# COMMITTEE ON NATURAL RESOURCES Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Oversight hearing on "Creating American Jobs by Harnessing Our Resources: U.S. Offshore and Renewable Energy Production."

For Individuals:

- 1. Name: Kate Gordon
- 2. Address: [Information redacted for privacy]
- 3. Email Address: [Information redacted for privacy]
- 4. Phone Number: [Information redacted for privacy]

\* \* \* \* \*

For Witnesses Representing Organizations:

1. Name: Kate (Katherine) Gordon

2. Name of Organization(s) You are Representing at the Hearing: Center for American Progress Action Fund

- 3. Business Address: 1333 H St. NW, 10th Floor, Washington DC 20005
- 4. Business Email Address: [Information redacted for privacy]
- 5. Business Phone Number: [Information redacted for privacy]

Name/Organization	_Kate Gordon – Center for American Progress Action Fund
Title/Date of Hearing	_Creating American Jobs by Harnessing our Resources, 9/8/11

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Kate Gordon earned a J.D. and master's degree in city planning from the University of California-Berkeley, and an undergraduate degree from Wesleyan University.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Kate Gordon is a member of the State Bar of California.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Kate Gordon is the Vice President for Energy Policy at American Progress. Most recently, Kate was the codirector of the national Apollo Alliance, where she still serves as senior policy advisor.

Kate is nationally recognized for her work on the intersection of clean energy and economic development policy. She also has a long history of working on economic justice and labor issues. Before she joined the Apollo Alliance, Kate was a senior associate at the Center on Wisconsin Strategy, where she focused on corporate tax policy, progressive federalism, and rural economic development. Prior to that, she served as an employment and consumer rights litigator at Trial Lawyers for Public Justice in Oakland, CA. She is a primary or co-author on most of Apollo's major reports, including "The New Apollo Program," "Make it in America: The Apollo Green Manufacturing Action Plan," "Green-Collar Jobs in America's Cities," and the "New Energy" series. She is also the author of several published articles on contract fairness, federal preemption, mandatory arbitration litigation, and regional economic development.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony. No

 Name/Organization\_\_\_\_Kate Gordon, Center for American Progress Action Fund\_\_\_\_\_

 Title/Date of Hearing\_\_\_\_\_Creating American Jobs by Harnessing our Resources, 9/8/11\_\_\_\_\_

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Kate Gordon serves currently as Vice President for Energy Policy, at the Center for American Progress Action Fund.

h. Any federal grants or contracts (including subgrants or subcontracts) from the *Department of the Interior* 

(and /or other agencies invited) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

# None

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

# None

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None

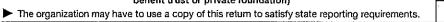
k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Emailed as pdf attachments under separate cover.

Return of Organization	Exempt From	Income Tax
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Form **990** 

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





		of the Treasury	benefit trust or private foundatio	•	en autina va autoana ata	Open to Public	
		enue Service	The organization may have to use a copy of this return to sati		reporting requirements.	Inspection	
				nding	1		
B	Check if opplicate	la riousu	C Name of organization		D Employer identific	ation number	
<u> </u>	⊐Addri	use IRS ass label or					
	_]chang ]Nemo	ge print or	CENTER FOR AMERICAN PROGRESS ACTION FUND			200	
	_]chang ]Initial		Doing Business As		30-0192	708	
	return ]Tørmi	1		Room/suite	E Telephone number		
<u> </u>	Jated Amer	Instruc-	1333 H STREET, NW 10TH FLOOR		(202)68		
	_tretuir Appli		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		G Gross receipts \$	8,998,678.	
	Jtiöö pend		,		H(a) Is this a group ref	personal per	
			ne and address of principal officer; JOHN PODESTA AS C ABOVE		for affiliates?		
1 7					H(b) Are all affiliates incl		
			$13: \times 501(c) (4) $ (insert no.) $4947(a)(1)$ or $527$		1 '	ist. (see instructions)	
			n: x Corporation Trust Association Other	1 Voor	H(c) Group exemption of formation: 2002		
	artl	Summ		L rear	on ionnation: 2002 M	State of legal domicile: DC	
-			scribe the organization's mission or most significant activities: SHAPE TE		WAL DOLLOW DEDAWE		
Activities & Governance	'		NSFORM IDEAS INTO POLICY.		WAD FOLICI DEBATE		
nar	2		s box      if the organization discontinued its operations or dispose	 		£ -	
ver			f voting members of the governing body (Part VI, line 1a)			sets.	
g	4	Number o	f independent voting members of the governing body (Part V), line Tay			·5	
⊲ර ග	•					0	
itie	6	Total num	ber of employees (Part V, line 2a) ber of volunteers (estimate if necessary)		6		
€ţ		Total gros	s unrelated business revenue from Part VIII, column (C), line 12	•••••		138,428.	
حَ	b	Net unrels	ated business taxable income from Form 990-T, line 34	••••••	7a 7b	79,319,	
				1	Prior Year	Current Year	
-	8	Contributi	ons and grants (Part VIII, line 1h)		8,653,399,	8,839,425.	
nu			service revenue (Part VIII, line 2g)				
Revenue	10						
æ	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		187,470,	2,285.	
			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,855,265,	8,966,943.	
			d similar amounts paid (Part IX, column (A), lines 1-3)		127,000.	212,000.	
			aid to or for members (Part IX, column (A), line 4)				
ŝ			other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,968,755.	4,465,569.	
Expenses	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		121 750		
ê.	b	Total fund	raising expenses (Part IX, column (D), line 25)				
ш	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u> </u> ·	3,362,997.	2,789,243.	
	18	Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		7,580,502.	7,466,812.	
	19		ess expenses. Subtract line 18 from line 12		1,274,763.	1,500,131,	
sets or alances				1	ginning of Current Year	End of Year	
sets alan	20	Total asse	ts (Part X, line 16)		3,445,246.	3,970,349.	
Pund Ba	21	Total liabil	ities (Part X, line 26)		1,092,986.	117,958.	
25	22	Net assets	s or fund balances. Subtract line 21 from line 20		2,352,260.	3,852,391.	
Pa	irt II	Signat	ture Block		· · · · · · · · · · · · · · · · · · ·		
		Under penal and complet	ties of perlury, I declare that I have examined this return, including accompanying schedules and s ie. Declaration of preparer (other than officer) is based on all information of which preparer has any	statements, a	ind to the best of my knowledge	and belief, it is true, correct,	
				y knowledge.			
Sigr	ı				1		
Her	e	Sign	ature of officer		Date		
			RA TANDEN , TREASURER/COO				
		📕 Туре	or print name and title				
Paid		Preparer's		1 14	ck if Preparer	s identifying number uctions)	
	arer's	signature	Janho Ilsho		ployed 🕨 🔛	······	
Use		Firm's name yours if	DARSONALIEN LEP		EIN 🕨	<u> </u>	
		self-employe address, and					
		ZIP + 4	ARLINGTON, VA 22206		Phone no. 🕨 703	-998-5100	
May	the If	RS discuss	this return with the preparer shown above? (see instructions)		······································	X Yes No	
02200	1 00 0		A For Privacy Act and Panenuark Reduction Act Nation and the serve				

