part	V111	Statement of Revenue		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D)  Revenue excluded from tax
	•				function revenue	revenue	under sections 512, 513, or 514
	1a	Federated campaigns 1a					
	b	Membership dues 1b		]			
Contri- butions,	С	Fundraising events 1c	1	1			
Giffs,	d	Related organizations 1d		]			
Grants and	е	Government grants (contributions) 1e		]			
Other	f	All other contributions, gifts, grants,					
Similar		and similar amounts not included above 1f	790,797				
Amounts	g	Noncash contributions included in lines 1a-1f	<b>B</b>				
	h	Total. Add lines 1a-1f		790,797			
			Business Code				
	2a						-
	b						
Program Service	С				-		
Revenue	d						
	е						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
		Investment income (including dividends, interes	t,				-
		and other similar amounts)		36,145		36,145	
	4	Income from investment of tax-exempt bond pro	_				
	5	Royalties					
		(i) Real	(ii) Personal				
	i .	Gross rents					
		Less rental expenses					
		Rental income or (loss)				-	· -
		Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory	<del> </del>				
		Less cost or other basis					
0		and sales expenses	<del> </del>				
t h		Gain or (loss)	<u> </u>	~			-
e		Net gain or (loss)					
r		Gross income from fundraising					
R		events (not including \$ of contributions reported on line 1c)					
е		•					
v e	h	See Part IV, line 18 a Less direct expenses b					
'n		Net income or (loss) from fundraising events .	<b></b>	-		1	
u e		Gross income from gaming activities					
-	Ja	See Part IV, line 19					
	h	Less direct expenses b					
		Net income or (loss) from gaming activities	<b></b>	1		-	
		·					<del></del>
	TUA	Gross sales of inventory, less returns and allowances a					
	h	Less cost of goods sold b					
		Net income or (loss) from sales of inventory.	<u> </u>		-		_
		Miscellaneous Revenue	Business Code				
	11a	Interest	900099				-
	b				<del></del>		
	C	<del></del>					<del></del>
	_	All other revenue				-	
		Total. Add lines 11a-11d		-			
		Total revenue. See instructions		826,942		36,145	

36-3975580

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a response to any question in this Part IX											
Do r	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)							
	bb, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses							
1	Grants and other assistance to governments and		·		<del>-</del>							
•	organizations in the United States See Part IV, line 21.	433,450	433,450									
2	Grants and other assistance to individuals in											
•	the United States See Part IV, line 22											
3	Grants and other assistance to governments,											
	organizations, and individuals outside the											
	United States See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,											
•	trustees, and key employees	52,667	31,600	15,800	5,267							
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	78,053	46,832	23,416	7,805							
8	Pension plan accruals and contributions (include	,,,,,,	,	,	.,555							
U	section 401(k) and 403(b) employer contributions)											
9	Other employee benefits											
10	Payroll taxes	19,260	11,556	5,778	1,926							
11	Fees for services (non-employees)	,=	,	-,	_,							
''	Management											
b	Legal	7,613	4,568	2,284	761							
c	Accounting	.,	-,	_,								
d	Lobbying											
e	Professional fundraising services See Part IV, line 17.											
f	Investment management fees		-									
g g	Other		-									
12	Advertising and promotion											
13	Office expenses	2,559	1,535	768	256							
14	Information technology	39,541	23,725	6,862	8,954							
15	Royalties	55,55		-,,,,,								
16	Occupancy	27,196	16,317	8,159	2,720							
17	Travel	44,176	26,505	8,253	9,418							
18	Payments of travel or entertainment expenses	,										
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest	20,351		20,351								
21	Payments to affiliates	,										
22	Depreciation, depletion, and amortization	1,150	1,150									
23	Insurance	17,784	10,671	5,335	1,778							
24	Other expenses Itemize expenses not covered	,	,	, = -								
	above (List miscellaneous expenses in line 24e If											
	line 24e amount exceeds 10% of line 25, column											
	(A) amount, list line 24e expenses on Schedule O)											
а	computer Cxpense	8,044	4,827	2,413	804							
b	Consultants	210,654	126,393	27,196	57,065							
c	Data Entry/Database Dev.	11,833	7,100	3,550	1,183							
d	Payroll Fee	719	, ,	719	<u> </u>							
e	All other expenses	63,869	35,118	23,271	5,480							
25	Total functional expenses. Add lines 1 through 24e .	1,038,919	781,347	154,155	103,417							
26	Joint costs. Complete this line only if the	· · · · · · · · · · · · · · · · · · ·	· ·									
	organization reported in column (B) joint costs		1									
	from a combined educational campaign and fundraising solicitation. Check here											
	following SOP 98-2 (ASC 958-720)		ŀ									
		EEA			Form 990 (2011)							

