efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493299001051 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

B Check Addre		C Name of organization		D Emplo	yer i	identification number		
Name	es char	New America Foundation		52-20	196.	845		
		Doing Business As						
	_	e		E Teleph	one	number		
│ Initial │ Termi		Number and street (or P O box if mail is not delivered to street address) 1899 L Street NW	Room/suite	(202) 986-2700				
_ Amen	ded ret	curn City or town, state or country, and ZIP + 4		G Gross i	eceip	ots \$ 15,836,375		
_ Applic		Washington, DC 20036						
	·	F Name and address of principal officer	H/a)			lates? Yes No		
		Stephen W Coll	n(a) Isthisa	group return fo	or affil	ates/ Yes No		
		1899 L Street NW 400 Washington, DC 20036	H(b) Are all a	affiliates incl	luded	?		
		washington, DC 20036	If"No	," attach	a lıs	t (see instructions)		
I Tax-€	exempt	status	H(c) Group	exempti	on n	umber 🟲		
J Web	site:	▶ www newamerica net						
K Form (of orga	nization	L Year of form	mation 199	8	M State of legal domicile DC		
Part		Summary						
Governance	ISS	bring exceptionally promising new voices and new ideas to the fore of our nati sue-specific programs and sponsoring a wide range of research, writing, confer ir time	•					
\$								
		neck this box 🔭 if the organization discontinued its operations or disposed of	more than 25	5% of its i	neta	assets I		
χο γ		umber of voting members of the governing body (Part VI, line 1a)			3	22		
Activities &		umber of independent voting members of the governing body (Part VI, line 1b)		-	4	22		
를		tal number of individuals employed in calendar year 2010 (Part V, line 2a) .		_	5	140		
∢		tal number of volunteers (estimate if necessary)			6	44		
		otal unrelated business revenue from Part VIII, column (C), line 12		-	7a	0		
	b N e	et unrelated business taxable income from Form 990-T, line 34			7b			
	_			Year	_	Current Year		
a l		Contributions and grants (Part VIII, line 1h)		15,201,3	67	15,373,300		
E		Program service revenue (Part VIII, line 2g)				0		
2:		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		319,1	\rightarrow	252,477		
_ '		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		174,7	19	210,598		
1		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		15,695,2	24	15,836,375		
1	L3	Grants and similar amounts paid (Part IX, column (A), lines 1–3)				0		
1		Benefits paid to or for members (Part IX, column (A), line 4)			\perp	0		
§ 1		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5- 10)		10,398,7	84	10,084,353		
Expenses	L6a	Professional fundraising fees (Part IX, column (A), line 11e)				0		
ਡੋ∣	Ь	Total fundraising expenses (Part IX, column (D), line 25) ►616,252						
_ 1	L 7	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		5,238,6	52	5,611,210		
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		15,637,4	36	15,695,563		
	L9	Revenue less expenses Subtract line 18 from line 12		57,7	88	140,812		
± σ			Beginning Ye	of Curren ear	t	End of Year		
ည္းေ		Total assets (Part X, line 16)		14,197,4	11	14 401 035		
e spess Basance 1	20	· · · · · · · · · · · · · · · · · · ·		, ,,_		14,481,935		
ot Assets o		Total liabilities (Part X, line 26)		985,6	\rightarrow			
A Pure 12	21				53	14,481,935 1,129,365 13,352,570		

knowledge.

Sign Here	***** Signature of officer Stephen W Coll President Type or print name and title		
	Print/Type preparer's name Mario A Lopez CPA	Preparer's signature	Mario A Lopez
Paid	Firm's name 🕨 Berry Group CPAS		
Preparer			
Use Only	Firm's address 3139 Mount Vernon Avenue		
· · · · · · · · · · · · · · · ·	Alexandria VA 22305		

