Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury The organization may have to use a copy of this return to satisfy state reporting requirements.

A F	or the	2008 ca	lendar year, or tax year beginning and endir	ng		
В	Check If	Please	C Name of organization		D Employer identific	cation number
8	pplicable	use IRS				
	Addres change	s label or print or	EMPLOYMENT POLICIES INSTITUTE FOUNDATI			
	Name Change	type	Doing Business As CITIZENS FOR WORKPLACE DEMO	CRA	52-19	902264
	Initial retum	See		n/suite	E Telephone number	
	Termin- ation	Specific Instruc-	1090 VERMONT AVENUE, NW 800)	(202	
	Amend return		City or town, state or country, and ZIP + 4		G Gross receipts \$	2,552,414.
	Application		WASHINGTON, DC 20005		H(a) is this a group re	
	pendin	F Nar	ne and address of principal officer:RICHARD BERMAN	- 1	for affiliates?	Yes X No
			IE AS C ABOVE		H(b) Are all affiliates inc	
			us: X 501(c) (3) ◀ (insert no.)			list. (see instructions)
			PIONLINE.ORG; ECON4U.ORG; ROTTENACORN.C		H(c) Group exemption	
				L Year o	of formation. 1994 N	State of legal domicile DC
P	art I	Summ	ary		ONE W MONDO	ODIM
ģ	1 1	Briefly de	scribe the organization's mission or most significant activities: EPI IS	THE	ONLY NONPRO	OF IT
aŭ			SED ON EMPLOYMENT POLICIES AND ECONOMIC			TINUED)
ē	1		s box F III if the organization discontinued its operations or disposed of	of more		5
Š	1		of voting members of the governing body (Part VI, line 1a)		3	3
æ			of independent voting members of the governing body (Part VI, line 1b)		4	
ties			nber of employees (Part V, line 2a)		5	1
Activities & Governance			nber of volunteers (estimate if necessary)		6	0.
Ac	7a	Total gros	ss unrelated business revenue from Part VIII, line 12,(Column) (CT)		7a 7b	0.
	b	Net unrel	ated business taxable income from Form 990:1, line 34			Current Year
			tions and grants (Part VIII, line 1h)	-	Prior Year 2,538,218.	2,540,738.
Revenue	8		ions and grants (Fart VIII, line III)		2,330,210.	2,340,730.
	9	-		-	2,216.	11,526.
	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)	\vdash	6,994.	150.
	1		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,547,428.	2,552,414.
			enue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	+	1,209,016.	149,950.
	ł		nd similar amounts paid (Part IX, column (A), lines 1-3)	-	1,200,010.	140/000
	1		paid to or for members (Part IX, column (A), line 4)	20,000.	20,440.	
Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5·10)		20,000.	20/110.
Ë	16a		onal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) 85,129.			
Ä	D				1,460,604.	1,375,502.
	17		penses (Part IX, column (A), lines 11a·11d, 11f·24f)	-	2,689,620.	1,545,892.
	1		enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		<142,192.	
- 2	19	Revenue	less expenses Subtract line 18 from line 12		Beginning of Year	End of Year
Net Assets or	00	T-4-1	ata (Dark V. Irana 40)	<u> </u>	847,205.	1,774,910.
ASSE Rate	20		ets (Part X, line 16)	-	230,466.	151,649.
let /	21 22		thities (Part X, line 26)	-	616,739.	1,623,261.
4	art II		ts or fund balances. Subtract line 21 from line 20		010//051	1/020/2020
-	CH L 11	Under pen	alties of perfund declare that I have examined this return, including accompanying schedules and state	ements, a	and to the best of my knowled	ge and belief, it is true, correct,
		and comp!	ete Declaration of preparer (other than officer) is based on all information of which preparer has any known	owledge		
e:-			$(\mathcal{L}, \mathcal{L})$		//	112/09
Sig		Sig	nature of officer		Date	<u>, , , , , , , , , , , , , , , , , , , </u>
He	re	1	CHARD BERMAN, PRESIDENT, DIRECTOR			
			e or print name and title			· <u> </u>
_		Preparer	I Data			er's identifying number
Pai	d	signature		9 self	ployed (see in:	structions)
Pre	parer's	Firm's nam		. 1 9.11	EIN >	
ÜSE	Only	yours if self-emplo	\			
		address, a ZIP + 4	WASHINGTON, DC 20005		Phone no ► (202) 463-7100
Ma	v the II		ss this return with the preparer shown above? (see instructions)		1	X Yes No
	001 12-1		HA For Privacy Act and Paperwork Reduction Act Notice, see the separa	ate insi	tructions.	Form 990 (2008)

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located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18

19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J

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 questions 24b-24d and complete Schedule K If "No", go to question 25

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

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?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

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

b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I

Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial 27 contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Form **990** (2008)

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24a

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24c

24d

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25b

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Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	<u>X</u>	
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			İ
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

tall Enter the number reported in Box 3 of Form 1096, Annual Summany and Transmittal of U.S. Information Returns. Enter 0-ft not applicable be Enter the number of Forms W2G included in line 1s. Enter 0-ft not applicable (1st) 15 billion (1st)						Yes	No
b Enter the number of Forms W/26 included in the 1a. Enter O-find applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamtling) winnings to prize winners? 2a Enter the number of employees reported on Form W/3, Transmittal of Wage and Tax Statements, filled for the calendary sear ending with or within the year covered by this return If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, less enstructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If Yes, has it filed a Form 990-T for this year? If Yo, "provide an explanation in Schedule O A flany 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)? See the instructions for exceptions and filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization sparty to a prohibited tax shelter fransaction at any time during the tax year? By the strip organization sparty to a prohibited tax shelter fransaction at any time during the tax year? By the organization of the organization file Form 9886-fi, Declosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? By the organization of the organization that it was or is a party to a prohibited tax shelter transaction? By the organizations that may receive deductible contributions under section 170(c). If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? For all contributions of qualified intellectual property, did the organization shall be organization shall be organization shall be organizati	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of					
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gamining) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, life of rithe calendar year ending with or within the year covered by this return. 2 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3 b Old the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 5 if "Yes," has if filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0 4 a At any time during the calendary year, did the organization have an interest in or a signature or other authority over, a financial account in a foreign country; less the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 if "Yes," enter the name of the foreign country; less was the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 if "Yes," and constitution apparty to a prohibited tax shelter transaction at any time during the tax year? 5 b If environment of the organization that it was or is a party to a prohibited tax shelter transaction? 5 if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 c a X 7 b If "Yes," inclose the number of Forms 88861 fleed during the year experience of the value of the goods or services provided? 7 b If "Yes," inclose the number of Forms 88862 fleed during the year expected property for which it was required? 8 b If "Yes," inclose the number of Forms 88862 fleed during the year expected property for which it was required? 9 b Centro 501(c)(3) and other spo		U.S. Information Returns. Enter -0- if not applicable	1a	1!	5		
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return	2a_		2		
3a	b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	ļ
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4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; in a foreign country (such as a bank account, securities account, or other financial account;) 5 If Yes, 'enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction? 5 If Yes, 'I to question 5 as or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 If Yes, 'I to question 5 as or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6 If Yes, 'I did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 6 If Yes, 'I did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization provide goods or services in exchange for any quid pro quid contribution of more than \$75? 8 Did the organization provide goods or services in exchange for any quid pro quid contribution of more than \$75? 9 Did the organization provide goods or services in exchange for any quid pro quid contribution of more than \$75? 10 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 10 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 Did the organization, during the year, receive any funds, directly or indirectly, on a personal benefit contract? 12 Per all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? 13 Per all contributions of qualified intellectual	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	his return?	3a		X
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h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: N/A Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Tob Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	g				7g	Х	
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excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: N/A a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion 5	09(a)(3)			
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: N/A a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	rganiza	ation, have			
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: N/A a 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.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		excess business holdings at any time during the year?			8		
b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: N/A a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
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a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: N/A a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	b			•	9b	ļļ	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: N/A a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	10		ı	Ī			
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a 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.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			10b				
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	b	·					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	40	· ·					
		/-	1	(12a		
	D	it res, enter the amount of tax-exempt interest received or accrued during the year N/A	12b	L	<u> </u>	000	0000