Par	t X	Balance Sheet			
		•	(A)		(B)
			Beginning of year	<del>                                     </del>	End of year
	1'	Cash - non-interest-bearing	244,304	1	423,586
	2	Savings and temporary cash investments	5,191	2	5,208
	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			
S		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instructions)		6	
e	7	Notes and loans receivable, net	1,443,973	7	1,044,865
S	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 24,232			
	ь	Less accumulated depreciation 10b 24,232	1,148	10c	
	11	Investments - publicly traded securities	<del></del>	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	4,086	15	3,609
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,698,702	16	1,477,268
	17	Accounts payable and accrued expenses	12,842	17	62
	18	Grants payable		18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities	<del></del>	20	
a	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
b	22	Payables to current and former officers, directors, trustees, key		<del>  -                                   </del>	
i		employees, highest compensated employees, and disqualified persons			
į		Complete Part II of Schedule L	508,368	22	511,691
T i	23	Secured mortgages and notes payable to unrelated third parties		23	311,001
ė	24	Unsecured notes and loans payable to unrelated third parties		24	
S	25	Other liabilities (including federal income tax, payables to related third		27	
	25	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	521,210	26	511,753
	20	Organizations that follow SFAS 117, check here ▶ 🔀 and complete	321,210	20	311,733
NF		lines 27 through 29, and lines 33 and 34.		i	
e u	27	Unrestricted net assets	1,177,492		965,515
t n	27	<b>,</b>	1,111,432	27	903,313
A d	28	Temporarily restricted net assets		28	<del></del> ,
s B	29	Permanently restricted net assets		29	
s a e l		Organizations that do not follow SFAS 117, check here ▶ ☐ and			
t a		complete lines 30 through 34.			
s n	30	Capital stock or trust principal, or current funds		30	
с о е	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
rs	32	Retained earnings, endowment, accumulated income, or other funds	4 488 460	32	<u> </u>
	33	Total net assets or fund balances	1,177,492	33	965,515
	34	Total liabilities and net assets/fund balances	1,698,702	34	1,477,268

Form	n 990 (2011) AMERICANS FOR LIMITED GOV'T, INC.	36-397558	0	P	age 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		326,	942
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	1,0	38,	919
3	Revenue less expenses Subtract line 2 from line 1	. 3	(	211,	977)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	1,:	177,4	492
5	Other changes in net assets or fund balances (explain in Schedule O)	. 5			0
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	:	965,	515
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990   Cash  Cash  Cash  Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
А	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
-	issued on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		x

3b

Form 990 (2011)

