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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury

Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs gov/form990. Open to Public Inspection

A For the 2013 calendar year, or tax year beginning and ending C Name of organization Check if applicable D Employer identification number X Address change GLOBAL INTEGRITY Name change 26-0126537 Doing Business As Initial return Number and street (or P 0, box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 1110 VERMONT AVENUE NW 500 202-449-4100 Amended City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica-WASHINGTON, DC 20005 H(a) Is this a group return pending F Name and address of principal officer NATHANIEL S. for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? I Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) 527 J Website: ► WWW.GLOBALINTEGRITY.ORG H(c) Group exemption number ▶ K Form of organization X Corporation | Trust Association Other > Year of formation: 2005 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities SEE PART III, Activities & Governance Check this box > 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) 7 Number of independent voting members of the governing body (Part VI, line 1b) 15 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 0. SCANNED NOV 2 6 2014 | Expenses **Prior Year Current Year** 2,865,395 759,704. Contributions and grants (Part VIII, line 1h) 397,177. Program service revenue (Part VIII, line 2g) 135,240 535. Investment income (Part VIII, column (A), lines 3, 4, and 7d) -116. 188,673. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 41,522 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,042,041. ,346,089. 82,250 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 0 0. 1,062,771 1,080,370. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX column (A), line 1/1e) 0 0. b Total fundraising expenses (Part IX, column (D), line 25) 30,534. Other expenses (Part IX, column (A)) ines 11a-11d, 11f-24e) 1,159,716 1,234,674. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,304,737 2,315,044. Revenue less expenses Subtract The 18 from line 12 737,304 -968,955. Assets or 1 Balances OGDEN, UT Beginning of Current Year End of Year 3,847,672. 20 Total assets (Part X, line 16) 4,909,425 Total liabilities (Part X, line 26) 302,880 210,082. Net assets or fund balances Subtract line 21 from line 20 606,545 637,590 | 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 true, correct, and complete. Decimption of preparer (other than officer) is based on all information of which preparer has any knowledge. 13/2014 Signature of officer Date Sign NATHANIEL S. HELLER, EXECUTIVE DIRECTOR Here Type or print name and title Check Print/Type preparer's name Predarer's signature Bolan P01329488 Paid self-employed Preparer Firm's name W GELMAN, ROSENBERG & FREEDMAN Fırm's EIN 🛌 52-1392008 Use Only Firm's address 4550 MONTGOMERY AVE SUITE 650N Phone no. (301) 951-9090BETHESDA, MD 20814-2930 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions) LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013)

	1990 (2013) GLOBAL INTEGRITY 26-0126537	Page 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	\mathbf{x}
1	Briefly describe the organization's mission	
•	GLOBAL INTEGRITY GENERATES, SYNTHESIZES, AND DISSEMINATES CREDIBLE,	
	· · · · · · · · · · · · · · · · · · ·	
	COMPREHENSIVE AND TIMELY INFORMATION ON GOVERNANCE AND CORRUPTION	
	TRENDS AROUND THE WORLD. AS AN INDEPENDENT INFORMATION PROVIDER	
	EMPLOYING ON-THE-GROUND EXPERTISE, GLOBAL INTEGRITY PRODUCES ORIGIN	IAL
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O	
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
3		NO
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expense	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses,	and
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 559,323 · including grants of \$) (Revenue \$	١
	AFRICA INTEGRITY INDICATOR - THE AFRICA INTEGRITY INDICATORS PROJEC	TIS
	· · · · · · · · · · · · · · · · · ·	
	A FIVE-YEAR COLLABORATION WITH THE MO IBRAHIM FOUNDATION TO STRENGT	
	THE IBRAHIM INDEX ON AFRICA GOVERNANCE THROUGH IMPROVED ON-THE-GROU	
	DATA AND RESEARCH. GLOBAL INTEGRITY (AND THE GLOBAL INTEGRITY TRUST	IN .
	SOUTH AFRICA) RECRUIT AND MANAGE TEAMS OF IN-COUNTRY JOURNALISTS AN	ID
	RESEARCHERS IN ALL 54 AFRICAN COUNTRIES. THOSE TEAMS ARE TASKED WIT	<u></u>
	GENERATING HIGH-QUALITY QUANTITATIVE DATA AND QUALITATIVE REPORTING	
	AROUND A RANGE OF GOVERNANCE ISSUES; THE RESULTS THEN FEED INTO THE	
	<u> </u>	<u> </u>
	ANNUAL IBRAHIM INDEX.	
4b	(Code) (Expenses \$ 376, 202. including grants of \$) (Revenue \$ 20,	850.)
	INDABA - INDABA IS A SOFTWARE TOOL THAT ENABLES RESEARCH TEAMS TO	,
		T A T
	DESIGN, GATHER, REVIEW, AGGREGATE, PUBLISH AND EXPORT EMPIRICAL SOC	THT.
	SCIENCE DATA.	
	- · · · · · · · · · · · · · · · ·	
		
4c	(Code) (Expenses \$355, 961. including grants of \$) (Revenue \$\$	<u>400.</u>)
	WEB-INDEX - THE WEB INDEX IS THE FIRST MULTIDIMENSIONAL MEASURE OF	THE
	WORLD WIDE WEB'S USE, UTILITY, AND IMPACT.	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 491,058. including grants of \$) (Revenue \$ 78,927.)	
4e	Total program service expenses ▶ 1,782,544.	
	Form	990 (2013)
332002	•	. ,