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

LOIL	1990 (2010)				Page
Par		_	ice Accomplishments ponse to any question in this	Part III	
1	Briefly describe th	e organization's missior	1		
	•	<u> </u>		ation's public discourse through vents on the most important iss	·
2	Did the organizatio the prior Form 990		ant program services during t	he year which were not listed or	TYes ▼ No
	If "Yes," describe t	hese new services on S	chedule O		
3	services?	n cease conducting, or	make significant changes in h	ow it conducts, any program	┌ Yes ┌ No
4	Describe the exem Section 501(c)(3)	pt purpose achievemen and 501(c)(4) organiza	ts for each of the organization	's three largest program service trusts are required to report the rogram service reported	
	(Code) (Expenses \$	2,024,445 including grants	of \$) (Revenue	2,232,100)
	21st century, combining democratic way of life new century rests as repuilding must be pursulating must be pursulating mover while Strategy Program see	ng tough-minded realism about the American international much on economic prosperity lied in concert with each other pooling global resources to ake to build a new consensus	out America's interests in the world wist tradition that guides the American as it does on collective security, meer. We must therefore seek to build a address common transnational threat	ote a new internationalism that adapts of the pragmatic idealism about the kind of Strategy Program understands that influening socio-economic development, coasystem of international law and gove its Through a program of original reseas internationalism, and the specific strathad 516 media appearances	of world order best suited to America's ternational peace and stability in this ollective security, and democracy- rnance that restores legitimacy to rch and publication, the American
4b	(Code) (Expenses \$	1,639,744 including grants	of \$) (Revenue	± \$ 1,635,125)
	Committee for a Resp public about issues the Directors of the Budge	onsible Federal Budget The at have significant fiscal polic t Committees, the Congress	Committee for a Responsible Federa y impact The Committee is made u ional Budget Office, the Office of Mai	al Budget is a bipartisan, non-profit org p of some of the nation's leading budginagement and Budget and the Federal ents and had 248 media appearances	anization committed to educating the et experts including many of the past
	(Code) (Expenses \$	1,545,102 including grants	of \$) (Revenue	2 \$ 1,879,791)
	Open Technology Inition open source innovation own the most valuable	ative / Wireless Future Progr ns and facilitates the develop e resource of the emerging ii	am The Open Technology Initiative oment and implementation of open t	formulates policy and regulatory reform echnologies and communications netw The purpose of the Wireless Future Pro	ns to support open architectures and orks The American people collectively
4d		rvices (Describe in Sch	•	\	0.465.460.
	(Expenses \$	· · · · · · · · · · · · · · · · · · ·	cluding grants of \$) (Revenue \$	8,465,160)
4e	Total program ser	vice expenses ⊧ \$	14,756,021		

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🤨	2	Yes	
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		No
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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
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		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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		No
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	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	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 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	.F	
			Yes	No
3	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 162			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
1	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		, 55	
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	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		N
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N (
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			
,	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N c
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		N o
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	5c 6a		N c
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		No
а	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	7a		No
h	services provided to the payor?	7b		N (
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N e
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N c
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		N c
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N c
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		No
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		No
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
)	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L				
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
h	Enter the amount of reserves the organization is required to maintain by the states			
٠	in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b		N.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O							

Se	ction 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			
ь	Enter the number of voting members included in line 1a, above, who are			
	ındependent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct			110
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		NI -
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		N o
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			110
,	governing body?	7a		Νo
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot \cdot	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
_	year by the following The governing body?	8a	Yes	
a b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.5	103	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ction B. Policies (This Section B requests information about policies not required by the Internal			
<u></u>	venue Code.)		Yes	N-
100	Does the organization have local chapters, branches, or affiliates?	10a	res	No No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	104		NO
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		Νo
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		NI -
L	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a		Νο
U	Describe in Schedule of the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14		Νo
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?	_	.,	
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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?	16a		Νo
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		Νo
_Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. 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. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 Sımone Frank

1899 L Street NW Ste 400 Washington, DC 20036

(202) 986-2700

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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