EMPLOYMENT POLICIES INSTITUTE FOUNDATION Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the

	Internal Revenue Code.)									
Sec	tion A. Governing Body and Management									
			Yes	No						
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,									
	processes, or changes in Schedule O See instructions.									
1a	Enter the number of voting members of the governing body	5								
b	Enter the number of voting members that are independent	3								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		İ							
	of officers, directors or trustees, or key employees to a management company or other person?	3	X							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a material diversion of the organization's assets?									
6	Does the organization have members or stockholders?									
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the									
	governing body?	7a		X						
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<u> </u>	X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year									
	by the following:									
а	The governing body?	_8a	X	<u> </u>						
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>						
9a	Does the organization have local chapters, branches, or affiliates?	9a	<u> </u>	X						
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with those of the organization?	9b		<u> </u>						
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		. <i>.</i>							
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х							
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	l								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	L	X						
<u>Sec</u>	tion B. Policies		\							
10-	Door the averagement on have a symptom and first of interval and involved to the 10	100	Yes X	No						
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Δ.							
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
_		120		 						
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Х							
13	Does the organization have a written whistleblower policy?	13	X	-						
14	Does the organization have a written document retention and destruction policy?	14		X						
4-	Did the process for determining compensation of the following persons include a review and approval by independent	17								
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:									
а	The organization's CEO, Executive Director, or top management official?	15a	1	х						
	Other officers or key employees of the organization?	15b		X						
•	Describe the process in Schedule O. (see instructions)	100								
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	1	Х						
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	Ì	1						
Sec	tion C. Disclosure	1								
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE O	-								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for								
-	public inspection indicate how you make these available. Check all that apply.									
	Own website Another's website X Upon request									
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ıncıal							
	statements available to the public.									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ıtıon: ▶	•							
-	RICHARD BERMAN - 202-463-7100									
	1090 VERMONT AVENUE, NW #800, WASHINGTON, DC 20005									
83200 12-18										

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

RICHARD BERMAN PRESIDENT, DIRECTOR 7.50 CRAIG GARTHWAITE SECRETARY/TREASURER, DIR. 0.10 JEFFREY CAMPBELL DIRECTOR 0.10	X Individual trustee or director		X	that exhibition seemed a seeme	Highest compensated Compensate		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
PRESIDENT, DIRECTOR 7.50 CRAIG GARTHWAITE SECRETARY/TREASURER, DIR. 0.10 JEFFREY CAMPBELL	x		х	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related
PRESIDENT, DIRECTOR 7.50 CRAIG GARTHWAITE SECRETARY/TREASURER, DIR. 0.10 JEFFREY CAMPBELL	х						, ,		
CRAIG GARTHWAITE SECRETARY/TREASURER, DIR. 0.10 JEFFREY CAMPBELL	х				ļ		5,000.	0.	0.
SECRETARY/TREASURER, DIR. 0.10 JEFFREY CAMPBELL			,,		1	-	3,000.		
	 x		X		<u>.</u>		12,500.	0.	0.
DIRECTOR	<u> </u>								•
JAMES R. LEDLEY	1	-	-		-	ļ	500.	0.	0.
DIRECTOR 0.10	x						500.	0.	0.
SHANNON FOUST					Ì				
DIRECTOR 0.10	X	_	L	_	_		500.	0.	0 .
	╁	+	\vdash	-	_	_			_
	İ								
	l	+			-				
	-	1	-	_		_			
	-	╁	-	-	-				
			<u> </u>		_				
	+								
	-		<u> </u>	\vdash	-				

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1 b	Total	19,000.	0.		0
2	Total number of individuals (including those in 1a) who received more than \$10	00,000 in reportable			
	compensation from the organization		>		
				Yes	N
3	Did the organization list any former officer, director or trustee, key employee, or	or highest compensated employee on		1	
	line 1a? If "Yes," complete Schedule J for such individual		_3	3	X
4	For any individual listed on line 1a, is the sum of reportable compensation and	other compensation from the organization	on		
	and related organizations greater than \$150,000? If "Yes," complete Schedule	J for such individual	4	ı L	X
5	Did any person listed on line 1a receive or accrue compensation from any unre	lated organization for services rendered	to		
	About a series and the Color of		٠ .	. 1	Ιv

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
RICHARD BERMAN & COMPANY, INC., 1090		
VERMONT AVENUE, NW #800, WASHINGTON, DC	MANAGEMENT SERVICES	518,910.
ORION PRECISION MARKETING RESEARCH, 50		
PROGRESS CIRCLE, UNIT 6-A, NEWINGTON, CT	MARKETING	351,982.
		·
Total number of independent contractors (including those in 1) who received m	ore than \$100,000 in compensation	

from the organization

	n 990 irt Vi			DLICIES I	NSTITUTE F	OUNDATION	52-1902	264 Page 9
	er vi	II Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c c d d e f	Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in tines	nts, and nts, and nts, and	2540738.	2 540 720			
Program Service C Revenue	2 a b c d			Business Code	2,540,738.			
	3 4 5	I Total. Add lines 2a-2f Investment income (including other similar amounts) Income from investment of ta Royalties	x-exempt bond p	proceeds	11,526.			11,526.
Other Revenue	6 a b c d 7 a	Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
		Less: cost or other basis and sales expenses	g events (not	>				
	b c	Net income or (loss) from fund	a b draising events	•				
	b		a b ning activities	. •				
		Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu OPINION EDITORI	s of inventory		150.	150.		
83200	c d e 12	All other revenue Total. Add lines 11a-11d Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 1l	Dc, and 11e	150. 2,552,414.	150.	0.	11,526.