Form 990 (2013) GLOBAL INTEGRITY Part IV Checklist of Required Schedules

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	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			l
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		.,
_	Schedule D, Part III	_8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		٦,
	If "Yes," complete Schedule D, Part IV	9		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	Λ	
D	assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VII	446		х
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		х
ч	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	11c		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	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 and XII 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	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? 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 Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	L	<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	L	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

Form 990 (2013) GLOBAL INTEGRITY Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 19 if "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		<u> </u>	
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2013)

	990 (2013) GLOBAL INTEGRITY 26-0126	<u>53 /</u>	<u>P</u>	age ɔ
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			\vdash
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter · 0 if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		٠,	
	(gambling) winnings to prize winners?	1c	X_	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 15	1	47	
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?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			٠,,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	_		,,
		_5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?	5c		
оа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			х
_	any contributions that were not tax deductible as charitable contributions?	6a		_
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	C.L		
7	·	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	70		х
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		<u> </u>	^
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b	<u> </u>	
·	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70	<u> </u>	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		**
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
_	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.			
а	Did the organization make any taxable distributions under section 4966? N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	ĺ		
	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	<u> </u>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.	1		
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		
	organization is licensed to issue qualified health plans	1		
С	Enter the amount of reserves on hand	<u> </u>	<u> </u>	ļ
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	l	Х

14b Form **990** (2013)

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

GLOBAL INTEGRITY 26-0126537 Form 990 (2013) 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 or note to any line in this Part VI [x]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. b Enter the number of voting members included in line 1a, above, who are independent 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 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 b 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 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 with a taxable entity during the year? Х 16a b 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 organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 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 made these available. Check all that apply X Own website __ Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made 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

Form **990** (2013)

NATHANIEL HELLER - 202-449-4100

1110 VERMONT AVENUE NW # 500, WASHINGTON

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

Check if Schedule O contains a response or note to any line in this Part VII

 \mathbf{x}

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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	(do		Pos	itior	than	one	Reportable	Reportable	Estimated
	hours per week					ıs bot or/trus		compensation from	compensation from related	amount of other
	(list any	흕						the	organizations	compensation
•	hours for	or dire	۵.			ited		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		, g	bens		(W-2/1099-MISC)		organization
	organizations below	lual tr	tional		nploye	st com	_			and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) NATHANIEL S. HELLER	40.00									
EXECUTIVE DIRECTOR/SECRETARY		X		X				173,635.	0.	<u>30,898.</u>
(2) DALE MURPHY	2.00					ļ				
DIRECTOR/TREASURER		X		Х				0.	0.	0.
(3) DAVID COHEN	2.00							_	_	
DIRECTOR		X		<u> </u>	ļ	ļ		0.	0.	0.
(4) MELISSA THOMAS	2.00								_	•
DIRECTOR	2 00	Х						0.	0.	0.
(5) STACY DONOHUE	2.00	,,							_	0
DIRECTOR	2.00	Х			_			0.	0.	0.
(6) MARK DAVIES	2.00	x						0.	0.	0
DIRECTOR (7) ERIC GUNDERSEN	2.00	Δ				ļ	-		0.	0.
DIRECTOR	2.00	х						0.	0.	0.
(8) JEREMY WEINSTEIN	2.00	<u> </u>						<u> </u>		<u> </u>
DIRECTOR	2.00	x						0.	0.	0.
(9) MARIANNE CAMERER	25.00									
DIRECTOR (SEE SCHEDULE O)		x						55,000.	0.	1,100.
								•		•
						_				
		_								
						-				<u></u>
										- 000

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		1						
_	26-0	<u> 126</u>	<u>537</u>	Р	age 8			
e	es (continued) (E) Reportable compensation from related organization (W-2/1099-MI	(F) Estimated amount of other compensation from the organization and related organizations						
-	<u></u>							
				·				
			-					
-		0.	2	1.9	98.			
•		0.			0.			
<u>.</u>	,000 of reportab	0.	3	1,9	<u>98.</u>			
-	,000 or reportati	,ic			<u>1</u>			
				Yes	No			
eı	mployee on		3		X			
n 1	the organization		4	х				
IVI	dual for services	3			37			
	<u> </u>		5		<u> </u>			
	\$100,000 of cor	npens	ation 1	from				
	ervices	C	(Compe		n			
V.	ELOPMENT		13	6,8	70.			

(A)

Name and title

(B)

Average

hours per

week

(list any

hours for

related

organizations below line)

Individual trustee or director

Institutional trustee

(C)

Position (do not check more than one box, unless person is both an officer and a director/trustee)

Key employee
Highest compensated
employee
Former

(D)

Reportable

compensation

from

the

organization

(W-2/1099-MISC)

										·				
				-			_							
		_												
				<u> </u>										
														-
1b	Sub-total							•	228,635.		0.	3	1,9	98.
C	Total from continuation sheets to Part VI	I, Section A						>	0.		0.			0.
	Total (add lines 1b and 1c)								228,635.	L	0.	3	1,9	98.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wh	io re	eceived more than \$100	0,000 of reportab	le			1
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director, or tru	ıste	e. ke	v en	olan	vee.	or h	nighest compensated e	mplovee on	ſ			
	line 1a? If "Yes," complete Schedule J for s				,		, ,			,,		3		х
4	For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	tion	and	oth	ner compensation from	the organization	Ī			
	and related organizations greater than \$150	0,000 <i>? If "Yes</i> ,	" co	mple	ete S	Sche	dule	J fo	or such individual]	4	X	
5	Did any person listed on line 1a receive or a	•				-		elate	ed organization or indiv	idual for services	•			
Soc	rendered to the organization? If "Yes," com tion B. Independent Contractors	plete Schedul	e <i>J f</i>	or si	ıch	pers	on		-	-		5		X
1	Complete this table for your five highest co	mnensated inc			nt c	ontr	acto	re th	hat received more than	\$100,000 of con	none	ation f	rom	
•	the organization Report compensation for										iperise	10011	10111	
	(A)	-							(B)	,		(0	 C)	
	Name and business								Description of	services	C	ompe		n
	NCONCEPT SYSTEMS, INC		ЪГI) I	1CI	_E/	N							
VII	LAGE DRIVE, MCLEAN, V	A 22101							SOFTWARE DEV	ELOPMENT		13	6,8	70.
					-			+						
												_		
								\downarrow						
	Total number of independent control (-4 '		- 1 L -	Ala -	!		ah awal wika sa a a sa s					
2	Total number of independent contractors (i \$100,000 of compensation from the organic		OT III	mite	u to	tnos 1	se IIS I	sted	above) who received h	nore than				
	Troc, ou or compensation from the organic	Lativii 🚩					_					Form	990 (2013)
332008 10-29-	13												- (
							8							