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

#### **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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

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AME	ERICANS FOR LIMITED GOV'T, INC.	36-3975580
Pai		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 in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
•	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	∏Yes ∏No
Pai		
1	Purpose(s) of conservation easements held by the organization (check all that apply)	17, 1110 7
•	Preservation of land for public use (e g , recreation or education)  Preservation of an historically	v important land area
	Protection of natural habitat  Preservation of a certified his	
	Preservation of open space	storic structure
2		onconvetion
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation that have detected as a second of the device of	onservation
	easement on the last day of the tax year.	Hald sade Ford sale Ton Vo
_	Tatal symbol of cases when accounts	Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic	
	structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organic	nization during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	he year
	<b>&gt;</b>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	ear
	<b>▶</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	ement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements th	at describes
	the organization's accounting for conservation easements	
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	e of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	,
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I	balance sheet works of art.
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	•
	provide the following amounts relating to these items	, , , , , , , , , , , , , , , , , , , ,
	(i) Revenues included in Form 990, Part VIII, line 1	▶s
	(ii) Assets included in Form 990, Part X.	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain	
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	, protide tile
а	Revenues included in Form 990, Part VIII, line 1	▶ s
	Assets included in Form 990, Part XIII, IIIIe 1	
U	A650to moluucu ii I Oliii 650, Fatt A	· · · · · • • <u> </u>

Sched	ule D (Form 990) 2011 AMERICANS FOR LIM	ITED GOV'T, INC.			36-397	5580	Page 2
Pa	rt III Organizations Maintaining Co		torical Treasures	, or Ot	her Similar As	sets (cor	ntinued)
3	Using the organization's acquisition, accession, ar						
	collection items (check all that apply)			_			
а	Public exhibition	d Loan or exch	ange programs				
b	Scholarly research	e Other					
С	Preservation for future generations		-				
4	Provide a description of the organization's collection	ons and explain how they t	urther the organization	s exemp	ot purpose in		
	Part XIV		-				
5	During the year, did the organization solicit or rece	eive donations of art, histor	ical treasures, or other	sımılar			
	assets to be sold to raise funds rather than to be r					Ye	s No
Pa	rt IV Escrow and Custodial Arrang						
	Part IV, line 9, or reported an amount of						
1a	Is the organization an agent, trustee, custodian or			ts not			
						🗌 Ye	s No
b	If "Yes," explain the arrangement in Part XIV and						
	, .	,		[	An	nount	
С	Beginning balance			10	3		
d	Additions during the year			10	d		
е	Distributions during the year			-	→		
f	Ending balance			<u> </u>	F		
2a	Did the organization include an amount on Form 9	90, Part X, line 21?				\ \ Ye	s No
b	If "Yes," explain the arrangement in Part XIV					_	_
	rt V Endowment Funds. Complete if the	ne organization answered	"Yes" to Form 990, Par	t IV, line	10		
	rt V Endowment Funds. Complete if the		"Yes" to Form 990, Par		(d) Three years back	(e) Four y	ears back
	rt V Endowment Funds. Complete if the				1	(e) Four y	ears back
Pa	rt V Endowment Funds. Complete if the				1	(e) Four y	ears back
Pa 1a	Beginning of year balance				1	(e) Four y	ears back
Pa 1a b	Beginning of year balance				1	(e) Four y	ears back
Pa 1a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses				1	(e) Four y	ears back
Pa 1a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships				1	(e) Four y	ears back
Pa 1a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities				1	(e) Four y	ears back