001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 8	868 (Rev. 4-2009)		Page 2			
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	ox	▶ 🛛			
Note.	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	i Form	1 8868.			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Parl			· · · · · · · · · · · · · · · · · · ·			
Туре	Name of Exempt Organization	Em	oloyer identification number			
print	CENTER FOR AMERICAN PROGRESS ACTION FUND	30-0192708				
File by the extended due date	Number, street, and room or suite no. If a P.O. box, see instructions.	For	IRS use only			
filing the return. S instruction	Oity, 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):		······································			
	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	E	orm 5227 Form 8870			
	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	F	orm 6069			
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	ısly fil	ed Form 8868.			
	THE ORGANIZATION					
• The	books are in the care of  1333 H STREET, NW, 10TH FLOOR - WASHING	TON	I. DC 20005			
Tele	ephone No. ► (212)682-1611 FAX No. ►					
• If th	e organization does not have an office or place of business in the United States, check this box		<b>&gt;</b>			
● If th	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th	is is fo	r the whole 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	memt	pers the extension is for.			
	request an additional 3-month extension of time until <b>NOVEMBER 15, 2010</b> .					
	or calendar year 2009, or other tax year beginning		,•			
	f this tax year is for less than 12 months, check reason:		Change in accounting period			
	State in detail why you need the extension					
	MORE TIME IS NEEDED TO COMPILE THE INFORMATION NECESSA	RY	TO PROVIDE			
	A COMPLETE AND ACCURATE RETURN	-				
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
_	nonrefundable credits. See instructions.	<b>8</b> a	\$			
	this application is for Form 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimated					
	ax payments made. Include any prior year overpayment allowed as a credit and any amount paid	·				
	previously with Form 8868.	8b	\$			
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit					
	vith FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	<u>\$ N/A</u>			
Lindor n	Signature and Verification	<b>.</b>	A the dealer and the state			
it is true	enalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the , correct, and complete, and that I am authorized to prepare this form.	e dest o	if my knowledge and belief,			
<u>Signatur</u>	E May for Title ► STAFF ACCOUNTANT	Date	►08/12/10			
	/ <i>v</i>		Eorm 9969 (Pay 4-2000)			

Date > 08/12/10 Form 8868 (Rev. 4-2009)

(Rev. A Departm	<b>8868</b> April 2009) ent of the Treasury tevenue Service	Application for Extension of Time To File an Exempt Organization Return File a separate application for each return.		OMB No. 1545-1709
• If yo	u are filing for an Add	pmatic 3-Month Extension, complete only Part I and check this box itional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this for ess you have already been granted an automatic 3-month extension on a previously file	orm).	
Part	Automatic	: 3-Month Extension of Time. Only submit original (no copies needed).		
A corp Part I d	•	Form 990-T and requesting an automatic 6-month extension - check this box and comp	lete	
	er corporations (includ ncome tax returns.	ing 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an e	extensi	on of time
Electro noted I (not au you mu	onic Filing (e-file). Ge below (6 months for a tomatic) 3-month exte ust submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension corporation required to file Form 990-T). However, you cannot file Form 8868 electronica insion or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cons mpleted and signed page 2 (Part II) of Form 8868. For more details on the electronic filin <u>n e-file for Charities &amp; Nonprofits.</u>	ally if ( solidati	l) you want the additional ed Form 990-T. Instead,
Туре с	r Name of Exempt	Organization E	Emplo	yer identification number
print		OR AMERICAN PROGRESS ACTION FUND	30	-0192708
File by th due date filing you return. Se	for Number, street,	and room or suite no. If a P.O. box, see instructions. TREET, NW 10TH FLOOR		
instructio	<sup>ns.</sup> City, town or pos	st office, state, and ZIP code. For a foreign address, see instructions. ON , DC $20005$		
	Form 990 Form 990-BL Form 990-EZ Form 990-PF	filed(file a separate application for each return):  Form 990-T (corporation) Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 990-T (trust other than above) Form 1041-A Form 8870 SARAH ROSEN WARTELL	7 9 0	
Tele If th If th	phone No.   (21) e organization does n is is for a Group Retur	of ▶ 1333 H STREET, NW, 10TH FLOOR - WASHINGT         2)682-1611       FAX No. ▶         ot have an office or place of business in the United States, check this box         n, enter the organization's four digit Group Exemption Number (GEN)       . If this is of the group, check this box ▶	is for t	he whole group, check this
	request an automatic AUGUST 15 s for the organization's ► X calendar year ► tax year begin	s return for: 2009 or	ove. Tr	ne extension
2 li	this tax year is for les	s than 12 months, check reason: Initial return Final return	□ cł	nange in accounting period
	this application is for onrefundable credits.	Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any See instructions.	3a 3	\$
		Form 990-PF or 990-T, enter any refundable credits and estimated		• —
c E	alance Due. Subtrac	t line 3b from line 3a. Include your payment with this form, or, if required, on or, if required, by using EFTPS (Electronic Federal Tax Payment System).		\$ \$ N/A
(		nake an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88		· · · · · · · · · · · · · · · · · · ·