Form 990 (2013) GLOBAL INTEGRITY
Part VIII Statement of Revenue

		Check if Schedule O cont	aıns a response	or note to any lin	e in this Part VIII			
					(A)	(B)	(C)	(D) Revenue excluded
					Total revenue	Related or exempt function	Unrelated business	from tax under
						revenue	revenue	sections 512 - 514
ts ts	1 a	Federated campaigns	1a					512 511
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
a E		Fundraising events	1c			ĺ		
ifts ar A		Related organizations	1d					
ai,g		Government grants (contribut						
Sign		All other contributions, gifts, gran	· —					
her		similar amounts not included abo		759,704.				
10	~			733,7040				
SE S		Noncash contributions included in lines Total. Add lines 1a-1f	ia- ii 5		759,704.			
<u> </u>		Total. Add lines Ta-Tr		Business Code	132,104.			
	2 2	WEB INDEX PROGR	ΔM	900099	297,400.	297,400.		
ķ		FOGLAMP PROGRAM		900099	78,500.			
Program Service Revenue	0	INDABA PROGRAM		900099	20,850.	20,850.		
ěě		BOOK SALES		900099	427.	427.		
Real	a	BOOK SALES		300033	44/•	42/•		
<u>ا</u>	e	All ather are are a series						
_		All other program service reve	nue		397,177.			
$\overline{}$		Total. Add lines 2a-2f			39/,1//•			
	3	Investment income (including	aiviaenas, inter	est, and				
		other similar amounts)						
	4	Income from investment of tax	x-exempt bond p	proceeds	460			1.00
	5	Royalties		_	460.			460.
l	_	•	(i) Real	(II) Personal				
	6 a		188,213.					
	b	Less rental expenses	0.					
	C	Rental income or (loss)	188,213.		100 010			100 010
		Net rental income or (loss)	<u> </u>	▶ .	188,213.			188,213.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		1,983.				
	b	Less cost or other basis		1 440				
		and sales expenses		1,448.	•			
		Gain or (loss)		535.	525			F 2 F
		Net gain or (loss)		<u> </u>	535.			535.
e l	8 a	Gross income from fundraising	•					
		including \$						
Be		contributions reported on line	1c) See	1				
Other Rever		Part IV, line 18	а					
⇟│		Less direct expenses	b					
		Net income or (loss) from fund	=	>				
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	а					
		Less direct expenses	b					
ł		Net income or (loss) from gam	-					_
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less cost of goods sold	b					
}	<u>c</u>	Net income or (loss) from sale		, _			<u></u>	-
ļ		Miscellaneous Revenu	e	Business Code				
	11 a			ļļ				
	b							
	С							
	d	All other revenue		L				
	е	Total. Add lines 11a-11d		▶				<u> </u>
33200	12	Total revenue. See instructions.		<u> </u>	<u>1,346,089.</u>	397,177.	0	. 189,208.
10-29-	12							Form 990 (2013)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) X Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (D) Fundraising (A) Do not include amounts reported on lines 6b, Total expenses Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, 3 organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 260,633 196,000. 60,018. 4,615. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 640,591 465,052. 160,766. 14,773. Other salaries and wages Pension plan accruals and contributions (include 15,705 10,928. section 401(k) and 403(b) employer contributions) 4,187 590. 19,297112,555 92,880. Other employee benefits 378. Payroll taxes 50,886. 36,530. 13,411. 945. 10 Fees for services (non-employees). Management 21,245. 8,550. 12,695. Legal b 61,026 6,836. 54,190. Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, <u>558,980.</u> 535,970. 23,010 column (A) amount, list line 11g expenses on Sch O.) 20,108. 9,408. 10,700 12 Advertising and promotion 33,059. 23,621. 9,438 Office expenses 13 Information technology 14 Royalties 15 147,791. 96,608. 49,835. 16 Occupancy 1,348. 69,639. 51,659. 12,118. 5,862. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 2,285 1.792. 493. 19 Conferences, conventions, and meetings 3,583. 3,583. 20 Interest Payments to affiliates 21 19,431 12,753. 6,490 188. 22 Depreciation, depletion, and amortization Insurance 10,849. 7.121 3,623. 105. 23 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.) 273,489. 225,342. 46,910 a DATABASE/TELECOMM. 1,237. 6,753. MISCELLANEOUS EXPENSE 7,344. 591 c REPAIRS AND MAINTENANCE 3,150 3,150. 2,695 d EQUIPMENT AND FURNITURE 2,695. e All other expenses 2,315,044 1,782,544 Total functional expenses Add lines 1 through 24e 501,966. 30,534. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