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

(A) Name and Title	(B) Average hours	Posi t	tion (that a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) Zachary Karabell Director	1 00	х						0	0	0
(2) William W Gerrity Director	1 00	х						0	0	0
(3) Walter R Mead Director	1 00	х						0	0	0
(4) Steven Clemons Program Director	40 00					х		170,323	0	27,777
(5) Stephen W Coll President	40 00			х	Х			296,244	0	35,933
(6) Simone Frank VP-Finance	40 00					х		163,451	0	32,595
(7) Sherle Schwenninger Program Director	40 00					х		158,420	0	24,314
(8) Roger Ferguson Director	1 00	х						0	0	0
(9) Rıta Hauser Dırector	1 00	х						0	0	0
(10) Rachel White Vice President	0 00					х		175,612	0	34,245
(11) R Boykın Curry Dırector	1 00	х						0	0	0
(12) Noosheen Hashemi Director	1 00	х						0	0	0
(13) Maya MacGuineas Program Director	40 00					х		195,836	0	36,045
(14) Liaquat Ahamed Treasurer	1 00	Х		х				0	0	0
(15) Lenny Mendonca Director	1 00	х						0	0	0
(16) Laurene Powell Jobs Director	1 00	х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours		((tion (hat a	(che		II		(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(17) Laura D'Andrea Tyson Director	1 00	х						0	0	0
(18) Katı Marton Director	1 00	х						0	0	0
(19) Jeffrey Leonard Director	1 00	х						0	0	0
(20) James Fallows Director	1 00	х						0	0	0
(21) Francis Fukuyama Director	1 00	х						0	0	0
(22) Fareed Zakarıa Director	1 00	х						0	0	0
(23) Eric Schmidt Chairman	1 00	х		х				0	0	0
(24) Edward Halstead Founder & Dir	1 00	х						0	0	0
(25) David Bradley Director	1 00	х						0	0	0
(26) Daniel Yergin Director	1 00	х						0	0	0
(27) Bernard Schwartz Director	1 00	х						0	0	0
(28) Atul A Gawande Director	1 00	х						0	0	0
1b Sub-Total			•				►			
c Total from continuation sheets t	o Part VII, Sect	ion A				•				
d Total (add lines 1b and 1c)							•	1,159,886		190,909
Total number of individuals (inclu \$100,000 in reportable compens					ed a	bove)) who	received more tha	n	

			Yes	No		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee					
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo		
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such					
	ındıvıdual	4	Yes			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Wahington University 700 Rosedale Box 1034 St Louis, MO 631121408	Research Consulting	166,250
Natl Federation of Community Broadcasters 1970 Broadway Oakland, CA 94612	Research Consulting	101,250
Mayors Fund To Advance New York City 1 Center Street New York, NY 10007	Research Consulting	140,000
Capitol Impact LLC 1130 K Street Sacramento, CA 95814	Proj Mgt/Consulting	165,600
Total number of independent contractors (including but not limited to those listed above)	who received more than	1

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►4

Page **9** Part VIIII Statement of Revenue (A) (B) (C) (D) Total revenue Related or Unrelated Revenue excluded business exempt function revenue from tax under revenue sections 512,513, or 514 Contributions, gifts, grants and other similar amounts Federated campaigns . . 1a **b** Membership dues . . . **1**b Fundraising events . . . **1**c Related organizations . . . Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 15,373,300 Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 15,373,300 Business Code Program Service Revenue All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest 252,477 252,477 and other similar amounts) Income from investment of tax-exempt bond proceeds . 4 5 Royalties . . . (ı) Real (II) Personal **Gross Rents** 208,134 6a Less rental expenses 208,134 Rental income or (loss) 208,134 208,134 Net rental income or (loss) d (ı) Securities (II) Other Gross amount 7a from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) d Gross income from fundraising events (not including Other Revenue of contributions reported on line 1c) See Part IV, line 18 . . . $oldsymbol{b}$ Less direct expenses . . . b Net income or (loss) from fundraising events $\ \ .$ Gross income from gaming activities See Part IV, line 19 . a Less direct expenses Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold . . b Net income or (loss) from sales of inventory . Business Code Miscellaneous Revenue 2,464 2,464 **11a** Publication sales b c **d** All other revenue . e Total. Add lines 11a-11d 2,464 **12 Total revenue.** See Instructions . .

15,836,375

210,598

252,477

	990 (2010)				Page 10
Par	t IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0		general expenses	Скрспэсэ
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0		-	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0]	
5	Compensation of current officers, directors, trustees, and key employees	332,177	99,653	149,480	83,044
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	7,831,786	6,988,980	626,750	216,056
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	685,825	596,391	64,509	24,925
9	Other employee benefits	660,844	574,669	62,159	24,016
10	Payroll taxes	573,721	498,906	53,964	20,851
а	Fees for services (non-employees) Management	0			· · · · · · · · · · · · · · · · · · ·
ь	Legal	46,648	2,596	44,052	
c	Accounting	20,535		20,535	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g g	Other	0			
12	Advertising and promotion	61,152		2,791	525
13	Office expenses	90,457	75,350	 	1,953
14	Information technology	151,023	· ·	· · · · · ·	3,300
15	Royalties	0		13,003	3,300
16	Occupancy	1,345,308		342,101	32,191
17	Travel	544,183	•	'	38,588
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	437,401	0,114	30,300
19	Conferences, conventions, and meetings	558,356	431,456	20,569	106,331
20	Interest	0	, , , , , , , , , , , , , , , , , , ,		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	102,573		102,573	
23	Insurance	20,757		20,757	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)			,	
а	Subscriptions and publications	92,056	77,968	8,179	5,909
b	Staff recruitment	3,006	2,676	330	
С	Postage and Shipping	20,521	13,218	5,678	1,625
d	Miscellaneous	16,085	6,629	8,915	541
e	Consultants	2,538,550	2,432,769	105,031	750
f	All other expenses	0	1,294,569	-1,350,216	55,647
25	Total functional expenses. Add lines 1 through 24f	15,695,563	14,756,021	323,290	616,252
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				· ·
	· · · · · · · · · · · · · · · · · · ·				_