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

Form 8868 (Rev. 4-2009)

	1990 (2009) CENTER FOR AMERICAN PROGRESS ACTION FUND		
Par	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION		
	TO IMPACT THE NATIONAL DEBATE AND TRANSFORM PROGRESSIVE IDEAS INTO		
	POLICY THROUGH RAPID RESPONSE COMMUNICATIONS, PUBLIC EDUCATION,	· · · · · · · · · · · · · · · · · · ·	
	GRASSROOTS ORGANIZATION AND ADVOCACY IN PARTNERSHIP WITH AMERICAN		
	CITIZENS, EXECUTIVE AND LEGISLATIVE BRANCH POLICYMAKERS AND		
2	Did the organization undertake any significant program services during the year which were		
	the prior Form 990 or 990-EZ?		Yes X
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any	program services?	🗌 Yes 🗵
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest pro-	gram services by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to re	· •	
	allocations to others, the total expenses, and revenue, if any, for each program service repo	nted.	
4a	(Code: ) (Expenses \$ 4,767,893. including grants of \$	212,000.)(Revenue \$	
	TO IMPACT THE NATIONAL DEBATE AND TRANSFORM PROGRESSIVE IDEAS INTO		
	POLICY THROUGH RAPID RESPONSE COMMUNICATIONS, PUBLIC EDUCATION,		
	GRASSROOTS ORGANIZING AND ADVOCACY IN PARTNERSHIP WITH AMERICAN		
	CITIZENS, EXECUTIVE AND LEGISLATIVE BRANCH POLICYMAKERS AND PROGRESS	TAR.	
	LEADERS THROUGHOUT THE COUNTRY AND THE WORLD.		
46			
4b	(Code: ) (Expenses \$ 1,847,931. including grants of \$	) (Revenue \$	
	TO PROMOTE A PROGRESSIVE AGENDA UTILIZING A MODERN COMMUNICATIONS	) (Revenue \$	
	TO PROMOTE A PROGRESSIVE AGENDA UTILIZING A MODERN COMMUNICATIONS PLATFORM THAT REACHES ONLINE AUDIENCES WITH WEB SITE PUBLICATIONS,	) (Revenue \$	
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4c	TO PROMOTE À PROGRESSIVE ÀGENDA UTILIZING À MODERN COMMUNICATIONS PLATFORM THAT REACHES ONLINE AUDIENCES WITH WEB SITE PUBLICATIONS, EMAIL OUTREACH, AND NEW MEDIA. (Code: ) (Expenses \$ including grants of \$ (Code: ) (Expenses \$ including grants of \$ Code: ) (Expense \$ including grants of \$ Code: ) (Expense \$ including grants of \$ Code: ) (Expense \$ including	) (Revenue \$	Form 990 (2