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Pa	rt X	Balance Sheet			•
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	655,832.	1	439,332.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	4,091,999.	3	3,149,688.
	4	Accounts receivable, net	47,456.	4	12,626.
	5	Loans and other receivables from current and former officers, directors,	2,7200		12/0200
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			-
	•	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	,		
	ľ	employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	95,190.
As	8	Inventories for sale or use		8	75,170.
	9	Prepaid expenses and deferred charges	43,796.	9	32,710.
	10a	Land, buildings, and equipment cost or other	43,170.	9	32,710.
	104	basis Complete Part VI of Schedule D 10a 69,693			
	h	Less accumulated depreciation 10b 36,149		100	33,544.
	11	Investments - publicly traded securities	<u> </u>	11	33,344.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		1	
	14	Intangible assets		13	
	15	Other assets See Part IV, line 11	18,570.	15	84,582.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,909,425.	16	3,847,672.
	17	Accounts payable and accrued expenses	258,535.	17	195,175.
	18	Grants payable	230,333.	18	173,173.
	19	Deferred revenue		19	5,685.
	20	Tax-exempt bond liabilities	-	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
' A	22	Loans and other payables to current and former officers, directors, trustees,		21	
tie	~~	key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
Ľ	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 (including federal income tax, payables to related third		24	
	- "	parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	44,345.	25	9,222.
	26	Total liabilities. Add lines 17 through 25	302,880.	26	210,082.
		Organizations that follow SFAS 117 (ASC 958), check here	30270001		21070021
S		complete lines 27 through 29, and lines 33 and 34.			
ည	27	Unrestricted net assets	-1,430,927.	27	-170,288.
alar	28	Temporarily restricted net assets	6,037,472.	28	3,807,878.
Ö P	29	Permanently restricted net assets	0,00,,12,20	29	37007707
Š]	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			- · · · · · · · · · · · · · · · · · · ·
F		and complete lines 30 through 34.			
ţţ	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	4,606,545.	33	3,637,590.
	34	Total liabilities and net assets/fund balances	4,909,425.	34	3,847,672.
		- Call Maria de	<u> </u>	, , , ,	J, U=1, U14

3,847,672. Form **990** (2013)

	n 990 (2013) GLOBAL INTEGRITY	26-01	26537	Pa	ge 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,340		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,31	5,0	44.
3	Revenue less expenses Subtract line 2 from line 1	3	-968		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,606	5,5	<u>45.</u>
5	Net unrealized gains (losses) on investments	_5			
6	Donated services and use of facilities	6			
7	Investment expenses	7		_	
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,637	7,5	90.
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII			_	
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both				İ
	X Separate basis Consolidated basis Both consolidated and separate basis				l
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			l
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	l
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audıt			
	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 requi	red audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	. 1	

Form **990** (2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

name or	the organizati							-		dentincat		
Dort	Deces		INTEGRITY						2	<u>6-0126</u>	537	
Part I			ity Status (All organiz					tructions				
The organ	iization is not a	a private foundation	because it is (For lines 1	1 through	11, check	only one b	ox)					
1 📙	A church, co	nvention of churche	s, or association of chur	ches desc	rıbed ın s e	ection 170	(b)(1)(A)(ı)).				
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)								
3 📙	A hospital or	a cooperative hospi	tal service organization of	described	in section	170(b)(1)	(A)(ıiı).					
4 📖	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ı	ıı). Enter	the hospita	l's nan	ne,
	city, and stat											
5 📖	An organizati	on operated for the	benefit of a college or ur	niversity o	wned or of	perated by	a governi	mental un	it describ	ed in		
	section 170	(b)(1)(A)(ıv). (Comple	ete Part II)									
6 📖	A federal, sta	ite, or local governm	ent or governmental unit	t describe	d in sectio	n 170(b)(1	1)(A)(v).					
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın
	section 170(b)(1)(A)(vi). (Comple	te Part II)									
8 🔲	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🔲	An organizati	on that normally rec	eives (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembersh	p fees, a	nd gross re	ceipts	from
	activities rela	ted to its exempt fui	nctions - subject to certa	ın exceptı	ons, and (2) no more	than 33 1	/3% of its	support	t from gross	inves	tment
	income and i	unrelated business to	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June	30, 197	75
		509(a)(2). (Complete										
10	An organizati	on organized and or	perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	1).				
11 🔲	An organizati	on organized and or	perated exclusively for th	ne benefit	of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes o	of one	or
	_	-	ations described in section		-				-	-		
	describes the	type of supporting	organization and comple	ete lines 1	1e through	11h		•				
	a Type	b	ype II c T	ype III - Fu	nctionally	integrated	c	і 🔲 Тур	e III - No	n-functiona	lly inte	grated
е 🗔	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified	persons ot	her tha	มา
			han one or more publicly									
f			ten determination from t						`		,	
	-	rganization, check th			,		, ,,					
g		-	organization accepted ar	nv aift or c	ontribution	from anv	of the follo	owina per	sons?			
J	-		lirectly controls, either al			-				ı <u>.</u>	Yes	No
			upported organization?	•		•			. ,	11g(i)		
	-		n described in (i) above?							11g(ii)		
	• •	-	person described in (i) o		e?					11g(iii)	i	
h	• •	•	about the supported or							(175(11)		
	, , , , , , , , , , , , , , , , , , , ,	ono vinig inito initalion	about the cappoints of	gamzanon	(0)							
(1) None	-4td	(") FIN	(***) T of our or	(iv) is the c	rnanization	(v) Did voi	ı notify the	(vi) ls	s the	(· · · · · · · · · · · · · · · · · · ·		
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) h			ion in col.	lorganizati	on ın col.	(vii) Amoun	n oi illo oport	петагу
Orgo	amzanon		`above or IRC section	governing	document?	(i) of you	support?	(i) organiz U S	5.7]	port	
			(see instructions))	Yes	No	Yes	No	Yes	No	1		
					[
				1				 -	<u> </u>			
						 		 				-
				1	 	 	 	 	 			
				1	-			 	 	<u> </u>		
Total								1				
Total	lanamusel. D:	.d.,.asia.a. A -4 N -4:	ann tha lucturations f		J	<u> </u>	<u> </u>	Cabada	A 15-			0040
LOA FOR F	raperwork Re	QUETION ACT NOTICE	, see the Instructions fo	Uľ				ocneau	e A (For	m 990 or 9	JŲ-EZ	, 2013

332021 09-25-13

Form 990 or 990-EZ.