Part X Balance Sheet (A) (B) Beginning of year End of year 0 1 1 2 4,177,675 2 4,677,621 491,808 1,323,942 3 48,800 4 37.013 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 0 6 0 8 0 8 Prepaid expenses and deferred charges 187,101 26,653 10a Land, buildings, and equipment cost or other basis Complete 602,409 10a Part VI of Schedule D 10b 268,501 323,600 **10c** 333,908 b Less accumulated depreciation 11 0 11 0 12 12 Investments—other securities See Part IV, line 11 0 13 13 Investments—program-related See Part IV, line 11 . . 0 14 14 8,468,481 15 8,582,744 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 14.197.411 16 14.481.935 17 511.069 525,555 17 Accounts payable and accrued expenses . 18 18 19 19 20 Tax-exempt bond liabilities 20 Liabilities 79.410 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 86,206 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part X of Schedule D 395.174 25 517,604 985.653 26 **Total liabilities.** Add lines 17 through 25 26 1,129,365 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 4,604,542 27 4,924,037 8,607,216 8,428,533 28 Temporarily restricted net assets 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ┌ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 13,211,758 33 13,352,570 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 14.197.411 14,481,935

Pa	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		15.8	336,37
2	Total expenses (must equal Part IX, column (A), line 25)	2			595,56
3	Revenue less expenses Subtract line 2 from line 1	3		,	140,81
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		13,2	211,75
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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		13,3	352,570
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual 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		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain i	n			
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		No

Employer identification number

OMP No 1545 004

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2010

Open to Public Inspection

CW AIIICII	52-2096845	5					
Part I							
	nization is not a private foundation because it is (For lines 1 through 11, check only one box)						
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)						
з Г	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(hospital's name, city, and state	(A)(iii). Ente	r the				
5	An organization operated for the benefit of a college or university owned or operated by a governmental	unıt describe	d ın				
_	section 170(b)(1)(A)(iv). (Complete Part II)						
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).						
7 🔽	An organization that normally receives a substantial part of its support from a governmental unit or from described in section 170(b)(1)(A)(vi) (Complete Part II)	n the general	public				
8 [A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)						
9 —	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross						
·	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more		-				
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from busine	esses				
	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)						
LO 厂	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).						
ı 1 ┌	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to cone or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d		a)(3).	Chec			
e 「	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more other than foundation managers and other than one or more publicly supported organizations described section 509(a)(2)	•	•				
f	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III check this box	supporting o	rganız	ation,			
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?						
	(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)	44 (:)	Yes	No			
	and (III) below, the governing body of the the supported organization?	11g(i)		<u> </u>			
	(ii) a family member of a person described in (i) above?	11g(ii)					
	(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		Щ			
h	Provide the following information about the supported organization(s)						

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizate col (i) orga	on in anized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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.)