1990 (2009) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708		9	age							
rtiv Checklist of Required Schedules		Vac								
Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)?	[	res	No							
	1		x							
Is the organization required to complete Schedule B. Schedule of Contributors?										
	1 2	x								
Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Ves." complete Schedule C. Part II										
	5		x							
	<b>–</b>	[								
	6	1	x							
	<u> </u>	<u> </u>								
	7		x							
Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u>⊢</u>									
			x							
Did the groupization report an amount in Part X line 21; serve as a custodian for amounts not listed in Part Y: or provide	<u> </u>									
			x							
	- <del>9</del> -		^							
If "Yes " complete Schedule D. Part V										
Is the organization's answer to any of the following quantians "Voc"? If so, complete Schedule D. Date 1/1 ///1 ///1 ///	10		x							
	11									
	1.1	et de								
			ана 14							
			1.1							
	1	4 - 14 - 14								
Did the organization's separate or consolidated financial statements for the texperimeter's complete Schedule D, Part X.										
the organization's separate of consolidated infancial statements for the tax year include a roothote that addresses			2							
Did the organization obtain senarate independent sudited formation attainment (with a forward $0$ for the formation of the f			. :							
	1		1.25							
Was the organization included in consolidated independent audited for a site statements (authority or a second	12	x								
Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12	<u>x</u>								
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		X								
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       X         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Did the organization maintain an office, employees, or agents outside of the United States?		X								
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       X         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Did the organization maintain an office, employees, or agents outside of the United States?         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business	13	X	x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       X         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Did the organization maintain an office, employees, or agents outside of the United States?         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	13	<b>X</b>	X							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Did the organization maintain an office, employees, or agents outside of the United States?         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	13 14a	<b>X</b>	x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12A       x         Did the organization maintain an office, employees, or agents outside of the United States?       100 </td <td>13 14a</td> <td><b>X</b></td> <td>x</td>	13 14a	<b>X</b>	x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12A       x         Did the organization maintain an office, employees, or agents outside of the United States?       1000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       1000 for grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       112A         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization       112A         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals       112A	13 14a 14b	<b>X</b>	x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12A       x         Did the organization maintain an office, employees, or agents outside of the United States?       12A       x         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       12A       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II       12A       12	13 14a 14b	X	x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       Did the organization maintain an office, employees, or agents outside of the United States?         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III         Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.	13 14a 14b 15	X	x x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12A       x         Did the organization maintain an office, employees, or agents outside of the United States?       12A       x         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       12A       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       12A       12A <td>13 14a 14b 15</td> <td>X</td> <td>x x x x</td>	13 14a 14b 15	X	x x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12A       x         Did the organization maintain an office, employees, or agents outside of the United States?       12A       x         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       12A       12A       x         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       12A       12A <td>13 14a 14b 15 16</td> <td>X</td> <td>x x x x x</td>	13 14a 14b 15 16	X	x x x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       10       10         Did the organization maintain an office, employees, or agents outside of the United States?       10       10         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       10         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       11         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II       11         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III       11         Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       11         Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       11	13 14a 14b 15 16	x	x x x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12A       x         Did the organization maintain an office, employees, or agents outside of the United States?       1000000000000000000000000000000000000	13 14a 14b 15 16 17		x x x x x							
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional       12A       x         Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       10       10         Did the organization maintain an office, employees, or agents outside of the United States?       10       10         Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I       10         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II       11         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II       11         Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III       11         Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       11         Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       11	13 14a 14b 15 16 17		x x x x							
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. B the organization subject to the section 603(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negoliation services? If "Yes," complete Schedule D, Part IV Is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IV. Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, Did the organization report an amount for other assets in Part X, line 13 that is	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?       Yes         If "Yes," complete Schedule A       1         Is the organization required to complete Schedule B, Schedule of Contributors?       2         Did the organization required to complete Schedule B, Schedule C, Part I       3         Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II       4         Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations, Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II       6         Did the organization maintian any domor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II       7         Did the organization maintian or domor advised funds or art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       7         Did the organization maintian collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       7         Did the organization and many end repeate painties assets? If "Yes," complete Schedule D, Part IV       9         Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credic curseling, debt management, credit repair, or deve serves? If so, complete Schedule D, Part IV       9         Did the organization report an amount for land, buildings, and equipment in Part X, line 10? II "Yes," com							

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	990 (2009) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708		Ρ	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
L			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		<b> </b>	
	column (A), line 2? If 'Yes," complete Schedule I, Parts I and III	22	1	х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	<u> </u>		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		[	
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If *No", go to line 25	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization ministrin an escrow account other than a refunding escrow at any time during the year to defease	240	<u> </u>	
U	any tax-exempt bonds?	040		
4	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		<u> </u>
		240		
200	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
1-	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			· · ·
	instructions for applicable filing thresholds, conditions, and exceptions):			1
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? // "Yes,' complete Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? if "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes,* complete Schedule M	29		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		х
31	Did the organization liquídate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If *Yes,* complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
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?	33		
	If "Yes," complete Schedule R, Part V, line 2			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			÷
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37		x
	Note. All Form 990 filers are required to complete Schedule O.		x	
•		38		

÷

Form **990** (2009)