Pa 1a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs				1	(e) Four y	ears back
Pa 1a b c d e	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses	(a) Current year (b) Pi	or year (c) Two year		1	(e) Four y	ears back
Pa 1a b c d e f g	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance	(a) Current year (b) Pi	or year (c) Two year		1	(e) Four y	ears back
Pa 1a b c d e f g 2	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years	(a) Current year (b) Pi	or year (c) Two year		1	(e) Four y	ears back
Pa 1a b c d e f g 2 a	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years of the current years of the current years of the signated or quasi-endowment	(a) Current year (b) Pi	or year (c) Two year		1	(e) Four y	ears back
Pa b c d e f g a b	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years and designated or quasi-endowment Permanent endowment	ear end balance (line 1g, c	or year (c) Two year		1	(e) Four y	ears back
Pa b c d e f g a b	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current yes Board designated or quasi-endowment Permanent endowment  Temporarily restricted endowment	ear end balance (line 1g, c	olumn (a)) held as	s back	(d) Three years back	(e) Four y	ears back
Pal  1a b c d e f g 2 a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current yes Board designated or quasi-endowment Permanent endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equalified the set of the current yes Set of the curre	ear end balance (line 1g, c	olumn (a)) held as	s back	(d) Three years back		ears back
Pal  1a b c d e f g 2 a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years and designated or quasi-endowment Permanent endowment Permanent endowment The percentages in lines 2a, 2b, and 2c should equal to the possession organization by	ear end balance (line 1g, c	olumn (a)) held as	s back	(d) Three years back		
Pal  1a b c d e f g 2 a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years to be a signated or quasi-endowment Permanent endowment Permanent endowment The percentages in lines 2a, 2b, and 2c should equal the endowment funds not in the possession organization by (i) unrelated organizations	ear end balance (line 1g, cear end balance)  where the state of the organization that are	olumn (a)) held as	s back	(d) Three years back		
Pa 1a b c d e f g 2 a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years designated or quasi-endowment Permanent endowment Permanent endowment The percentages in lines 2a, 2b, and 2c should equal the program organization by  (i) unrelated organizations	ear end balance (line 1g, cear end balance)  we will also the organization that are	olumn (a)) held as	s back	(d) Three years back	. 3a(i)	
Pa 1a b c d e f g 2 a b c	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years to be a significant or quasi-endowment Permanent endowment Permanent endowment The percentages in lines 2a, 2b, and 2c should equal Are there endowment funds not in the possession organization by (i) unrelated organizations	ear end balance (line 1g, compared with the organization that and das required on Schedule	olumn (a)) held as	s back	(d) Three years back	. 3a(i) . 3a(ii)	
Pa 1a b c d e f g 2 a b c 3a b	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years balance Permanent endowment Permanent endowment The percentages in lines 2a, 2b, and 2c should equal there endowment funds not in the possession organization by  (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations listed	ear end balance (line 1g, o %  was 100% of the organization that ar  d as required on Schedule nization's endowment func	olumn (a)) held as e held and administered	s back	(d) Three years back	. 3a(i) . 3a(ii)	
Pa 1a b c d e f g 2 a b c 3a b	Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current years and designated or quasi-endowment Permanent endowment Permanent endowment The percentages in lines 2a, 2b, and 2c should equare there endowment funds not in the possession organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed Describe in Part XIV the intended uses of the organizations	ear end balance (line 1g, o %  was 100% of the organization that ar  d as required on Schedule nization's endowment func	olumn (a)) held as e held and administered	d for the	(d) Three years back	. 3a(i) . 3a(ii)	Yes No