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

	All other organizations must comp	lete column (A) but are (A)	not required to comple (B)	te columns (B), (C), and (C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	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	149,950.	149,950.		
2	Grants and other assistance to individuals in	•			
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	19,000.	12,000.	4,500.	2,500.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	000			- 000
7	Other salaries and wages	900.		_	900.
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits	540.		227.	313.
10	Payroll taxes	340.			313.
11	Fees for services (non-employees):	518,910.	415,584.	37,049.	66 277
a	Management	8,925.	2,332.	6,449.	66,277. 144.
ь	Legal Accounting	21,900.	2,332.	21,900.	111.
c d	Lobbying	778.	778.	21/300.	
e	Professional fundraising services See Part IV, line 17	7,00	,,,,,		
f	Investment management fees		· 1		
9	Other	10,254.	3,138.	384.	6,732.
12	Advertising and promotion	619,956.	619,956.		
13	Office expenses	27,709.	25,340.	197.	2,172.
14	Information technology	21,940.	20,825.		2,172. 1,115.
15	Royalties				,
16	Occupancy				
17	Travel	2,552.	2,532.		20.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	759.	759.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	269.	269.		
23	Insurance	2,772.		2,772.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	ISSUE RESEARCH	130,642.	130,642.	0.	0.
b	TAXES, LICENSES & FEES	5,981.	1,290.	0.	4,691.
C	SUBSCRIPTIONS AND PUBLI	2,155.	1,890.	0.	265.
d					
е					
f	All other expenses	1 545 000	1 207 205	72 472	05 100
25	Total functional expenses. Add lines 1 through 24f	1,545,892.	1,387,285.	73,478.	85,129.
26	Jaint Costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the organization	ĺ	1		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				Form 990 (2008)

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				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		73,460.	1	223,922
	2	Savings and temporary cash investments		687,978.	2	1,250,891
	3	Pledges and grants receivable, net	85,000.	3	299,699	
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, d				
		employees, or other related parties. Complete F	· · · · · ·	99.	5	
	6	Receivables from other disqualified persons (as		-		
		4958(f)(1)) and persons described in section 49				
		Part II of Schedule L	,		6	
တ္	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
ž	9	Prepaid expenses and deferred charges			9	
-	10a	Land, buildings, and equipment: cost basis	10a 8,724.			······································
		Less: accumulated depreciation. Complete				
1		Part VI of Schedule D	10ь 8,326.	668.	10c	398.
.	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line	_	12		
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	ial line 34)	847,205.	16	1,774,910.
	17	Accounts payable and accrued expenses		205,466.	17	151,649.
	18	Grants payable			18	
	19	Deferred revenue		19		
- 1	20	Tax-exempt bond liabilities		20		
١.	21	Escrow account liability. Complete Part IV of Sc		21		
i i	22	Payables to current and former officers, directo				
Liabilities		highest compensated employees, and disqualif				
ן בי		of Schedule L	ico persons. Complete r art ii		22	
.	23	Secured mortgages and notes payable to unrel	ated third parties		23	··· · · · · · · · · · · · · · · · · ·
l l	24	Unsecured notes and loans payable	ated tillio parties		24	
- 1	25	Other liabilities. Complete Part X of Schedule D		25,000.	25	0.
- 1	26	Total liabilities. Add lines 17 through 25		230,466.	26	151,649.
		Organizations that follow SFAS 117, check h	ere X and complete	230/1001	20	131/013
, l		lines 27 through 29, and lines 33 and 34.	ere P (11) and complete			
ğ ,	27	Unrestricted net assets		566,739.	27	1,365,405.
ja j	28	Temporarily restricted net assets	•	50,000.	28	257,856.
	29	Permanently restricted net assets		30,000.	29	2317030
Ĕľ	2.5	Organizations that do not follow SFAS 117, c	heck here		28	······································
Ē		complete lines 30 through 34.	neck nere			
ış .	30	Capital stock or trust principal, or current funds			20	
se [•			30	
<	31 32	Paid-in or capital surplus, or land, building, or ed		31		
Ž Ž	32 22	Retained earnings, endowment, accumulated in	616,739.	32	1 623 261	
_ '	33	Total net assets or fund balances		847,205.	33	1,623,261. 1,774,910.
Part	34 • ¥1	Total liabilities and net assets/fund balances		047,203.	34	1,114,310.
rail	- / 1	Financial Statements and Reporting				Yes No

		_	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	1	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		Х
_ <u>b</u>	If "Yes," did the organization undergo the required audit or audits?	3b		

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SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

Internal Revenue Service Name of the organizati

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Inspection

Marile Of	ine organizati		IDIM DOLLATE		· * · ·	E01111	D 3 CC C	I .		dentificati		
Dart 1	Dance		ENT POLICIES						52	-1902	264	
Part I			rity Status (All organi				t.) (see ins	tructions)				
Č		•	because it is: (Please ch	•	•	,						
1 님			s, or association of chur			ction 170	(b)(1)(A)(i)).				
2 ├─			70(b)(1)(A)(ii). (Attach Sc	-								
3	•	•	ital service organization			. , , ,			,			
4 📖			operated in conjunction	with a hos	spital desci	ribed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	ne hospital	's nam	ıe,
	city, and stat											
5			benefit of a college or u	niversity o	wned or of	perated by	a govern	mental uni	it describe	d in		
• 🗀		(b)(1)(A)(iv). (Compl	·									
7 X		_	ent or governmental uni									
7 <u>X</u>			ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	ribed i	'n
8 🗀		(b)(1)(A)(vi). (Comple	•	(Camarlata	David III							
9 🗀			section 170(b)(1)(A)(vi).							d		6
9			eives: (1) more than 33 nctions - subject to certa									
			axable income (less sec	-		•				•		
		509(a)(2). (Complete	•	tion 511 te	w, iroin bu	311103303	acquired t	y til o oiga	unzanon a	itei Julie J	, 1 <i>31</i>	J.
10			perated exclusively to te	est for publ	ic safety 5	See sectio	n 509(a)(4	1). (see ins	tructions)			
11	-		perated exclusively for the	•	•				•		of one	or
_			ations described in secti							•		
			organization and compl		-		,		-7(-7		******	
	а 🔲 Туре	ı	☐ Type II	с 🔲 Тур	e III • Fund	tionally int	egrated		d 🔲	Type III - 0	Other	
e 🗀	By checking	this box, I certify tha	at the organization is not	controlled	d directly o	r indirectly	by one o	r more dis	qualified p	ersons oth	er tha	ın
	foundation m	nanagers and other t	than one or more publich	y supporte	ed organiza	tions des	cribed in s	ection 509	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a wri	tten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check ti	his box									
9	Since Augus	t 17, 2006, has the d	organization accepted a	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
	(i) A perso	n who directly or inc	directly controls, either a	lone or tog	ether with	persons c	lescribed	ın (ii) and (iii) below,		Yes	No
	the gov	erning body of the s	upported organization?							11g(i)		<u> </u>
	•	•	n described in (i) above?							11g(ii)		<u> </u>
		•	person described in (i)	` '						11g(iii)	L	L
h	Provide the f	ollowing information	about the organizations	s the organ	ization sup	oports.						
			(iii) Type of	la					1			
	of supported	(ii) EIN	(iii) Type of organization	r ,	organization sted in vour		•	(vi) Is organizatio	the on in col	(vii) Am	nount o	ıf
orga	anization		(described on lines 1-9	1	document?	(i) of your		(i) organiz U S	ed in the	sup	port	
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
			(555	 					+ +			
				 	 -			-	 -			
			i									
								}				
										-		
				ļ								
<u>Total</u>												
LHA For F	Privacy Act an	id Paperwork Redu	ction Act Notice, see t	he Instruc	tions for F	orm 990.		Schedul	e A (Form	990 or 99	0-EZ)	2008

Schedule A (Form 990 or 990 EZ) 2008 EMPLOYMENT POLICIES INSTITUTE FOUNDATION52-1902264 Page 2