<u> </u>	ection A. Public Support	c organización	ians to quanty t	ander the tests	iisted below, pi	case co	inpiece i	urc III.)
	endar year (or fiscal year beginning	(a) 2006	(b) 2007	(a) 2008	(4) 2000	(e) 2	010	/ 6) Total
	ın) 🏲	(a) 2006	(6) 2007	(c) 2008	(d) 2009	(e) z	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	9,618,586	11,146,978	13,741,770	15,201,367	15	5,373,300	65,082,001
2	grants ") Tax revenues levied for the							
_	organization's benefit and either paid to or expended on its behalf							0
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0
4	Total. Add lines 1 through 3	9,618,586	11,146,978	13,741,770	15,201,367	15	,373,300	65,082,001
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							21,779,556
_	(f)							
6	Public Support. Subtract line 5 from line 4							43,302,445
S	ection B. Total Support			L L	L			
Cale	endar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
_	beginning in)	` '	` '					65,082,001
7 8	A mounts from line 4 Gross income from interest,	9,618,586	11,146,978	13,741,770	15,201,367	13	,373,300	03,082,001
8	dividends, payments received on securities loans, rents, royalties and income from similar sources	298,371	431,630	451,937	493,857		463,075	2,138,870
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							0
11	Total support (Add lines 7 through 10)							67,220,871
12	Gross receipts from related activit	ies, etc (See ins	tructions)			12		
13	First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						`	
S	ection C. Computation of Pu							
14	Public Support Percentage for 201	0 (line 6 column	(f) divided by line	11 column (f))		14		64 420 %
15	Public Support Percentage for 200	9 Schedule A , Pa	art II, line 14			15		62 350 %
16a	33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
b	33 1/3% support test—2009. If the				a, and line 15 is	3 3 1/3%	or more,	
17a	box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2010. 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.							
	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organiza supported organization	nization meets thation meets the "f	ie "facts and circu facts and circums	ımstances" test, o tances" test The	check this box an organization qua	d stop h e lifies as a	e re. a publicly	·
18	Private Foundation If the organizations	tion did not check	c a box on line 13	, 16a, 16b, 17a oi	r 17b, check this	box and	see	▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 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 qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15				
16	Public support percentage from 2009 Schedule A, Part III, line 15	16				
S	Section D. Computation of Investment Income Percentage					
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17				
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18				

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493299001051

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public

ш

▶ Se	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-	A Dong	ot co	omplet	e Part II-B	
▶ Se	ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete	Part II-B	Do	not co	mplete Part	: II-A
f th	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Par	t V, line	35	a (Pro	xy Tax), th	nen
▶ Se	ction 501(c)(4), (5), or (6) organizations Complete Part III			•	,	
		mployer	ıde	ntıfıca	tion numbe	er
Nev	America Foundation			_		
D		2-2096				
чаг	t I-A Complete if the organization is exempt under section 501(c) or is a se	Ction	<u>52</u>	/ org	anizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Part	i V				
2	Political expenditures	F		\$		
3	Volunteer hours					
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955		-	\$ <u></u>		
2	Enter the amount of any excise tax incurred by organization managers under section 4955		-	\$ <u></u>		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				┌ Yes	✓ No
4a	Was a correction made?				┌ Yes	✓ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	50	1(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function acti	vities	-	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5.	27				
	exempt funtion activities	ļ	•	\$ <u></u>		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	<i>'</i> b	-	\$		
4	Did the filing organization file Form 1120-POL for this year?			-	┌ Yes	┌ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing or					

amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

h Subtract line 1g from line 1a If zero or less, enter -0-i Subtract line 1f from line 1c If zero or less, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	an affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means a		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	33,893	
c	Total lobbying expenditures (add lines 1a and 1	33,893		
d	Other exempt purpose expenditures	15,661,670		
e	Total exempt purpose expenditures (add lines 1	15,695,563		
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	934,778	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	233,695	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period											
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total						
2a	Lobbying non-taxable amount	613,154	763,646	931,872	934,778	3,243,450						
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,865,175						
c	Total lobbying expenditures	76,515	82,172	68,693	33,893	261,273						
d	Grassroots non-taxable amount	153,289	190,912	232,968	233,695	810,864						
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,216,296						
f	Grassroots lobbying expenditures											

	edule C (Form 990 or 990-EZ) 2010					age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has f (election under section 501(h)).	NOT fi	iled Fo	rm		
		(;	a)		(b)	
		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	V olunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912		•	1		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	5 01 (c)(5), c	or se	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				ctio	a
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493299001051

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** New America Foundation 52-2096845 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year

Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control?