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Part V         Statements Regarding Othor IRS Filings and Tax Compliance           1a         Inter the number reported in Box 3 of Form 1095, Annual summary and Transmittal of U.S. Information Returns. Enter -0 if not applicable         1a         33           1b         Enter the number of Form W43 Included in line 1a. Enter -0 if not applicable         1a         33           2a         Enter the number of Form W43 Instantiat of Wage and Tax Statements.         2a         1a         33           2a         Enter the number of Form W43. Transmittal of Wage and Tax Statements.         2a         0         2b           3a         Date enginization incompt with backup withholding uils for reportable payment tax veturns?         2b         2b         2b           3a         Date enginization have unrelated builtings account by enginet to its veturns?         2b         3a         X           bit 11 **s, * the acter mass 2D, vour by for anginetation in Schedule 0         3a         X         3b         X           bit 11 **s, * the time farm of the orgen routry (buch as a tak account, securities account), or other financial account?         3a         X           bit 11 **s, * the farm 60 **s did tak at alter transaction at any time during the tax year?         5a         X         X           bit 11 **s, * the farm 60 **s did tak at alter transaction at any time during the accounts accounth accounth?         5a         X         <	Form	1990 (2009) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-019270	3	۶	Page 5
1a       Enter the number reported in Box 3 of Form 1056, Annual Summary and Transmitted of U.S. Information Returns: Enter 0 if not applicable       11       33         b       Enter the number of Forms W2G included in line 1a. Enter 0 if not applicable       10       0         c       Did the organization compty with backup With boding rules for reportable gammars to vendors and reportable gaming (ganding) witings to prate winners?       2a       Enter the number of Forms W2G included in line 1a. Enter 0 if not applicable       2a       0         2a       Enter the number of applicable winners?       2a       0       2a         2b       If a test one's reported on Ifine 2a, did the organization file all required federal employment tax returns?       2b       3a         3b       Did the organization have similation a SQL your myb the required to their strunt, cee instructions)       3a       3a         3c       Did the organization have an interest in, or a signature or other subordy over, a francial account in a forelphot Tow this year?       4a       x         5c       Max the organization file or explorements for Form TD F 90.22.1, Report of Foreign Bank and Francial Accounts.       5a       x         5c       Bid structure tax deductable?       5a       x       5a       x         5c       Did any taxable party notify the organization file form 8887. Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Stateret Transaction?       5a	Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
U.S. Information Returns: Enter -0- find applicable       13       33         b       Enter the number of forms W23 include in line 1s. Enter -0- find applicable       10       0         c       Did the organization compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       10       X         2       Enter the number of employees reported on from W-3, Transmittat of Wage and Tax Statements, indef for the calendar year ending with the year covered by this return?       20       10       X       20         3       Did the organization how entered to within the year covered by this return?       20 <td< th=""><th>· · · · ·</th><th></th><th></th><th>Yes</th><th>No</th></td<>	· · · · ·			Yes	No
U.S. Information Returns: Enter -0- find applicable       13       33         b       Enter the number of forms W23 include in line 1s. Enter -0- find applicable       10       0         c       Did the organization compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       10       X         2       Enter the number of employees reported on from W-3, Transmittat of Wage and Tax Statements, indef for the calendar year ending with the year covered by this return?       20       10       X       20         3       Did the organization how entered to within the year covered by this return?       20 <td< td=""><td>Ta</td><td>Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of</td><td></td><td>: '</td><td></td></td<>	Ta	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		: '	
b       Enter the number of Forms W23 included in line 1a. Enter 0- if not applicable       Int the comparization comply with backup witholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Image: Comparization comply with backup witholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?       Image: Comparization comply with seture the vendors and reportable gaming (gambling) winnings to prize winners?       Image: Comparization comply with seture the vendors of the vend			3		· ·
c       Did the organization comply with backup withholding ules for reportable payments to vendors and reportable gaming in the symbol winnes?       1         2a       East the number of employees reported on Fam W3. Transmittal of Wage and Tax Statements. In the sum of these 3, did the organization is a lenguiced federal employment tax returns?       2a         2b       If at least one is reported on the sa, did the organization is a lenguiced federal employment tax returns?       2b         3b       If at least one is reported on the sa, did the organization have an explanation is <i>Checulus</i> 0       3b       3b         3b       If at least one is reported on the sa, did the organization have an interest in, or a signature or other authority over, a francial account is dreign country (such as a bank account, securities account)?       3b       3b         3c       At any time of the organization have an interest in, or a signature or other financial account?       4s       x         3c       If 'Yes,' hast field a foreign country (such as a bank account, securities account, or other financial account?       4s       x         3c       Was the organization have annual gross receipts that are normally greater than stitus.       5a       x         3c       Was the organization and alling requirements for Form TD F 9022.1, Report of Foreign Bank and Financial Account?       5a       x         3c       Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit an yrochrib	b		ō		[
gambling) winnings to prize winners?       10       X         2a       Enter the number of employees reported on Fram W-3, Transmittal of Wage and Tax Statements, Image and Zas Statements, Image and Zas Statement Haz 250, your may be required to effect an employment tax returns?       2a         b       If at least one is reported on line 2a, idd the organization like all required federal employment tax returns?       2b         3b       Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this rotum?       3a       X         3b       Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this rotum?       3b       X         3a       Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this rotum?       3b       X         3c       Traves, the sittled a Form SMD Form Signary H*//W-/provide an arxis account, or other financial account?       4a       X         3c       W 1*Yes, 't dine 5a or 5b, did the organization tax sheler transaction at any time during the tax year?       5a       X         3c       Was the organization a party to a prohibited tax sheler transaction at any time during the tax year?       5a       X         3c       Was the organization nave gross receipts that are normally greater than \$100,000, and did the organization solid arx deductible?       5b       X         3c       I *Yes, 'did the organization mobility	С		1		
2a       Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, tealmany are contending with or within the year covered by this return.       2a       0         b       If at least one is reported on line 2a, did the organization lile all required federal employment tax returns?       2a       0         b       If at least one is reported on line 2a, did the organization lile all required to derat employment tax returns?       2a       2a         b       If "Yes," has if field a Form 980-T for this year? // "/w," provide an explanation in Schedule O       3a       X         b       If "Yes," has if field a Form 980-T for this year? // "/w," provide an explanation in Schedule O       3a       X         b       If "Yes," thas if field a Form 980-T for this year? // "/w," provide tax shall account;       3a       X         See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bark and Financial Accounts.       5a       X         b       Id any taxable party notify the organization fast was or ls a party to a prohibited tax shelter transaction?       5b       X         c       If "Yes," other the name of the foreign Country.       5a       X       5b       X         c       If "Yes," other the name of the foreign Early to a prohibited tax shelter transaction?       5b       X         c       If "Yes," other the namo of the foreign Early to a prohibited tax shelter			te	x	