09331022 745960 16599

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support									
Cale	ndar year (or fiscal year beginning ın)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")	883,049.	1.881.542.	4,619,314.	2.865.395.	759,704.	11,009,004.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities			-			-			
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	883,049.	1,881,542.	4,619,314.	2,865,395.	759,704.	11,009,004.			
	The portion of total contributions		1,001,512.	1,015,511.	<u> </u>	, , , , , , , , ,	11,000,004.			
Ĭ	by each person (other than a		1							
	governmental unit or publicly			;						
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)		ľ				7,801,701.			
6	Public support. Subtract line 5 from line 4						3 207 303			
	etion B. Total Support						3,207,303.			
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
	Amounts from line 4	883,049.	1.881.542.	4,619,314.	2,865,395.	759,704.	11,009,004.			
	Gross income from interest.	000,0131	1,001,542.	4,010,014.	Z,003,333.	, , , , , , , , , ,	11,000,004.			
•	dividends, payments received on									
	securities loans, rents, royalties	:								
	and income from similar sources	5.	12,300.	9,200.	29,580.	189,100.	240,185.			
q	Net income from unrelated business	3.	12/3001	3,2000	23,3001	103/1000	2407103.			
Ü	activities, whether or not the									
	business is regularly carried on									
10	Other income Do not include gain									
	or loss from the sale of capital		i			:				
	assets (Explain in Part IV)	3,858.	16,615.	876.	11,942.		33,291.			
11	Total support. Add lines 7 through 10	370301	20,023.	0,0.	11/5120		11,282,480.			
	Gross receipts from related activities,	etc (see instruction	nns)			12	754,834.			
	First five years. If the Form 990 is for	•	•	fourth or fifth ta	y vear as a sectio		7517051.			
	organization, check this box and stop	-	, mot, occoria, time	i, iourui, or inui tu.	x year as a sectio	11 001 (0)(0)				
Sec	ction C. Computation of Publi	ic Support Pe	rcentage							
	Public support percentage for 2013 (I			olumn (fl)		14	28.43 %			
	Public support percentage from 2012		•	(-//	••	15	33.09 %			
	33 1/3% support test - 2013. If the c			line 13. and line 1	4 is 33 1/3% or n					
	stop here. The organization qualifies	-				,	▶ □			
b	33 1/3% support test - 2012. If the c		-	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box			
_	and stop here. The organization quali						▶ □			
17a	•	• •			13, 16a, or 16h	and line 14 is 10%	or more.			
	7a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization									
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.									
h	10% -facts-and-circumstances test	-	•	, ,,	•	17a and line 15 ie				
	more, and if the organization meets th	_								
	organization meets the "facts-and-circ				•		· •			
18	Private foundation. If the organization				-					
	to roundation it the organizatio	sig not oncore	20.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	, ,		dule A (Form 990				

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Section A. Public Support	iow, piease com	ipiete Part II)				
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and	(a) 2009	(0) 2010	(0) 2011	(0) 2012	(e) 2013	(I) IOLAI
membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge					-	
6 Total. Add lines 1 through 5				-	 	
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)	the organization	e first soond the	d fourth or fifth t	1	ND 501/0\/3\ ======	ation
14 First five years. If the Form 990 is for the check this box and stop here			u, iourtri, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
Section C. Computation of Public	Support Pe	ercentage				
15 Public support percentage for 2013 (lin	ie 8, column (f) c	divided by line 13, o	olumn (f))		15	9/
16 Public support percentage from 2012	Schedule A, Par	t III, line 15_			16	9/
Section D. Computation of Inves	tment Incom	ne Percentage				
17 Investment income percentage for 201	3 (line 10c, colu	mn (f) divided by lir	ne 13, column (f))		17	9
18 Investment income percentage from 20)12 Schedule A,	Part III, line 17			18	9
19a 33 1/3% support tests - 2013. If the o	irganization did i	not check the box	on line 14, and lin	e 15 is more than :	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	d stop here. The	e organization qual	fies as a publicly	supported organiz	ation	▶□
b 33 1/3% support tests - 2012. If the c	ırganızatıon dıd ı	not check a box on	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	k this box and s	top here. The orga	ınızatıon qualıfıes	as a publicly supp	orted organization	▶□
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	. ▶□
332023 00-25-13				Sal	adule A (Form 99	0 or 000 E7\ 201