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Total number of conservation easements

Total acreage restricted by conservation easements

Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06

Held at the End of the Year 2a 2b 2c

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌

Number of states where property subject to conservation easement is located -

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year

7 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Par	•••• Organizations Maintaining Co	llections of Art	<u>t, His</u>	tori	<u>cal Tr</u>	easu	res, or C	<u> the</u>	<u>r Similar</u>	Asset	S (cc	ntınued)
3	Using the organization's accession and other items (check all that apply)	records, check an	y of th	ne foll	owing t	that are	e a signific	ant u	se of its coll	ection		
а	Public exhibition		d	Γ	Loan	orexch	nange prog	rams				
b	Scholarly research		e	Γ	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	aın hov	w the	/ furthe	r the o	rganızatıor	ı's ex	empt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	┌ ʏ	es	┌ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y	es" to Forr	n 990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribu	itions o	r other ass	etsı	not	ר א	es	┌ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	/ing ta	able		г					
_							-	_		A moun	ıt	
C	Beginning balance							1c				79,410
d	Additions during the year						-	1d				6,796
e	Distributions during the year						-	1e				
f	Ending balance						L	1f				86,206
2a	Did the organization include an amount on Fo	rm 990, Part X, lin	e 21?							V Y	es	∏ No
	If "Yes," explain the arrangement in Part XIV											
Pa	rt V Endowment Funds. Complete											
1-	Reginning of year balance	(a)Current Year	(B)	Prior `	rear	(c)IWG	years Back	(a)	Three Years Ba	ск (е)	our ye	ears Back
1a L	Beginning of year balance		 					+				
Ь			 					-				
C	Investment earnings or losses							+				
d	Grants or scholarships Other expenditures for facilities		 									
е	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as							•		
а	Board designated or quasi-endowment											
ь	Permanent endowment											
c	Term endowment ►											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	re held	d and a	dmınıstere	d for	the			
	organization by	,							_		Yes	No
	(i) unrelated organizations							•	_	3a(i)		
_	(ii) related organizations							•	📮	3a(ii)		<u> </u>
	If "Yes" to 3a(II), are the related organization							•		3b		
4	Describe in Part XIV the intended uses of th					00 Da	wt V lung	10				
Par	t VI Investments—Land, Buildings	, and Equipme	iiit. S							T		
	Description of investment) Cost o		(b)Cost or basis (oth		(c) Accumul depreciati		(d) Bo	ook value
1a	Land		•									
b	Buildings		•									
c	Leasehold improvements		•									
d	Equipment		•				60	2,409	26	8,501		333,908
	Other											

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1:	2.	
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)	` '	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	,		
Part VIII Investments—Program Related. See		13	
			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
			, , , , , , , , , , , , , , , , , , , ,
		1	
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		
(a) Descrip			(b) Book value
(1) Security deposits			3,975
(2) Committee funds			70,769
(2) Committee funds			70,703
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	<i>5.)</i>		8,582,744
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
	(B) //illoune		
Federal Income Taxes			
Deferred rent liability	517,604		
	l		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	517,604		

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,836,375
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,695,563
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	140,812
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 - 8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	140,812
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Reti	<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1	15,836,375
2	A mounts 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		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	15,836,375
4	A mounts 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 . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	15,836,375
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	
1	Total expenses and losses per audited financial statements	1	15,695,563
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	15,695,563
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV)]]	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	15,695,563
	rt XIV Supplemental Information		
	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	art IV , lın	 es 1b and 2b,

Complete 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 and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part IV, Line 2b	escrow account liability	New America is CRFB's fiscal sponsor New America receives funds in the name of CRFB, and disburses funds on behalf of CRFB. New America holds and accounts for these funds in a cash account with a counter-balancing liability account CRFB account balance at 12/31/10 was \$70,769. Rental deposit of \$15,437 held in escrow from a subtenant starting in 2009.
Part IV, Line 1b	an agent, trustee, custodian or other intermediary for contrib	These funds are reported in the organization's balance sheet with a counter-balancing liability account. New America is CRFB's fiscal sponsor, and as such receives funds in the name of CRFB, and disburses funds on behalf of CRFB. Additionally, New America holds in escrow a rental deposit from a subtenant starting in 2009.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493299001051

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

NCV	Afficial Foundation		52-2096845			
Pa	rt I Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification 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 in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	-	, , , , ,	1b		
2	Did the organization require substantiation prior to i officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organizatiorganizatior CEO/Executive Director Check all the		·			
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	<u> </u>	·			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VI	I, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," o			7		No
8	Were any amounts reported in Form 990, Part VII, public to the initial contract exception described in Part III			8		Νο
9	If "Yes" to line 8 did the organization also follow th	e rehutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Steven Clemons	(I) (II)	170,323			20,400	7,377	198,100	198,425
(2) Stephen W Coll	(ı) (ıı)	296,244			23,888	12,045	332,177	305,954
(3) Sımone Frank	(ı) (ıı)	163,451			20,550	12,045	196,046	
(4) Sherle Schwenninger	(ı) (ıı)	158,420			19,200	5,114	182,734	188,888
(5) Rachel White	(ı) (ıı)	175,612			22,200	12,045	209,857	200,336
(6) Maya MacGuineas	(ı) (ıı)	195,836			24,000	12,045	231,881	
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