Land . . . . . . . . . . . . Buildings ..... Leasehold improvements

Equipment

Page 3

Part VII	Investments - Other Securities.	See Form 990, Part X, line 12		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial	derivatives		_	
(2) Closely-he	eld equity interests	•		
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)	<u> </u>			
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13	·	. <u> </u>
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	b) must equal Form 990, Part X, col (B) line 13 )			
Part IX	Other Assets. See Form 990, Part X, II	ne 15		
		) Description	(6	) Book value
(1) DEPOS	*			3,08
(2) PETTY	CASH			52:
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
(9)	<del></del>			
(10)	(b)t [Form 000 Bort V (B) In-	45)		2 600
	nn (b) must equal Form 990, Part X, col (B) line			3,609
Part X	Other Liabilities. See Form 990, Part X			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2)				
(3)	· ·- ·-			
(4)		<del></del>	1	
(5)				
(6)	<del></del>			
(7)	<del></del>			
(8)				
(9)				
(10)				
(11)	b) must equal Form 990. Part X. col. (B) line 25.)			
iucai (Column (	b) must equal Form 990, Part X, col (B) line 25)	·	1	

<sup>2.</sup> FIN 48 (ASC 740) 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 (ASC 740)

Sched	ule D (Form 990) 2011 AMERICANS FOR LIMITED GOV'T, INC.	36-3975580	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	-
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excèss or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pai	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	7	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV )		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV )	_  _	
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	<b></b>	
b	Prior year adjustments	<b></b>	
С	Other losses	_	
d	Other (Describe in Part XIV )		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4	
	Other (Describe in Part XIV )	4 .	
	Add lines 4a and 4b	4c	
<u>5</u>	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
-	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b Bb, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
	20, Part V, line 4, Part X, line 2, Part XI, line 6, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete Part to provide any additional information		
nis p	art to provide any additional information		
			<del></del>
		<del></del>	

SCHEDULE I		ָבָּ פֿל	Grants and Other Assistance to Organizations,	Assistance to	Organization	<b>"</b>		OMB No 1545-0047
Lord 880)		Gove	Governments, and Individuals in the United States	ndividuals in t	he United Star	es	-	2011
To the second second		Complet	Complete if the organization an	swered "Yes" to For	janization answered "Yes" to Form 990, Part IV, line 21 or 22.	1 or 22.		Onen to Bublic
repartment or the Treasury Internal Revenue Service			<b>A</b>	► Attach to Form 990.			, 	Inspection
lame of the organization							Employer identification number	umber
MERICANS FOR LIM	LIMITED GOV'T, IN	INC.					36-3975580	
Part I General Information on Grants and Assistance	ormation on Gran	its and Assistance						
1 Does the organizati	on maintain records t	Does the organization maintain records to substantiate the amount of the		sistance, the grantees	grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and		
	a used to award the g	the selection criteria used to award the grants or assistance?						.   Yes   No
ပ္ပ မ	the organization's pro	ocedures for monitorir	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	in the United States				
Part II Grants and	Other Assistance	to Governments	and Organizations ir	in the United States	. Complete if the or	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes"	Yes"	
Part II can b	, Fart IV, IIIIe 21, R e duplicated if add	to Form 990, Fart IV, line 21, for any recipient that received. Part II can be duplicated if additional space is needed	t received more man ; ded	po'non check this	box if no one recipie	more than \$5,000. Check this box if no one recipient received more than \$5,000.	\$5,000.	
1 (a) Name and address of organization	organization	(b) EIN	(c) IR(	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government	ent		if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(1)COLORADO AT ITS BEST	S BEST							
49 SOUTH LOOKOUT, MO	UT, MO 80401	84-1602735	501 C 4	31,200				
(2) CONSERVATIVES IN ACTION	IN ACTION							
3006 E NORTH ST	STREET 29615	20-3272668	501 C 4	15,000				
(3)s c for responsible	SIBLE GOVT							
1301 GARVAIS STREET	TREET 29201	54-2123292	501 C 4	348,500				
(4)S C FOR RESPONSIBLE GOVT FOUND	SIBLE GOVT FOU	<u>Q</u>						
POST OFFICE BOX 1264 29211	X 1264 29211	20-3128872	501 C (3)	56,250				
(5)NEW HAMPSHIRE ADVANTAGE COALIT	ADVANTAGE COAL	TI						
8 NORTH MAIN STREET 03301	TREET 03301	20-8714035	501 C 4	105,000				
(6) SAM ADAMS ALLIANCE	ANCE							
400 W ERIE SUITE	TE 407 60654	20-5792227	501 C 4	5,000				
(7)U S TERM LIMITS	S							
9900 MAIN STREET	ET SUI 22031	52-1701352	501 C 4	340,000				
(8)								
(6)								
(10)								
(11)					ļ			
(12)								
ı	of section 501(c)(3) a	Enter total number of section 501(c)(3) and government organizations list	izations listed in the line 1 table	1 table				
3 Enter total number of	of other organizations	Enter total number of other organizations listed in the line 1 table	ble	•			<b>A</b>	1 4
or Paperwork Reduction Act Notice, see the Instructions for Form 990.	on Act Notice, see th	e Instructions for Fo	orm 990.				5	Schedule I (Form 990) (2011)