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

	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I)				
Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1021504.	1794921.	3057351.	2538218.	2540738.	10952732.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to					,	
	or expended on its behalf						
3	The value of services or facilities				•		
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 - 3	1021504.	1794921.	3057351.	2538218.	2540738.	10952732.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4834510.
_6	Public Support. Subtract line 5 from line 4						6118222.
Sec	ction B. Total Support						-
Cale	endar year (or fiscal year beginning in)		(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	1021504.	1794921.	3057351.	2538218.	2540738.	10952732.
8	Gross income from interest,			·			
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	4,230.	6,344.	6,732.	2,216.	11,526.	31,048.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	1,722.	106.	0.	6,994.	150.	8,972.
11	Total support. Add lines 7 through 10						10992752.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
14	Public support percentage for 2008 (lıne 6, column (f) di	vided by line 11, c	olumn (f))		14	55.66 %
15	Public support percentage from 2007	Schedule A, Part	IV-A, line 26f			15	54.03 %
16a	33 1/3% support test - 2008. If the c	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization			-	ightharpoons
b	33 1/3% support test - 2007. If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶ 🗀
17a	10% -facts-and-circumstances tes	t - 2008. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Pai	t IV how the organ	ization
	meets the "facts-and-circumstances"						▶□
b	10% -facts-and-circumstances tes					7a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ						▶ □
18	Private foundation. If the organization						s ▶ □
						dule A (Form 990	

Sch Pa	edule A (Form 990 or 990-EZ) 2008 ert III Support Schedule for (Organizations	Described in	Section 509(a)(2) (Complete onl	y if you checked the bo	Page 3
	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						_
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						-
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to				-		
	or expended on its behalf						
5	The value of services or facilities	-					
	furnished by a governmental unit to				}		
	the organization without charge						
6	Total. Add lines 1 · 5						
7a	Amounts included on lines 1, 2, and	•					
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
. 8	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						· · · · · · · · · · · · · · · · · · ·
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	r the organization's	s first, second, thu	d, fourth, or fifth ta	ax vear as a secti	on 501(c)(3) organiz	ation.
	check this box and stop here		,	.,,	,		▶ 🗔
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15				column (f))		15	%
16	Public support percentage from 2007	• • • • • • • • • • • • • • • • • • • •	•	(7)		16	%
	ction D. Computation of Inve						
17	Investment income percentage for 20			ne 13, column (fl)		17	%
18	Investment income percentage from	•	• • • • • • • • • • • • • • • • • • • •			18	%
	33 1/3% support tests - 2008. If the			on line 14, and line	e 15 is more than		
	more than 33 1/3%, check this box a						▶□
h	33 1/3% support tests - 2007. If the						and
	line 18 is not more than 33 1/3%, che						▶□
20	Private foundation. If the organization						▶ 🗀
				,		hedule A (Form 99	0 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 EMPLOYMENT POLICIES INSTITUTE FOUNDATION52-1902264 Page 4 Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part III, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
PUBLIC INSPECTION COPY CHARGES
SPEAKING FEES
OPINION EDITORIAL INCOME
EXPENSE REIMBURSEMENTS
INSURANCE SETTLEMENT
HONORARIUM
SHIPPING REFUND
832024 12.17.08 Schedule A /Form 990 or 990.F71 2008

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

Inspection

OMB No 1545-0047

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), the	n
 ◆ Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. 	

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

	Section 501(c)(4), (5),	or (b) organiza	tions: Complete Part III.			
Nar	me of organization				Emp	loyer identification number
		EMPLOYM	ENT POLICIES INS	STITUTE FOUN	NDATION	52-1902264
Pŧ	art I-A To be c	ompleted b	y all organizations exem	npt under section	501(c) and section 5	27 organizations.
	See the in	structions for S	schedule C for details.			
1	Provide a description	n of the organi	ation's direct and indirect politic	cal campaign activities	s in Part IV.	
2	Political expenditure	s			▶\$	
3	Volunteer hours					
Pá	ert I-B To be c	ompleted b	y all organizations exem	pt under section	1 501(c)(3).	
	See the in	structions for S	schedule C for details.			
1	Enter the amount of	any excise tax	incurred by the organization un	der section 4955	▶ \$	i
2	Enter the amount of	any excise tax	incurred by organization manag	jers under section 495	⊳ \$	
3	If the organization in	curred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
	a Was a correction ma					Yes No
	b If "Yes," describe in	Part IV.				. .
P	art I-C To be co	ompleted b	y all organizations exem	npt under section	1 501(c), except section	on 501(c)(3).
	See the in:	structions for S	chedule C for details			
1	Enter the amount dir	ectly expende	d by the filing organization for se	ection 527 exempt fun-	ction activities	
2	Enter the amount of	the filing orgar	ization's funds contributed to o	ther organizations for	section 527	
	exempt function act	vities			▶ \$	
3	Total of direct and in	direct exempt	function expenditures. Add lines	s 1 and 2 and enter he	ere and on	
	Form 1120-POL, line	17b			. ▶\$	
4	Did the filing organiz	ation file Form	1120-POL for this year?			Yes No
5			nployer identification number (E			
			If the amount was paid from the			
			separate political organization,	such as a separate se	egregated fund or a political	action committee (PAC).
		needed, provi	de information in Part IV.	<u> </u>		
	(a) Name		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's funds. If none, enter -0	contributions received and promptly and directly
					idilos. il florie, efiter o.	delivered to a separate
						political organization.
						If none, enter -0
		_				
				+		
			1	1	ı	1

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

LHA

832041 12-18-08

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 EMPLOYMENT POLICIES INSTITUTE FOUNDATION 2-1902264 Page 2 To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details. if the filing organization belongs to an affiliated group. B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals 802. 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) 802. c Total lobbying expenditures (add lines 1a and 1b) 1,545,090. d Other exempt purpose expenditures 1,545,892 e Total exempt purpose expenditures (add lines 1c and 1d) 227,295 f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 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. 56,824 g Grassroots nontaxable amount (enter 25% of line 1f) 0. h Subtract line 1g from line 1a. Enter -0- if line g is more than line a 0. i Subtract line 1f from line 1c. Enter -0- if line f is more than line c i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes 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 of the instructions.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) Total (or fiscal year beginning in) 220,926. 227,295. 315,054. 284,481. 1,047,756. 2a Lobbying non-taxable amount b Lobbying ceiling amount 1,571,634. (150% of line 2a, column(e)) 55,679 858. 802. 57,339. c Total lobbying expenditures 55,232 78,764 71,120 56,824. 261,940. d Grassroots non-taxable amount e Grassroots ceiling amount 392,910. (150% of line 2d, column (e)) 0. 4,088 0. 802. 4,890. f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 EMPLOYMENT POLICIES INSTITUTE FOUNDATION 2-1902264 Page 3