· · · · · · · · · · · · · · · · · · ·

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493299001051

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

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

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

OMB No 1545-0047

2010

Open to Public Inspection

	t he organizat ion ca Foundation							E	mployer i	dentifica	ation numb	er
	Excess Benefit Trai							organ		only).	ine 40h	
					<u> </u>					T die V , i		orrected
1	(a) Name of disq	ualified	person			(b) Desc	ription	of trans	action		Yes	No
secti	the amount of tax impos on 4958 the amount of tax, if any								·	r • \$ • \$	1	
Part II	Loans to and/or I					D. Part IV. line 26	. or Forr	n 990-	EZ. Part \	/ . line 38	Ba	
(a) Name	of interested person and purpose	(b) L	oan to om the zation?	(c)O rig	jınal	(d)Balance due	(e) I defau	:n	(f) Approby boai	ved d or	(g)Writi	
		То	From				Yes	No	Yes	No	Yes	No
								1				
								1				
Total .					▶ \$							
Part III	Grants or Assistar Complete if the orga						/, line 2	27.				
(a)	Name of interested pers			b) Relationsh	hıp betw	een interested per ganization			mount of g	rant or t	ype of assi	stance

Part IV	Business	Transactions	Involvina	Interested	Persons
	_ ~ ~				

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organizati	on answered res on	101111 220, 1 arc 1 v , 1	inc 200, 200, or 20c.			
(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	naring of ization's inues?	
	organization			Yes	No	
(1) Roger Ferguson	Director		CEO of NAF's 403b plan		Νο	
				1		

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Expla

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493299001051

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization New America Foundation

Employer identification number

52-2096845

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of determining of amounts		ontribut	ıon
1	Art—Works of art			-9				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
good								
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property	Х	1	83,132				
9	Securities—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	Other ► ()							
26	Other ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received by for which the organization complete				29			
30a	During the year, did the organizatio						Yes	No
	must hold for at least three years f			on, and which is not require	d to be used			
	for exempt purposes for the entire l	holdıng p	eriod?			30a		No
b	If "Yes," describe the arrangement	ın Part I	I					
31	Does the organization have a gift a	cceptano	e policy that requires the r	eview of any non-standard	contributions?	31		No
32a	Does the organization hire or use the contributions?	hırd partı • • •	es or related organizations	to solicit, process, or sell i	non-cash	32a		Νο
33	If "Yes," describe in Part II If the organization did not report re describe in Part II	venues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493299001051

OMB No 1545-0047

2010

Department of the Treasury
Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name	of	t he	orga	nizat	ion
New An	ner	ica Fo	ounda	tion	

Employer identification number

52-2096845

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Governing documents are available upon request. Financial statements are available on Guidestar and upon request. Conflict of interest policy is available on New America Foundation's own website.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The President's salary is reviewed and determined by the Board. All staff salaries are determined by the President with input from staff directors, and the VP, Finance and Operations.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Employees are required to disclose any conflict of interest activities and sign the conflict of interest form every year

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	The Form 990 is reviewed by management before it is filed

	Return eference	Explanation
Part III, Line 4d 4d Pro Ser	rm 990, rt III, Line Other ogram rvices scription	OTHER PROGRAM SERVICES 4 Committee for a Responsible Federal Budget. The Committee for a Responsible Federal Budget is a bipartisan, non-profit organization committed to educating the public about issues that have significant fiscal policy impact. The Committee is made up of some of the nation's leading budget experts including many of the past Directors of the Budget Committees, the Congressional Budget Office, the Office of Management and Budget and the Federal Reserve Board. The Committee for a Responsible Federal Budget writer 34 actions and policy papers, held 2 public policy events and had 248 media appearances. OTHER PROGRAM SERVICES 5 Health Policy Program The Health Policy Program works to achieve fully portable health insurance for all Americans while raising the average quality of care and low ening the rate of cost growth. More specifically, the Program promotes a mandatory, citizen-based approach to health insurance that, combined with credible cost containment measures, can ensure universal coverage and enhance America's long-term economic and social well-being OTHER PROGRAM SERVICES 6 Education Policy Program New America's Education Policy Program focuses on modernizing our systems of school finance, teaching and learning, and college financial aid. The program proposes comprehensive changes to education policy from pre-kindergarten to graduate school. OTHER PROGRAM SERVICES 7. Open Technology Initiative / Wireless Future Program. The Open Technology Initiative formulates policy and regulatory reforms to support open architectures and open source monovations and facilitates the development and implementation of open technologies and communications networks. The American people collectively own the most valuable resource of the emerging information economy the ainvavadual and affaliates the development of the programs is opported fair and efficient use of the airvavadual and promoves and an advantage of the institution of the program for promove fair and efficient uses of the airvavadual and acces