field for the calendar year ending with or within the year covered by this return       2a       0         b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b         3a Dd the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?       3a       X         b If 'Yes, 'the stifted a Form Bood's Tor this year.' If 'No', provide an explanation in Schedule O       3b       X         4a At any time during the calendar year, did the organization have an Interest II, or a signature or other authority over, a financial account; a control other guinosity, explain the calendar year, did the organization have an Interest II, or a signature or other authority over, a financial account; or other financial account; a doreign country (busich as a bank account, er other financial account)?       4a       x         b If 'Yes,' enter the name of the foreign country.'P       See the instructions for exceptions and filing requirements for Form TD F 9022.1, Report of Foreign Bank and Financial Accounts.       5a       x         5a       Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization folder of the reganization file Form 880-7. Obscioure by TaxEisempt Entity Regarding Prohibited Tax Shelter Transaction?       5a       X         6a       X       If 'Yes,' to line 6a or 5b, did the organization file form 880-7. Obscioure by TaxEisempt Entity Regarding Prohibited Tax Shelter Transaction?       5a       X         7 Organization notity the donor of t	2a				<u> </u>
b       If at least one is reported on line 2a, did the organization lie all required federal employment tax returns?       2a         3a       Did the organization have umelated business gross income of \$1,000 or more during the year covered by this return?       2a       X         b       If "Yes," has It filed a form 590-T for this year? If "No," provide an explanation in Schedule O       2a       X         b       If "Yes," has It filed a form 590-T for this year? If "No," provide an explanation in Schedule O       2a       X         b       If "Yes," has It filed a form 590-T for this year? If "No," provide an explanation in Schedule O       2a       X         b       If "Yes," has It filed a form 590-T for this year? If "No," provide an explanation in Schedule O       2a       X         b       If "Yes," there the name of the foreign country, b       5a       X       4a       X         See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         b       Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c       If "Ses," to its fore schedular time form 886-T. Disclosure by Tax-Exempt Entity Regarding Prohibited Tax shelter Transaction?       5c			0		
Note. If the sum of lines 1 and 2 als greater than 250, you may be required to e-file this return, isee instructions)       3a       X         3b       Dift the organization have unnelled builses gross income of \$1,000 or more during the year covered by this return?       3a       X         4a       At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a francial account in a foreign country; but is as a bark account, securities account, or other financial account)?       4a       X         5b       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a       Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a       Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solidit any contributions that was on a party to a prohibited tax shelter transaction?       5a       X         5a       Did any taxable party notify the organization file Form \$886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax shelter Transaction?       5a       X         5a       If "Yes," to line 5a or 5b, did the organization file Form \$886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax shelter transaction?       5a       X         5a       If "Yes," to line 5a or 5b, did the organization neity every solicitation an express statement that \$00,000,00,and did the organization solicitan any receive	b		- 2h		ľ
3a       Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?       2a       X         b       If 'Yes,' has if file a Form 390 T for this yea? (I' Mo', 'provide an explanation in Schedule O       3b       X         a       At any time during the calendar year, (if the organization have an interest in, or a signature or other authority over, a financial account in a foreign country.) ►       3b       X         b       If 'Yes,' then the mane 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.       5a       X         See Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5b       X         b       If 'Yes,' to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction?       5b       X         6a       Does the organization argues receipts that are normally greater than \$100,000, and did the organization solicit any contributions that way receive deductible?       7a       X         b       If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts ware not tax deductible?       7a       X         b       If 'Yes,' idd the organization notify the donor of the value of the goods or services provided?       7a       X         c       Organization, during the year, cective any fun				na a	100
b       11 "Yes," has it field a Form 990-T for this year? If "No," provide an explanation in Schedule O       3b       X         4a       At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a francial account in a foreign country; Isuch as a bank account, securities account, or other financial account?       4a       X         b       If "Yes," enter the name of the foreign country; Isuch as a bank account, securities account, or other financial account?       5a       X         5a       Was the organization to party to a prohibited tax shelter transaction?       5b       X         5a       Was the organization in party to a prohibited tax shelter transaction?       5b       X         5a       Was the organization include with every solicitation an express statement that \$\subscript{Regarding Prohibited tax shelter transaction?       5c       X         5a       If "Yes," to line 6a or 5b, did the organization file form 88867. Disclosure by Tax-Exempt Entity Regarding Prohibited tax shelter transaction?       5c       X         5b       If "Yes," to line 6a or 5b, did the organization include with every solicitation an express statement that \$\subscript{tax}\$ account and property for which it was required       5c       X         6a       X       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a       X         10       If Yes," did the organization motify the donor of the	3a				
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 forelign country (such as a bank account, securities account, or other financial account)?       4a       x         b       If "ves," enter the name of the foreign country: >       5a       x         See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       x         b       Id any taxeleic party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c       If "ves," id id the organization file form B886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5c       5c         Ga       Does the organization include with every solicitation an express statement that such contributions solicit any contributions that were not tax deductible?       5c       x         7       Organization necleve a payment in excess of 375 made party as a contribution and party for goods and services provided to the payor?       7a       x         10       the organization notify the organization notify the organization and party for which it was required       7c       x         7       Organizations endite, any pay premiums, directly or indirectly, to pay premiums on a personal property for which it was required       7a       x         7       If "ves, ' indicate the number of Forms 5222 filed during				+	†
francial account in a foreign country (such as a bank account, securities account, or other financial account)?     4a     X       b If "Yes," enter the name of the foreign country:					
b       If "Yes," enter the name of the foreign country:          See the instructions for exceptions and filing requirements for Form TD F 9022.1, Report of Foreign Bank and       See the instructions for exceptions and filing requirements for Form TD F 9022.1, Report of Foreign Bank and         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       Se         b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       Sb       X         c1       Yes," to line 5a or 5b, did the organization flat it was or is a party to a prohibited tax shelter transaction?       Se       Se         C8       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions include with every solicitation an express statement that such contributions orgits       Se       x         b       If "Yes," did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       To       Za       Xa         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       To       Za       X         c1       Uf the organization and party exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       To       Za       Za         c1       If "Yes," indicate the number of Forms 8282 file			1 42		v
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and <ul> <li>Financial Accounts.</li> <li>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</li> <li>Did any taxable party notify the organization flat it was or is a party to a prohibited tax shelter transaction?</li> <li>B / X</li> <li>If "Yes," to line 5a or 5b, did the organization flat form 88867. Disclosure by Tax-Exempt Entity Regarding Prohibited</li> <li>Tax Shelter Transaction?</li> <li>B / X</li> </ul> <ul> <li>If "Yes," to line 5a or 5b, did the organization flat form 88867. Disclosure by Tax-Exempt Entity Regarding Prohibited</li> <li>Tax Shelter Transaction?</li> <li>B / Yes," did the organization include with every solicitation an express statement that such contributions or gifts</li> <li>B / Yes," did the organization include with every solicitation an express statement that such contributions or gifts</li> <li>B / Yes," did the organization notify the donor of the value of the goods or services provided?</li> <li>Ta / X</li> <li>D / Yes, "to dicate the number of Forms 8282 filed during the year</li> <li>Td</li> <li>Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</li> <li>Did the organization, during the year, provided funds, directly or indirectly, to pay premiums on a personal benefit contract?</li> <li>Did the organization, during the year, provide funds, and section 509(a)(3) supporting organizations. Did the supporting organizations. Did the supportability organization is a distribution or advised fund as and section 509(a)(3) supporting organizations. Did the supportabito</li></ul>	h		40	1916	