Part IV Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12
Also complete this part for any additional information (See instructions)
PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:
EXPLANATION: GLOBAL INTEGRITY QUALIFIES AS A PUBLIC CHARITY UNDER THE
"FACTS AND CIRCUMSTANCES" TEST OF 1.170A-9(F)(3) OF THE TREASURY
REGULATIONS, BASED UPON THE FOLLOWING:
REGODATIONS, BUILDED OF ON THE TOLLOWING.
1. ITS SUPPORT, AS REPORTED FOR 2013, IS 28.43%, THEREBY MEETING THE
REQUIREMENT OF 1.170A-9(F)(3)(I).
Magorithman or 1.17011 5(17(5)(17)
2. IT IS ORGANIZED AND OPERATED SO AS TO ATTRACT NEW AND ADDITIONAL PUBLIC
AND GOVERNMENTAL FUNDING ON A CONTINUOUS BASIS, THEREBY MEETING THE
REQUIREMENT OF 1.170A-9(F)(3)(II). GLOBAL INTEGRITY CONTINUES TO EXPAND
FUNDRAISING EFFORTS TO DIVERSIFY ITS FUNDING SOURCES. THE ORGANIZATION
CONTINUES TO INCREASE FUNDRAISING CAPACITY.
3. GLOBAL INTEGRITY'S PUBLIC SUPPORT, AT 28.43%, IS WELL ABOVE THE 10%
MINIMUM REQUIRED FOR THE "FACTS AND CIRCUMSTANCES" TEST, THEREBY MEETING
THE REQUIREMENT OF 1.170A-9(F) (3)(III).
2112 212 VOI 2 2 2 2 7 7 1 7 1 2 7 1 7 1 7 1 7 1 7 1
4. IN MEETING THE REQUIREMENT OF 1.170A-9(F)(3)(I), GLOBAL INTEGRITY HAS
RECEIVED SUPPORT FROM A REPRESENTATIVE NUMBER OF PERSONS, RATHER THAN
RECEIVING ALL OR MOST OF ITS SUPPORT FROM THE MEMBERS OF A SINGLE FAMILY,
OR FROM A SINGLE DONOR. IN THIS RESPECT, GLOBAL INTEGRITY MEETS THE
REQUIREMENT OF 1.170A-9(F)(3)(III)(B).
5. GLOBAL INTEGRITY THROUGH ITS MAJOR PROGRAMS, INCLUDING THE AFRICA
INTEGRITY INDICATORS, INDABA, AND THE WEB-INDEX MAKES ITS INFORMATION AND
RESEARCH FULLY AVAILABLE TO THE PUBLIC, FREE OF CHARGE. OUR FOCUS IS ON

ISSUES OF GOVERNMENT TRANSPARENCY AND ACCOUNTABILITY ARE SQUARELY IN THE

332024 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

<u>Schedule'A (</u>	Form 990 or 990-l	Z) 2013	GLOB.	AL INTEG	<u>RITY</u>				<u>26-0126537 P</u>	age 4
Part IV	Supplementa	l Infor	mation.	Provide the exp	olanations requ	ired by Part II, line 1	0, Part II, line	e 17a or	17b, and Part III, line 12	
	Also complete thi	s part fo	r any addi	tional informatio	n (See instruc	tions)				
DBLIC	INTEREST	. IN	THIS	MANNER.	GLOBAL	INTEGRITY	MEETS	THE	REQUIREMENT	OF
		<u></u> :-								
.170A	-9(F)(3)(TTT)	(D).							
1 / 021	3(1)(3)(<u>, 2 / . </u>							
				 						
			•							
	<u> </u>									
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	••									
	22									
										
				,					 	
			_					_		
								-	···	
							-			

SCHEDULE D

(Form 990)

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.

➤ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection

Nam	e of the organization		Employer identification number
_	GLOBAL INTEGRITY	15 1 01 0: 1	26-0126537
Ра	rt I Organizations Maintaining Donor Advise		is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin		1
		(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 adv	rised funds
	are the organization's property, subject to the organization's	_	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpos	e conferring
_	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org		Part IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	· 	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the forr	n of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	` '	2c
d		after 8/17/06, and not on a historic struc	ture
	listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by ti	ne organization during the tax
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
6 7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
0	and section 170(h)(4)(B)(ii)?	re satisfy the requirements of section 17	((1)(4)(B)(I)
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expens	
5	include, if applicable, the text of the footnote to the organization	•	
	conservation easements	don's infancial statements that describe.	s the organization s accounting to
Pai	rt III Organizations Maintaining Collections o	f Art. Historical Treasures. or 0	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	•	
1a	If the organization elected, as permitted under SFAS 116 (AS		ement and balance sheet works of art.
	historical treasures, or other similar assets held for public ext	•	•
	the text of the footnote to its financial statements that descri	•	
ь	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	•	·
	relating to these items		, p
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for finance	
_	the following amounts required to be reported under SFAS 1		ga, p. 01/00
а	Revenues included in Form 990, Part VIII, line 1	. Ty . 20 000 rotating to those items	> \$
	Assets included in Form 990, Part X		\$