#### **SCHEDULE Ł**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

## **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

AMERICANS FOR LIMITED GOV'T, INC	•					3	6-39	7558	0		
Part I Excess Benefit Transaction											
Complete if the organization answer	ed "Yes"	on Form 9	990, Part IV, line 25a o	r 25b, or F	orm 990-E	Z, Parl	V, lin	e 40b			
1 (a) Name of disqualified person			<b>(</b> b	) Description	of transaction					Yes	No
(4)							162	NO			
(1) (2)	<del></del>										<del>-</del>
(3)											-
(4)											
(5)											
(6)											
2 Enter the amount of tax imposed on the orga	nization r	managers	or disqualified persons	s during th	e year						
under section 4958		-	•	_	-		▶ 9	5			
3 Enter the amount of tax, if any, on line 2, abo							<b>&gt;</b> 9	<del></del>			
		-									
Part II Loans to and/or From Intere	sted P	ersons									
Complete if the organization answere	ed "Yes"	on Form 9	990, Part IV, line 26, or	Form 990	-EZ, Part \	/, line 3	38a				
(a) Name of interested person and purpose	to or from	(c) Original	(d) Bala	nce due	(e) In d	efault?	<b>(f)</b> App	roved	(g) W	ritten	
the organization?			principal amount					by boa		agreement?	
								commi	ttee? 		
	То	From				Yes	No	Yes	No	Yes	No
(1) STILRICH LLC		X	500,000	5	11,691	L	X	X		X	<u> </u>
(2) LOAN											
(3)											
(4)		1									<u> </u>
(5)		_									<u> </u>
(6)											<u> </u>
(7)	-										<del>-</del>
(8)						-					<del>-</del>
(9)						1					-
(10)		<u> </u>	<b>&gt;</b> s		11,691	ļ					I
Part III Grants or Assistance Bene			* * * * * * * * * * * * * * * * * * * *		11,691			!			
Complete if the organization answe	_										
(a) Name of interested person (b) Relationship to			between interested person and the (conganization)			c) Amount and type of assistance					
(1)					<del></del>						
(2)											
(3)							•				
(4)											
(5)							-				
(6)											
(7)										•	
(8)			·· <del>-</del>								
(9)											
(10)											
										-	

PartIV	Business Transactions Inv	olving Interested Per	rsons.			
	Complete if the organization answer	red "Yes" on Form 990, Par	t IV, line 28a, 28b, or 2	8c		
•	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	ation's
					Yes	No
<u>(1)</u>						ļ
(2)						
(3)						
(4)			ļ			
(6)			-			
(7)						
(8)						
(9)						
(10)		<u> </u>				
Party	Supplemental Information		a ta aventuma an Cab	adula I. (aaa matsustiana)		
	Complete this part to provide addition	nal information for response	s to questions on Sche	edule L (see instructions)		
	· · · · · · · · · · · · · · · · · · ·					
			-			
	<del></del>					
		·				
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		·				
				<del></del> .		
			·····	· · · · ·		_
			·			

#### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### Supplemental Information to 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.

OMB No 1545-0047

2011

**Open to Public** Inspection

Name of the organization AMERICANS FOR LIMITED GOV'T, INC. 36-3975580 01. Governing body decisions (Part VI, line 7b) Once a grant has been awarded to an organization, we do not normally require formal written updates on the progress of the project. We do, however, reserve the right to request updates if we feel it is necessary. 02. Committee meeting documentation (Part VI, line 8b) An executive committee exists and will hold periodic meeting between board meetings. 03. Form 990 governing body review (Part VI, line 11) ALG SENDS THE DRAFT FORM 990 TO THE DIRECTORS AND LEGAL COUNSEL FOR REVIEW AND COMMENT BEFORE IT IS FILED. 04. Conflict of interest policy compliance (Part VI, line 12c) ALL DIRECTORS ARE REQUIRED ANNUALLY SUBMIT A FORM TO THE ORGANIZATION ANSWERING QUESTIONS PERTAINING TO THEIR RELATIONSHIP WITH THE ORGANIZATION. 05. Governing documents, etc, available to public (Part VI, line 19) ANNUAL TAX FILINGS ARE AVAILABLE BY FILING A WRITTEN REQUEST WITH THE ORGANIZATION.