Financial Accounts.       Sa       Xas the organization a party to a prohibited tax shelter transaction at any time during the tax year?       Sa       X         Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       Sb       X         C II 'Yes,' to line 5a or 5b, did the organization file Form 8886-T. Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       Sc       Sc         G Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?       Sc       Sc         D If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Sc       Sc         7 Organizations that may receive deductible contributions under section 170(c).       B X       Sc       Sc         7 Did the organization notify the donor of the value of the goods or services provided?       7a       X         7 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?       To       X         0 did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       To       X         10 did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Td       X         10	~			i lii te v	n an Singera
5a       Xa       Sa       X         b       Did any texable party notify the organization that it was or is a party to a prohibited tax shetter transaction?       Sb       X         c       If "Yes," to line Sa or Sb, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited       Sc       Sc         6a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?       Ga       X         c       Organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Ga       X         c       Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       Ta       X         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       To       Ta       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       Td       X       Td       X         f       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Td       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on pay premiums on a personal benefit contract?       Td       X         f <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5c       5c         GB Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?       6a       X         f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       X         7 Organization shat may receive deductible contributions under section 170(c).       6b       X         7 Organization notify the donor of the value of the goods or services provided?       7a       X         7 b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         8 If "Yes," indicate the number of Form 8282 filed during the year       Id       I''       Yes, 'indicate the number of Form 8282 filed during the year       Id       Yes, 'indicate the number of Form 8282 filed during the year       Id       Yes, 'indicate the number of Form 8282 filed during the year       Yd       X         9 boreatizetion, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7t       X       X         9 borenerito contrubutions of qualified intellectu	5-				
c       If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5c         6       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       X         7       Organization stat and the organization notify the donor of the value of the goods or services provided?       7a       X         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a       X         b       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         file form 8282?       7d       7d       X       7d       X         g       For all contributions of qualified intellectual property, did the organization file Form 8698 as required?       7d       X         g       For all contributions of qualified intellectual property, did the organization, have excess business holdings at any time during the year?       7d       X         g       For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1088-Cas required?       7h       X <td< td=""><td></td><td></td><td></td><td></td><td><b>I</b></td></td<>					<b>I</b>
Tax Shelter Transaction?       5c         Ge Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?       6a       x         b If "Yes," did the organization include with every solicitation an express statement that such contributions or gits were not tax deductible?       6a       x         c Organizations that may receive deductible contributions under section 170(c).       a Did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       x         c Did the organization notify the donor of the value of the goods or services provided?       7a       x         c Did the organization, during the year, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       x         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       x         f Did the organization, during the year, neceive any trunds, directly or indirectly, to pay premiums on a personal benefit contract?       7g       7t       X         g For all contributions of qualified Intellectual property, did the organization, during the year, any premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7g       7h       X         g For all contributions of qualified Intellectual property, did the organization file a Form 8898 as required?       7h       X       Spo	0	If "Yes," to line for or the did the experiencian file form \$886 T. Disclosure by Tey Function France time of the form the file	5b		<u> </u>
Ga       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?       Ga       X         b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Gb       X         7       Organizations that may receive deductible contributions under section 170(c).       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       X         7       Did the organization notify the donor of the value of the goods or services provided?       7b       To         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required       7c       x         d       If "Yes," indicate the number of Forms £282 filed during the year       7d       7d       7e       x         f       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7fd       X         f       Did the organizations maintaining donor advised fund sand section 509(a)(3) supporting organizations. Did the supporting organization, and other vehicles, did the organization, have excess business holdings at any time during the year?       7d       7fd       7h       Section 501(c)(7) reganization make any taxable distributions under section 4966?       9a       9a <td>C</td> <td></td> <td></td> <td>Ì</td> <td>i i</td>	C			Ì	i i
any contributions that were not tax deductible?       6a       x         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts       6b       x         7       Organizations that may receive deductible contributions under section 170(c).       6b       x         10       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       x         11       "Yes," did the organization notify the donor of the value of the goods or services provided?       7b	<i>c</i> -	Tax Shelter Transaction?	5c	<u> </u>	<u> </u>
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts       6b       x         organizations that may receive deductible contributions under section 170(c).       a       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       x         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b	03				
were not tax deductible?       6b       x         7       Organizations that may receive deductible contributions under section 170(c).       a       bit the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       x         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       x         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       x         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       x         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       x         f       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         f       Did the organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations, and ohor advised funds.       8       9         gonsoring organization maintaining donor advised funds.       9a       9a       9a       9a       9a		any contributions that were not tax deductible?	-6a	X	<b> </b>
7       Organizations that may receive deductible contributions under section 170(c).       a         a       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       x         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       x         d       If "Yes," indicate the number of Forms 8282 filed during the year.       7d       7d       x         e       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       x         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7h       x         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.       7h       x         8       Sponsoring organization make and taxibutions under section 4966?       9a       9b       9a         9       Sponsoring organizations. Enter:       10b       10a       10a       10b         11       10b       10a       10a       10a       10a       10a       10a </td <td>D</td> <td><b>.</b></td> <td>i i</td> <td>ł</td> <td></td>	D	<b>.</b>	i i	ł	