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Schedule D (Form 990) 2013

		INTEGRITY						26-01			age 2
Pa	rt III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures,	or Othe	r Simil	<u>ar Asse</u>	ts(contir	nued)	
3	Using the organization's acquisition, accessi	on, and other recor	ds, chec	k any of the	following that	at are a si	gnıfıcant	use of its	collectio	n item	s
	(check all that apply)										
а	Public exhibition	•			hange progr	ams					
b	Scholarly research	•		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co							ose in Par	t XIII		
5	During the year, did the organization solicit of					ier similar	assets	_	7		7
<u> </u>	to be sold to raise funds rather than to be m								_ Yes		<u>No</u>
Ра	rt IV Escrow and Custodial Arran		lete if the	e organizatio	n answered	"Yes" to I	Form 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
па	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	ssets not	included	F	٦.,		٦
	on Form 990, Part X?								」Yes	<u> </u>	∐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	ollowing	table.							
	Process to the contract of the								Amoun	<u> </u>	
C 							1c				
ď	0 ,						1d				
e	• ,						1e				
ا 2a	Ending balance Did the organization include an amount on Fi	orm 000 Part V line	. 212		•		1f		Yes	$\overline{}$	No
	If "Yes," explain the arrangement in Part XIII			on hae boon	provided in	Dart YIII		l	_ res	-]]
	rt V Endowment Funds. Complete						0		<u>-</u>		
	and a support of the	(a) Current year		Prior year	(c) Two yea			ears back	(a) Four	Vears	hack
1a	Beginning of year balance	(a) Content year	. (2)	noi your	(c) (wo year	.o baok	<u>uj (11100)</u>	rouro buon	(6) 1 001	yours	<u>buon</u>
b	Contributions		-								
c	Net investment earnings, gains, and losses										
q	Grants or scholarships										
e	Other expenditures for facilities		-								
·	and programs										
f	Administrative expenses										
a	End of year balance										
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	g, column (a	a)) held as:	•					
а	Board designated or quasi-endowment	•	%								
b	Permanent endowment	%	_								
С	Temporarily restricted endowment ▶	<u>~~~</u>									
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	ered for th	e organiz	zation	_		
	by									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organizations	s listed as required of	on Sched	dule R?					3b		
4	Describe in Part XIII the intended uses of the		owment	funds							
Pa	rt VI _ Land, Buildings, and Equipm										
	Complete if the organization answere			 						_	
	Description of property	(a) Cost or o		1 ' '	or other (other)	` '	cumulate reciation		(d) Bool	k valu	€
12	Land	,	- · · -/								
	Buildings	*									
	Leasehold improvements			1	7,939.		14,5	22.		3 . 4	17.
	Equipment		•		3,567.	-	15,3				87.
	Other				8,187.		6,2				40.
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur					ightharpoonup			44.

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 GLOBAL INTEG	RITY		26-0126537 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" to (a) Description of security or category (including name of security)	o Form 990, Part IV, line (b) Book value		e 12. Cost or end-of-year market value
	(b) Book value	(c) Method of Valuation.	Sost of end-of-year market value
(1) Financial derivatives	·	-	
(2) Closely-held equity interests			
(3) Other		 	
(A)		 	
(B) (C)		 	
(D)			-
(E)		-	
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.		<u> </u>	
Complete if the organization answered "Yes" to	n Form 900 Part IV line	11c Soc Form 990 Part V line	. 13
(a) Description of investment	(b) Book value		Cost or end-of-year market value
(1)	(2) 2 2 3 1 1 1 1 1	(c) mound on randament	- Joseph Grand Gra
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" to	o Form 990, Part IV, line	e 11d See Form 990, Part X, line	e 15
(a) D	escription		(b) Book value
(1)	_		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" to	Form 990, Part IV, line		X, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT		9,222.	
(3)			
(4)			
(5)			
(6)			
(8)			
(9)	I		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII X Schedule D (Form 990) 2013

332053 09-25-13

9,222.

25

Schedule D (Form 990) 2013

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization		· -			Employer ident	tification number
GLOBAL INTEGRIT	Y				26-01265	37
		ctivities Ou	tside the United States. Compl	ete if the organ	zation answered	"Yes" on
Form 990, Part IV		<u>. </u>				
1 For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gr	ants and other	assistance,	
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance?	」Yes No
	ribe in Part V the	e organization's i	procedures for monitoring the use of it	s grants and of	ther assistance ou	utside the
United States	falla Dad	. I. long O kabila				
3 Activities per Region (Ti (a) Region	(b) Number of	(c) Number of	an be duplicated if additional space is (d) Activities conducted in region		uty listed in (d)	(f) Total
(a) negion	offices	èmplovees	(by type) (e.g., fundraising, program		vity listed in (d) gram service,	(f) Total expenditures
	in the region	agents, and independent	services, investments, grants to		specific type	for and
	_	contractors in region	recipients located in the region)	II	e(s) in region	investments in region
7437		irregion		INFORMATION	AT THE	
				UNIVERSITY		
EUROPE (INCLUDING				MECHANISM A		
ICELAND & GREENLAND)	0	0	PROGRAM SERVICE ACTIVITIES	MUNICIPAL L	EVEL	21,188.
				FIELDING OF	GOVERNANCE	
!				DATA ACROSS	54 AFRICAN	
SUB-SAHARAN AFRICA	1	3	PROGRAM SERVICE ACTIVITIES	COUNTRIES		156,966.
					<u>-</u>	
	-			1		
			-		-	
·						
3 a Sub-total	1	3				178 154.
b Total from continuation						1/0,134,
sheets to Part I		0				
c Totals (add lines 3a					-	Ţ.
		_		I		i

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Schedule F (Form 990) 2013

Page 2

GLOBAL INTEGRITY

Schedule F (Form 990) 2013

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed Part II

(i) Method of valuation (book, FMV, appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					xempt by
(f) Manner of cash disbursement					recognized as tax-e
(e) Amount of cash grant					foreign country,
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by
(c) Region					is listed above that are r
(b) IRS code section and EIN (if applicable)					ecipient organization
1 (a) Name of organization					2 Enter total number of r

Schedule F (Form 990) 2013

28

Enter total number of other organizations or entitles

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Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16
Part III can be duplicated if additional space is needed

Page 3

26-0126537

, ,		1		•	-
(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2013

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2013

Yes X No

Yes X No

Foreign Partnerships. (see Instructions for Form 8865)

for Form 5713)

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

<u> 26-0126537</u>

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

GLOBAL INTEGRITY

Employer identification number

Pa	art I 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		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			ľ
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	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.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	}		
	contingent on the revenues of.			l
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	_6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in]		
	Regulations section 53 4958-6(c)?	9		1