[Part II-B] To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

local leg or refere a Volunter b Paid sta c Media a d Mailings e Publicat f Grants t g Direct co h Rallies, i Other ad j Total lin- 2a Did the	he year, did the filing organization attempt to influence foreign, national, state or instance, including any attempt to influence public opinion on a legislative matter andum, through the use of:	Yes	No	Am	ount
local leg or refere a Volunter b Paid sta c Media a d Mailings e Publicat f Grants t g Direct co h Rallies, i Other ad j Total lin- 2a Did the	islation, including any attempt to influence public opinion on a legislative matter andum, through the use of:				
or refere a Voluntee b Paid sta c Media a d Mailings e Publicat f Grants t g Direct co h Railies, i Other ac j Total lin-	endum, through the use of:				
a Volunted b Paid sta c Media a d Mailings e Publicat f Grants t g Direct c h Railies, i Other ac j Total lin 2a Did the	-				
b Paid sta c Media a d Mailings e Publicat f Grants t g Direct c h Railies, i Other ac j Total lin 2a Did the	ers?				
c Media a d Mailings e Publicat f Grants t g Direct c h Railies, i Other ac j Total lin 2a Did the	•	,			
d Mailings e Publicat f Grants t g Direct co h Rallies, i Other ac j Total lin 2a Did the	ff or management (include compensation in expenses reported on lines 1c through 1i)?				
e Publicat f Grants t g Direct c h Rallies, i Other ac j Total lin 2a Did the	dvertisements?				
f Grants t g Direct con h Railles, i Other ac j Total line 2a Did the	to members, legislators, or the public?				
g Direct control Railies, i Other act j Total line. 2a Did the	ions, or published or broadcast statements?				
h Rallies,i Other acj Total lin2a Did the	o other organizations for lobbying purposes?				
i Other adj Total line2a Did the	ontact with legislators, their staffs, government officials, or a legislative body?				
j Total line	demonstrations, seminars, conventions, speeches, lectures, or any other means?				
2a Did the	ctivities? If "Yes," describe in Part IV				
	es 1c through 1i			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
b If "Yes."	activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	enter the amount of any tax incurred under section 4912				
	enter the amount of any tax incurred by organization managers under section 4912	ļ			
	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?		F04/-\/F\		L!
Part III-A	To be completed by all organizations exempt under section 501(c)(4)	, section	501(0)(5)	, or seci	lion
	501(c)(6). See the instructions for Schedule C for details.			Yes	No
1 \\/\	hotoctically all (000) an accusal disease accusad and distributions of			162	140
	bstantially all (90% or more) dues received nondeductible by members?		1	· · · · · ·	-
	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carryover lobbying and political expenditures from the prior year?		3		
Part III-R	To be completed by all organizations exempt under section 501(c)(4)	section		or soci	tion
- 3-1- 11	501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR				
	answered "Yes." See Schedule C instructions for details		, 4000		
1 Dues, as	ssessments and similar amounts from members		1		
•	162(e) non-deductible lobbying and political expenditures (do not include amounts of political	ical			
	es for which the section 527(f) tax was paid).				
a Current	• • •		2a		
	er from last year		2b		
c Total	•		2c		
3 Aggrega	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
	s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	e organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
expend	ture next year?		4		
5 Taxable	amount of lobbying and political expenditures (line 2c total minus 3 and 4)		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; at	nd Part II-B,	line 1i. Also	, complete	this part
for any additio	nal information.				
		-	-		
	- <u>-</u>				
<u> </u>					

Schedule C (Form 990 or 990-EZ) 2008

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

EMPLOYMENT POLICIES INSTITUTE FOUNDATION

Employer identification number 52-1902264

Par		d Funds or Other Similar Fund	
	organization answered "Yes" to Form 990, Part IV, line		is of Accounts. Complete it the
	organization answered Tes to Form 990, Fait 14, line	(a) Donor advised funds	(b) Funds and other accounts
	Takel asserb as at an distriction		(a) i silas alla silla assasilla
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		·
5	Did the organization inform all donors and donor advisors in v	•	
_	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor ac	-	
D	for charitable purposes and not for the benefit of the donor or		
Pai			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	·	
	Preservation of land for public use (e.g., recreation or p	· ——	istorically important land area
	Protection of natural habitat	Preservation of certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conse	ervation contribution in the form of a co	nservation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	lfter 8/17/06	2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	ne organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, violations,	and
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, an	nd enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing easements during the year	\$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describe	s the organization's accounting for
	conservation easements.		
Pai	t 🚻 Organizations Maintaining Collections of	Art, Historical Treasures, or (Other Similar Assets.
_	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8.	
			
1a	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, ed	lucation, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if	tems.	•
ь	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	ince sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or	•	
	these items:		,,,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical trea	asures or other similar assets for finance	
-	the following amounts required to be reported under SFAS 11	·	iai gairi, provide
-	Revenues included in Form 990, Part VIII, line 1	ro relating to these items.	▶ ¢
a		•	► \$ ► \$
ь	Assets included in Form 990, Part X	•	• •
LHA	For Privacy Act and Paperwork Reduction Act Notice, see	the Instructions for Form 990.	Schedule D (Form 990) 2008

832051 12-23-0

Sche	dule D (Form 990) 2008 EMPLOYM	ENT POLICI	ES IN	UTITZ	TE FO	UNDAT	ION	52-19	02264	Page 2
Pà	† 川 Organizations Maintaining C	collections of A	rt, Hist	orical Tr	easures,	or Oth	er Simil	ar Asse	ts (contir	ued)
3	Using the organization's accession and other	r records, check any	of the fo	llowing tha	t are a sigr	nificant us	e of its co	llection ite	ms (check	all
	that apply):									
а	Public exhibition	d		oan or exc	hange prog	grams				
b	Scholarly research	€	, []	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co							ose in Par	t XIV.	
5	During the year, did the organization solicit of					ther simila	ar assets		_	
F	to be sold to raise funds rather than to be m							<u>L</u>	Yes	No_
Pa	Trust, Escrow and Custodia		. Comple	ete if organi	zation ansv	wered "Ye	es" to Forn	n 990, Par	t IV, line 9	, or
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for c	ontribution	s or other	assets no	t included	_	٦	
	on Form 990, Part X?								」 Yes	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing to	able:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		_	
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes	L No
	If "Yes," explain the arrangement in Part XIV.									
Pa	t V Endowment Funds. Complete	f organization answe	ered "Yes	to Form 9	90, Part IV	', line 10.				
		(a) Current year	(b) Pr	or year	(c) Two ye	ars back	(d) Three	ears back	(e) Four	ears back
1a	Beginning of year balance				•••••					
b	Contributions				•		······			***************************************
С	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	r end balance held a	as:							
а	Board designated or quasi-endowment		%							
ь	Permanent endowment	%								
С		%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that	t are held a	nd adminis	tered for t	the organi	zation	_	
	by:									res No_
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	if "Yes" to 3a(ii), are the related organizations								3b	
4	Describe in Part XIV the intended uses of the									
Pa	t VI Investments - Land, Building		I			1				
	Description of investment	(a) Cost or o		(b) Cost		(c) [Depreciatio	on	(d) Book	value
		basis (investr	nent)	basis (otner)	 				
	Land					 				
	Buildings					 -				
	Leasehold improvements			-	0 724	-	0 3	. 		200
	Equipment				8,724	+	8,3	20.		398.
	Other	000 C-4 V 4	(D) #	10(-1)		ــــــــــــــــــــــــــــــــــــــ				398.