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493299001051

Related Organizations and Unrelated Partnerships

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

2010

OMB No 1545-0047

Open to Public Inspection

(Form 990)

SCHEDULE R

Department of the Treasury Internal Revenue Service

Name of the organization New America Foundation				Employer iden 52-2096845	ntification number		
Part I Identification of Disregarded Entities (Comp	lete if the organizat	on answered "Yes	" on Form 990, Pa	<u> </u>			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country		(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete	If the organizatio	n answered "Yes"	on Form 990, Part	l t IV, line 34 becaus	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti	g) 512(b)(13) rolled nization
						Yes	No
(1) Committee for a Responsible Fed Budget 1899 L Street NW Washington, DC 20036 52-1231278	To educate the public and congress about the budget process	DC	501(c)(3)	170(b)(1)(A)(vi)	N/A		No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruct	ions for Form 990.	Cat No 5	0135Y		Schedule R (Form 990	2010

				ble as a Partner reated as a partne					answe	ered "\	es" on Fo	rm 990,	Part	IV, lır	ne 34																																																
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity			(f) ire of total income S		(f) Share of total income		(f) Share of total income		(f) Share of total income		(f) Share of total income Share		(f) Share of total income Share		(f) Share of total income Share of end-of assets		Share of end-of-year		ortionate tions?	(i) Code V— amount in bo Schedule (Form 10	ox 20 of K-1	(j Gener mana parti	ral or iging	(k) Percentage ownership																																				
									Yes	No			Yes	No																																																	
				l ble as a Corpora ations treated as a							nswered "Y	es" on	Form	990,	Part IV,																																																
Name, address, ar	(a) nd EIN of related organiz	ation	(b) Primary activity	(c) Legal domicile (state or foreign country)	Direct cor		(d) (e) controlling Type of en entity (C corp, S corp trust)		entity Share of Scorp,		(f) f total income	end-o	j) e of f-year ets		(h) Percentage ownership																																																

(6)

	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No			
1 D	iring the tax year, did the orgranization engage in any of the following transactions with one or more related organ	ızatıons lısted ın Parts	s II-IV?						
а	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity								
b	b Gift, grant, or capital contribution to other organization(s)								
c	Gift, grant, or capital contribution from other organization(s)			1c		No			
d	Loans or loan guarantees to or for other organization(s)			1d		No			
e	e Loans or loan guarantees by other organization(s)								
f	Sale of assets to other organization(s)			1 f		No			
g	Purchase of assets from other organization(s)			1 g		No			
h	Exchange of assets			1h		No			
i	Lease of facilities, equipment, or other assets to other organization(s)			1 i		No			
j	Lease of facilities, equipment, or other assets from other organization(s)			1 j		No			
k	Performance of services or membership or fundraising solicitations for other organization(s)			1k		No			
1	I Performance of services or membership or fundraising solicitations by other organization(s)								
m	m Sharing of facilities, equipment, mailing lists, or other assets								
n Sharing of paid employees									
0	Reimbursement paid to other organization for expenses			10		No			
Р	Reimbursement paid by other organization for expenses			1р		No			
q	O ther transfer of cash or property to other organization(s)			1 q		No			
r	O ther transfer of cash or property from other organization(s)			1r		No			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	cluding covered relati	onships and transact	ion thresholds					
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determing Involved		unt			
1)		-77-(7)							
2)									
3)									
4)									
5)									

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	iag ing tner?
			Yes	No		Yes	No		Yes	No
			-							+
										╁
										+
										T
										\perp
										\perp
							+			+
										+
										T
										╀
										╀
										+
										T
							1 1			1

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2010