332111 09-13-13

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

Schedule J (Form 990) 2013

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

						Γ		
		(B) Breakdown of W-2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	_	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a).(i)(a)	in prior Form 990
(1) NATHANIEL S. HELLER	(i)	173,635.	0	0.	6,142.	24,756.	204,533.	0
EXECUTIVE DIRECTOR/SECRETARY	(ii)			0.		0		0
	Ξ							
	(ii)							
	(i)							
	(ii)							
	(0)							
	(E)							
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Schedule J (Form 990) 2013

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Schedule J (Form 990) 2013

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

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
2013
Open to Public

Open to Public Inspection

Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number 26 – 01 26 5 3 7

GEODAL INLEGALIT Z0-0120557
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
REPORTING AND QUANTITATIVE ANALYSIS IN THE GLOBAL PUBLIC INTEREST
REGARDING ACCOUNTABLE AND DEMOCRATIC GOVERNANCE. GLOBAL INTEGRITY IS
MEANT TO SERVE SIMULTANEOUSLY AS A ROADMAP FOR ENGAGED CITIZENS, A
REFORM CHECKLIST FOR POLICYMAKERS, AND A GUIDE TO THE BUSINESS CLIMATE
FOR INVESTORS.
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
EXPLANATION: IN 2013, THE ORGANIZATION BEGAN THE WEB INDEX PROGRAM. SEE
PART III, LINE 4C FOR ADDITIONAL DETAIL.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
EXPLANATION: IN 2012, THE ORGANIZATION CEASED CONDUCTING THE FOLLOWING
PROGRAMS: LATIN AMERICA SUB-NATIONAL, PATTIRO INDONESIA, MEXICO
SUB-NATIONAL, IMPLEMENTATION GAP MANUAL, CIPE-KENYA, PHILLIPPINES & PNG
SUB-NATIONAL AND HEALTH & EDUCATION
- · · · · · · · · · · · · · · · · · · ·
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
FOGLAMP
EXPENSES \$ 160,844. INCLUDING GRANTS OF \$ 0. REVENUE \$ 78,500.
OPEN GOVERNMENT PARTNERSHIP
EXPENSES \$ 131,324. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
INNOVATION FUND
EXPENSES \$ 100,975. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013)

332211 09-04-13

Employer identification number 26-0126537

STATE INTEGRITY INVESTIGATION

EXPENSES \$ 69,318. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

GLOBAL INTEGRITY REPORT

EXPENSES \$ 28,597. INCLUDING GRANTS OF \$ 0. REVENUE \$ 427.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED

BY SENIOR MANAGEMENT. A COPY OF THE FINAL 990 WAS SENT TO THE ENTIRE BOARD

PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE CONFLICT OF INTEREST POLICY IS MONITORED REGULARLY. UPON
THE FIRST KNOWLEDGE BY AN INTERESTED PERSON THAT THE ORGANIZATION, THE
BOARD OR A COMMITTEE IS CONSIDERING OR HAS CONSIDERED A TRANSACTION OR
ARRANGEMENT WITH AN ENTITY OR INDIVIDUAL WITH WHICH THE INTERESTED PERSON
HAS AN INTEREST, THE INTERESTED PERSON MUST DISCLOSE THE EXISTENCE AND
NATURE OF HIS OR HER INTEREST TO THE BOARD.

AFTER DISCLOSURE OF THE INTEREST, THE INTERESTED PERSON MAY NOT PARTICIPATE
IN CONSIDERATION OF THE PROPOSED TRANSACTION OR ARRANGEMENT, VOTE ON SUCH
TRANSACTION OR ARRANGEMENT, AND NOT BE PRESENT FOR THE CONSIDERATION OF OR
VOTE ON SUCH TRANSACTION UNLESS THE BOARD REQUESTS INFORMATION OR
INTERPRETATION FROM THE INTERESTED PERSON. THE BOARD DETERMINES WHETHER THE
TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTERESTS; IS FAIR
AND REASONABLE TO THE ORGANIZATION; AND DECIDES WHETHER TO ENTER INTO THE
TRANSACTION OR ARRANGEMENT IN ACCORDANCE WITH SUCH DETERMINATION. SUCH

Schedule O (Form 990 or 990-EZ) (2013)

FORM 990, PART IX, LINE 11G, OTHER FEES:

THIS COMPENSATION IS DISCLOSED ON PART VII OF THE FORM 990.

CONSULTING:

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization GLOBAL INTEGRITY	Employer identification number 26-0126537
PROGRAM SERVICE EXPENSES	155,338.
MANAGEMENT AND GENERAL EXPENSES	23,010.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	178,348.
PROFESSIONAL TRANSLATOR:	
PROGRAM SERVICE EXPENSES	10,894.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	10,894.
PROFESSIONAL EDITING:	
PROGRAM SERVICE EXPENSES	2,072.
MANAGEMENT AND GENERAL EXPENSES	
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,072.
VIDEO PRODUCATION:	
PROGRAM SERVICE EXPENSES	4,262.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,262.
INTERNATIONAL CONTRACTORS:	
PROGRAM SERVICE EXPENSES	363,404.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	363,404.
336212 09-04-13 38	Schedule O (Form 990 or 990-EZ) (2013)

<u>Schedule O (Form 990</u>) (2013	3)		<u>.</u>							Page 2
Name of the organizati	Employer identification number 26 – 0126537											
TOTAL OTHER	FEES	ON	FORM	990,	PART	IX,	LINE	11G,	COL	A		558,980.
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