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. (a) Description of security or category (including name of security)	(b) Book value		(c) Method of values	
			ost or end-of-year ma	arket value
Inancial derivatives and other financial products losely-held equity interests				
ther				
			- - -	· - · - · - · - · - · · · · · · · · · ·
			<u>-</u>	
				· · · · · · · · · · · · · · · · · · ·
ntal. (Col (b) should equal Form 990, Part X, col (B) line 12)	>	₹		
Part VIII Investments - Program Related.	See Form 990, Part X, line 13	3.		
(a) Description of investment type	(b) Book value		(c) Method of valu	
(a) Description of investment type	(5) Book value	C	ost or end-of-year ma	arket value
				
				
		 		
				
		2 10 100		
otal. (Col (b) should equal Form 990, Part X, col (B) line 13)	>			
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.			
(a) Description			(b) Book value
-	· 			
		"		
				
		<u>. </u>		
otal. (Column (b) should equal Form 990, Part X, col (B,				
Part X Other Liabilities. See Form 990, Part (a) Description of liability	X, line 25.	(b) Amount		
(a) Description of liability		(b) Amount	-	
			-{	
ederal income taxes				
ederal income taxes			1	
ederal income taxes			-	
ederal income taxes				
ederal income taxes				
ederal income taxes				
ederal income taxes				
ederal income taxes				
ederal income taxes				
otal. (Column (b) should equal Form 990, Part X, col (B) Part XIV, provide the text of the footnote to the organi				

	dule D (Form 990) 2008 EMPLOYMENT POLICIES INSTIT	UTE FOUND	<u> MOITA</u>	52-	1902264	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Financial Sta	tements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,552	,414.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,545	,892.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		1,006	,522.
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			0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		1,006	
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With Reve	nue per	Return		
1	Total revenue, gains, and other support per audited financial statements			1	2,552	,414.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				•	<u> </u>
а	Net unrealized gains on investments	2a				
ь	Donated services and use of facilities	2b		7 1		
C	Recoveries of prior year grants	2c		1 1		
d	Other (Describe in Part XIV)	2d		1 1		
	Add lines 2a through 2d			7 2e		0.
3	Subtract line 2e from line 1			3	2,552	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			-	2,332	, 1110
-	Investment expenses not included on Form 990, Part VIII, line 7b	140				
a b	Other (Describe in Part XIV)	4a 4b		1 1		
	Add lines 4a and 4b	40		4c		0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	2,552	
	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Eyn	onsos no			/ 111.
1	Total expenses and losses per audited financial statements	IOINO WITH EXP	onioco po	1	1,545	892
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				1,313	, OJE .
a	Donated services and use of facilities	2a				
	Prior year adjustments	2b		1 1		
b	Losses reported on Form 990, Part IX, line 25			1 1		
	·	2c	<u> </u>	-		
	•	2d		ا ۾ ا		0.
_	Add lines 2a through 2d			2e	1,545	
3	Subtract line 2e from line 1			3	1,343	,032.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		- 1		
	Other (Describe in Part XIV)	4b		┥. 1		0
_	Add lines 4a and 4b	-		4c	1 5 4 5	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)			5	1,545	, 892.
	t XIV Supplemental Information					
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I rt XI, line 8; Part XII, lines 2d and 4b.	iii, iiiles Ta ailu 4, F	artiv, iiries		.u, Fait v, iiile	
						
						
				Sched	ule D (Form 9	90) 2008
83205/					1. 3 0	-,

Prompter of the organization EMPLOYMENT POLICIES INSTI	SCHEDULE I (Form 990)			Grants and Governn	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	e to Organization: luals in the U.S.	ห์		OMB No 1545-0047 2008
1 General Information and Salastance S2-19022 11 General Information and annual and Assistance S2-19022 12 General Information and Salastance S2-19022 13 Centeral Information and Salastance S2-19022 14 General Information and Salastance S2-19022 15 Centeral Information and Salastance S2-19022 16 Centeral Information mandam reaction seasonated to subclassification from the United States 16 Centeral Information mandam reaction seasonated to subclassification from the United States 17 Centeral Information mandam reaction seasonated S2-19022 18 Centeral Information mandam reaction S2-19022 19 Centeral Information mandam reaction S2-19022 19 Centeral Information mandam reaction S2-19022 19 Centeral Information mandam reaction S2-19022 19 Centeral Information S2-19022 19 Centeral Information mandam reaction S2-19022 19 Centeral Information Cente	Department of the Treasury Internal Revenue Service		▼ Compl	ete if the organizatio	in answered "Yes.	," on Form 990, Pa	art IV, lines 21 or 22.		Open to Public
Due to the organization manufaction of the grants or assistance, the grants or assistance, and the selection Due the organization manufaction is substituted to another the amount of the grants or assistance. Described the organization manufaction is predicted for assistance of conformation and Organizations in the United States. Complete if the organization answered "Vest" on Form 890. Part IV, line 21, for any recipient that reserved more than \$5,000 Lines that so the organization and organizations in the United States. Complete if the organization answered "Vest" on Form 890. Part IV, line 21, for any recipient that reserved more than \$5,000 Lines that so the organization and organization and organizations are expected received more final \$5,000 Lines that so the organization assistance of control or government or government or government and Organization and Organization and Organizations (All Annie editions) and organization and Organizations and Organization and Organization and Organizations and Or	Vame of the organization		POLICIE	INSTITUT	·	ON			Employer identification numb 52–190226
Does the organization manufact the grants or assistance, the grants of assistance, and the selection Describe in Part IV the organization conforming the use of grant funds in the United States. Describe in Part IV the organization is procedures for monitoring the use of grant funds in the United States. Complete it the organization of the part IV and organization in the United States. Complete it the organization are recipient that received from the State and Other Action or the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organization of the Complete it the organizations of the Complete it the organizations of the Complete it the organizations of the Complete it the organizations of the Complete it the organizations of the Complete it is the process of the Complete it the organizations of the Complete it the organizations of the Complete it the organizations	rarri General Inix	ormation on Grants and	d Assistance						
The first of section Stock of sections of sections and sections are sections as a section section as a section section as a section section as a section section as a section section as a section section as a section sectio		tion maintain records to	substantiate the	amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	:
Table for the organization answered "Yes" on Form 990, Part received more than \$5,000 Check this board for one recipient treceived more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for one recipient received more than \$5,000 Check this board for the organization of the organizations in the United States. Complete the organizations are recipient that the United States and Organizations are recipient to the United States and Organizations and Organizations and Organizations and Organizations and Organizations are recipient to the United States and Organizations are recipient to the Organization and Organizations and Organizations are recipient to the Organizations and Organizations are recipient to the Organization and Organizations and Organizations are recipient to the Organization and Organizations and Organizations and Organizations are recipient to the Organization and Organizations and Organizations are recipient to the Organization and Organizations and Organizations and Organizations are recipient to the Organization and Organizations and Organizations and Organization and Organizat		ard the grants or assiste	ance?	to con out out		00 10 10			
recipient that received more than \$5,000. Check the box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if addition or government (b) EIN (c) (FOR Section (d) Amount of (g) Member of (g) Description of assistance or government (f) EIN (d)	Part If Grants and	Other Assistance to Go	overnments and	Organizations in the	United States. C	omplete if the orga	anization answered "\	es" on Form 990, Par	t IV, line 21, for any
(a) Name and address of organization (b) EIN (c) EIN (d) FIC section (d) Amount of (a) Amount of (d) Mathed of (d) Description of assistance assistance assistance assistance assistance assistance assistance assistance of EU (c) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	recipient tha	at received more than \$5	,000 Check this	box if no one recipien	it received more th	an \$5,000. Use Pa	art IV and Schedule I-	1 (Form 990) if addition	nal space is needed
THE FOR UNION PACTS VERMONT AVE NW, #800 20-4036946 501(C)(3) 149,950, 0,N/A N/A INCOMPTON INCOMPTON THE NAME OF THE	1 (a) Name and add or gove	ress of organization ernment	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRETOR INTOR FACTS VERMONT AND NO., 4800 TRETORN, DC. 20005 TRETORN, DC. 20005 TRETORN DC. 20005 TRETOR									RESEARCH ON PUBLIC POLI
NERGORA N. P. B. M. N. N. N. N. N. N. MITORIA DISTRIBUTION OF	CENTER FOR UNION F.	ACTS							ISSUES RELATED TO LABOR
INGORON, DC 20005 20-4036946 501(C)(3) 149,950. 0,N/A N/A INFORMATION RE SAME Enter total number of section 501(c)(3) and government organizations Enter total number of other loganizations ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■	1090 VERMONT AVE N							,	UNIONS/DISTRIBUTION OF
Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations				501(c)(3)			N/A	N/A	INFORMATION RE SAME
Enter total number of section 501 (c)(3) and government organizations Enter total number of section 501 (c)(3) and government organizations									
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Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations									
Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations ▶									
Enter total number of other organizations		r of section 501(c)(3) and	d government or	ganizations					
	- 1	r of other organizations							A

Schedule I (Form 990) 2008 (f) Description of non-cash assistance (book, FMV, appraisal, other) LINE 2: THE ORGANIZATION'S MANAGEMENT COMPANY RECEIVES Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. PERIODIC REPORTS DETAILING THE EXACT USE OF GRANT FUNDS TO ENSURE (d) Amount of non-cash assistance COMPLIANCE WITH THE ORGANIZATION'S INTENDED PURPOSE. (c) Amount of cash grant 27 (b) Number of recipients (a) Type of grant or assistance PART I, SCHEDULE I, 832102 12-18-08

١,

Page 2

52-1902264

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

EMPLOYMENT POLICIES INSTITUTE FOUNDATION

Schedule I (Form 990) 2008

Part III

4

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that 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.

OMB No 1545-0047

							_					*****		
Name of the organization											Employe			number
F# 22 T = -		PLOYMEN									<u>52-19</u>	0226	4	
		Transact						_						
	mpleted by	organization	s that	answe	ered "Yes	on Form 99	0, Part IV	line 25a or	25b, or F	orm 9	<u>90∙EZ, Pa</u>	rt V, line	Т	
1 (a) f	Name of dis	qualified per	son				(b)	Description	of transa	ction				rected?
	. — -										·		Yes	No_
				_	- · - ·		-						1	
	•											<u> </u>	İ	
										-			-	
						 	-						 	
					-				_					
2 Enter the amount	t of tax impo	osed on the	organiz	ation	manager	s or disqualif	ied person	s during the	year un	der				
section 4958			-		•	,	·	J	•		▶ \$			
3 Enter the amount	t of tax, if ar	ny, on line 2,	above,	, reimt	oursed by	the organiz	ation				▶ \$			
F														
Part II Loans	to and/o	r From In	terest	ted F	Persons	5.								
		organization			red 'Yes	on Form 99	0, Part IV,	line 26, or f	orm 990)-EZ, P			,	
(a) Name of inte person and pur		(b) Loan the orga				nal principal nount	(d) Bal	ance due		In ault?	by bo	oroved ard or		/ritten ment?
porcon and por	, poso		T _		<u> </u>	ilouiit				· · ·		uttee?	-	T
		То	Fro	om					Yes	No	Yes	No	Yes	No
		 	<u> </u>						 					
									<u> </u>					\vdash
		<u>†</u>												
													<u></u>	
Total						▶ \$				···········		·		
Part III Grants	or Assis	tance Be	nefitii	ng In	tereste	ed Person	s.							
To be co	mpleted by	organization	s that a	answe	red "Yes	on Form 99	0, Part IV,	line 27.						
(a) Name of	interested	person	İ		(b) Relati	onship betw			and		(c) Amou			ре
						the or	ganization					f assista	ince	
										-				
								_		+				
				<u> </u>						-				
										 -				
Part IV Busine	ss Trans	actions Ir	rvolvi	ng Ir	nterest	ed Persor	ıs.							
		organization		-				lines 28a. 2	8b. or 28	Вс.				
(a) Name of						ıp between ı		(c) Amo) Descript	on of		aring of
.,	•	•				d the organiz		transa		`	transact			zation's nues?
													Yes	No
RICHARD BER						ENT COM					PENSE			X
RICHARD BER						ENT COM					NAGEM			Х
RICHARD BER	MAN AN	ID COMP	YNA	MAN.	AGEME	ENT COM	PANY	138	,123	•EX	PENSE	REI		X
										4			<u> </u>	<u> </u>
			_										1	l

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2008

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

EMPLOYMENT POLICIES INSTITUTE FOUNDATION

Employer identification number 52-1902264

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RESEARCH. OUR 2008 EFFORTS MADE AN IMPACT ON STATE AND FEDERAL LEVEL
DEBATES OVER EMPLOYMENT ISSUES, WE SUCCESSFULLY REACHED THE PUBLIC AND
POLICYMAKERS THROUGH OVER 200 MEDIA PLACEMENTS/CITATIONS, AND WE
EXPANDED EFFORTS TO REACH THE PUBLIC ABOUT ECONOMIC LITERACY.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
IN A JOINT PROJECT WITH CENTER FOR UNION FACTS, EMPLOYMENT POLICIES
INSTITUTE FOUNDATION CONTINUED TO PROVIDE CONTRIBUTIONS FOR AND
ASSISTANCE WITH RESEARCH AND ADVERTISING EFFORTS RELATED TO EDUCATION
INFORMATION ON EMPLOYEES AND THEIR RELATIONSHIPS WITH LABOR UNIONS.
EXPENSES \$ 203269. INCLUDING GRANTS OF \$ 149950. REVENUE \$ 0.
WROTE AND DISTRIBUTED APPROXIMATELY 28 OPINION EDITORIALS AND 72
LETTERS TO THE EDITOR WHICH WERE PUBLISHED. WROTE AND DISTRIBUTED OVER
30 PRESS RELEASES WITH RELATED INFORMATION ON MINIMUM WAGE AND ECONOMIC
LITERACY ISSUES. MEDIA OUTREACH RESULTED IN COVERAGE IN 86 RADIO OR TV
OUTLETS. SPOKESPERSONS WERE QUOTED IN A TOTAL OF 76 PRINT NEWS STORIES
DURING 2008.
EXPENSES \$ 93493. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 3: RICHARD BERMAN AND COMPANY, INC. IS
THE MANAGEMENT COMPANY FOR EMPLOYMENT POLICIES INSTITUTE FOUNDATION, AND IT
STAFFS AND OPERATES THE DAY-TO-DAY ACTIVITIES OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 TAX RETURN FOR

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

Schedule O (Form 990) 2008

SCHEDULE O

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

EMPLOYMENT POLICIES INSTITUTE FOUNDATION

Employer identification number 52-1902264

EMPLOYMENT POLICIES INSTITUTE FOUNDATION WAS PREPARED AND REVIEWED BY THE

MANAGEMENT COMPANY'S CPAS AFTER COMPLETION OF THE FINANCIAL AUDIT. THE

RETURN WAS THEN REVIEWED BY BOTH MANAGEMENT AND OUTSIDE ATTORNEYS BEFORE IT

WAS ELECTRONICALLY DELIVERED TO THE ORGANIZATION'S GOVERNING BODY AND THEN

TIMELY FILED.

FORM 990, PART VI, SECTION B, LINE 12C: EMPLOYMENT POLICIES INSTITUTE

FOUNDATION ANNUALLY REQUIRES THE OFFICERS AND DIRECTORS TO READ AND SIGN

THE POLICY AND TO DISCLOSE ANY CONFLICT OF INTEREST THEY MAY HAVE TO THE

ENTIRE BOARD. THE BOARD THEN DECIDES WHETHER OR NOT THERE EXISTS A

CONFLICT. ANY OFFICERS OR BOARD MEMBERS WITH CONFLICTS ARE RECUSED FROM

VOTING UPON ISSUES INVOLVING THEIR PARTICULAR CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE DIRECTORS AND EMPLOYEES IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS; PERSONS WITH CONFLICTS OF INTEREST REGARDING THE COMPENSATION ARRANGEMENT AT ISSUE ARE RECUSED. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING ARE DONE WITH RESPECT TO DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT. NO DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS WAS REVIEWED, DUE TO THE MINOR AMOUNT OF COMPENSATION PAID IN EACH CASE. BEGINNING IN 2009, COMPARABLE COMPENSATION DATA WILL BE REVIEWED.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH

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

Schedule O (Form 990) 2008

SCHEDULE O (Form 990)

1 . 1

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

EMPLOYMENT POLICIES INSTITUTE FOUNDATION

Employer identification number 52-1902264

OK, OR, PA, RI, SC, TN, VA, WA, WV, WI, DC
FORM 990, PART VI, SECTION C, LINE 19: EMPLOYMENT POLICIES INSTITUTE
FOUNDATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY AND FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION EXCEPT
THROUGH THOSE DOCUMENTS FILED WITH ITS FORM 1023 EXEMPTION APPLICATION
(COPY AVAILABLE UPON REQUEST AT THE ORGANIZATION'S HEADQUARTERS IN
WASHINGTON, DC) AS REQUIRED BY LAW.
FORM 990 PART XI, LINE 2C
EMPLOYMENT POLICIES INSTITUTE FOUNDATION HAS NOT CHANGED THE PROCESS OF
REVIEWING THE AUDITED FINANCIAL STATEMENTS OR THE PROCESS OF CHOOSING
THE ACCOUNTING FIRM THAT PERFORMS THE AUDIT.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: RICHARD BERMAN AND COMPANY, INC.
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
MANAGEMENT COMPANY TO ORGANIZATION
(D) DESCRIPTION OF TRANSACTION: EXPENSE REIMBURSEMENT INCOME AND
PASS-THROUGH CONTRIBUTIONS RECEIVED
(A) NAME OF PERSON: RICHARD BERMAN AND COMPANY, INC.
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
MANAGEMENT COMPANY TO ORGANIZATION
(D) DESCRIPTION OF TRANSACTION: MANAGEMENT FEES PAID
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization **Employer identification number** 52-1902264 EMPLOYMENT POLICIES INSTITUTE FOUNDATION (A) NAME OF PERSON: RICHARD BERMAN AND COMPANY, INC. RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: MANAGEMENT COMPANY TO ORGANIZATION (D) DESCRIPTION OF TRANSACTION: EXPENSE REIMBURSEMENTS PAID FORM 990 PAGE 1, ITEM C: SECOND DOING BUSINESS AS NAME EMPLOYMENT POLICIES INSTITUTE FOUNDATION ALSO CONDUCTED BUSINESS DURING 2008 AS ONE OF ITS PROJECT NAMES, CENTER FOR ECONOMIC & ENTREPRENEURIAL LITERACY. FORM 990, PART VI, SECTION B, LINE 14: STATUS OF WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY -A WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY IS CURRENTLY BEING DRAFTED FOR REVIEW BY THE BOARD MEMBERS OF EMPLOYMENT POLICIES INSTITUTE FOUNDATION DURING 2009. THE POLICY IS EXPECTED TO BE ADOPTED IN LATE 2009 OR EARLY 2010.

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

• If you	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box		ightharpoons X
• If yo	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)	
Do not	complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Fo	m 8868.
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corp	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	plete	
Part I o	nly		▶ □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar income tax returns	exten	sion of time
noted to (not au you mu	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cours submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	ically if	(1) you want the additional ated Form 990-T Instead,
Туре о	Name of Exempt Organization	Emp	loyer identification number
print		\ <u>_</u>	
File by th	EMPLOYMENT POLICIES INSTITUTE FOUNDATION	5	2-1902264
due date filing you return Se	for Number, street, and room or suite no. If a P.O. box, see instructions. 1090 VERMONT AVENUE. NW. NO. 800		
instructio			
Check	type of return to be filed (file a separate application for each return)		
X	Form 990 Form 990-T (corporation) Form 4	720	•
$\overline{}$	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52		
G F	Form 990-EZ Form 990-T (trust other than above) Form 60	069	
F	Form 990-PF	370	
Tele		ıs ıs fo	r the whole group, check this
_	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time una AUGUST 15, 2009, to file the exempt organization return for the organization named as for the organization's return for		The extension
	► X calendar year 2008 or		
J	tax year beginning, and ending		_
2 1	f this tax year is for less than 12 months, check reason.		Change in accounting period
3a	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
-	nonrefundable credits. See instructions.	3a	\$
b i	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
-	ax payments made Include any prior year overpayment allowed as a credit.	3b	\$
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	L	
	See instructions	3c	\$ N/A
Cautio	n. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 4-2009)

Form 8	868 (Rev. 4-2009)			Page 2		
	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check t			▶ 🗓		
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously	filed Fo	m 8868			
Part	u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). II Additional (Not Automatic) 3-Month Extension of Time. Only file the original					
Fait		7				
Туре	Name of Exempt Organization	=	mployer iden	tification number		
print	EMPLOYMENT POLICIES INSTITUTE FOUNDATION		52-1902264			
File by ti extende		F	or IRS use on			
due date						
return, S instructi	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			_		
Check	type of return to be filed (File a separate application for each return)			· · · · · · · · · · · · · · · · · · ·		
\mathbf{x}	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-/	` [Form 5227	Form 8870		
	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		Form 6069			
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a pr	eviously	filed Form 8	368.		
	THE BOOKKEEPER					
• The	books are in the care of > 1090 VERMONT AVENUE, NW #800 - WASHI	NGTO	N. DC 2	0005		
	ephone No. ► 202-463-7650 FAX No. ►		<u></u>			
• If ti	ne organization does not have an office or place of business in the United States, check this box			▶ □		
• If t	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is	s for the whole	e group, check this		
box	. If it is for part of the group, check this box . and attach a list with the names and EINs	of all me	mbers the ex	tension is for		
	request an additional 3-month extension of time until NOVEMBER 15, 2009					
	For calendar year 2008 , or other tax year beginning , and end	ding				
	If this tax year is for less than 12 months, check reason Initial return Final return	L	Change in	accounting period		
7	State in detail why you need the extension			W DD DD D D		
	ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION	10	PROPERL	Y PREPARE		
	THE TAX RETURN. If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
8a	nonrefundable credits. See instructions.	١,	8a \$			
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated		<u> </u>			
-	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	ĺ				
	previously with Form 8868.		Bb \$			
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, depos	it				
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruc	tions.	8c \$	N/A		
	Signature and Verification					
Under it is tru	penalties of perjury, indeclare that thave examined this form, including accompanying schedules and statements, an e, correct, and complete, and that ham authorized to prepare this form.	d to the be	est of my knowl	edge and belief,		
Signat	LIFE DIRECTOR		Date >	3/11/09		
			For	m 8868 (Rev. 4-2009)		

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