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provided to the payor?     7a     X       b If "Yes," did the organization notify the donor of the value of the goods or services provided?     7b       c Did the organization sell, exchange, or otherwise dispose of tanglble personal property for which it was required     7c     X       d If "Yes," indicate the number of Forms 8282 filed during the year     7d     7c     X       d If "Yes," indicate the number of Forms 8282 filed during the year     7d     7c     X       e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7c     X       f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?     7d     X       g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?     7g     7h       8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.     8a       9 Sponsoring organizations maintaining donor advised funds.     8a       9 Did the organization make any taxable distributions under section 4966?     9a       9 Did the organizations maintaining donor advisor, or related person?     9b       10 Section 501(c)(7) organizations. Enter:     10a       a Did the organizations from members or shareholders     11a       11 Section 501(c)(12) organizations. Enter:     10b					[ :
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization notify the donor of the value of the goods or services provided?       7c       x         c       Did the organization notify the donor of the value of the goods or services provided?       7c       x         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       x         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7t       x         e       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       x         f       Did the organization of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h         h       For contributions of qualified intellectual property, did the organization file Form 108-C as required?       7h       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.       8a       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a       10b <td< td=""><td>а</td><td></td><td></td><td></td><td>[</td></td<>	а				[
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       x         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       x         e       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       x         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7f       X         f       Did the organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       8       9         9       Sponsoring organizations maintaining donor advised funds.       9a       9a       9b         10       Bettin organization make any taxable distributions under section 4966?       9a       9a       9b         9       Did the organization make a distribution to a donor, donor advisor, or related person?       9b       9b       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a       10b <t< td=""><td></td><td>provided to the payor?</td><td>7a</td><td></td><td>X</td></t<>		provided to the payor?	7a		X
to file Form 8282?       7c       x         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d         e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       x         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       x         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       x         g For all contributions of qualified intellectual property, did the organization file Form 1098-C as required?       7h       x         f Did the organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization malntaining donor advised funds.       8       8         g Sponsoring organization malntaining donor advised funds.       8       9       9       9         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9a       9a       9b         10 Section 501(c)(7) organizations. Enter:       10a       10b       11a       11a       11a       11a       11a       11a       11a       11a       11a       12a       12a <t< td=""><td>b</td><td>If "Yes," did the organization notify the donor of the value of the goods or services provided?</td><td>7b</td><td> </td><td></td></t<>	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
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benefit contract?       7e       x         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7t       x         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7d       x         h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       7h       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.       8       8         9       Sponsoring organizations maintaining donor advised funds.       8       8       8         a tray time during the year?       8       8       8       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9a       9a         b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b       9b       9b         10       Eres and capital contributions included on Part VIII, line 12       10a       10b       10b       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b       10b       10b       10b       10b       11	d	If "Yes," indicate the number of Forms 8282 filed during the year7d			
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       x         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.       8         9       Sponsoring organizations maintaining donor advised funds.       8         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organizations. Enter:       9b         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross income from members or shareholders       11a         b       Gross income from them.)       11b       12a         12a       b       If * Yes,* enter the amount of tax-exempt interest received or accrued during the year       12b	e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
g       For all contributions of qualified intellectual property, dld the organization file Form 8899 as required?       7g         h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       8         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10a       11a         a       Gross income from members or shareholders       11a       11a         b       Gross income from members or shareholders       11a       11a         b       Gross income from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990		benefit contract?	7e		x
h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       8         a Did the organization make any taxable distributions under section 4966?       9a         b Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b         a Gross income from members or shareholders       11a       10b       10b         11       Section 501(c)(12) organizations. Enter:       11a       11b       12a         a Gross income from members or shareholders       11a       12a       12a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       11b       12a       12a	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
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supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings       8         9       Sponsoring organizations maintaining donor advised funds.       8         9       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       9b         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts, Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b		For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
at any time during the year?       8         9       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?         9       Section 501(c)(7) organizations. Enter:         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:         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?         12a       If "Yes," enter the amount of tax-exempt interest received or accrued during the year	8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
9       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:         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:         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				11 - 11 	
a Did the organization make any taxable distributions under section 4966?       9a         b Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter:       9b         a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter:       10b         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts, Is the organization filing Form 990 in lieu of Form 1041?       12a         b If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b		at any time during the year?	8		
b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10b         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts, Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	9				
b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       10b         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts, Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	а	Did the organization make any taxable distributions under section 4966?	9a		
10       Section 501(c)(7) organizations. Enter:         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:         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	b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	10	Section 501(c)(7) organizations. Enter:			
b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter:       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	а	Initiation fees and capital contributions included on Part VIII, line 12			é, se
11       Section 501(c)(12) organizations. Enter:         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	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1884		
b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	11	Section 501(c)(12) organizations. Enter:	1		la)"
b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	а	Gross income from members or shareholders 11a			
amounts due or received from them.)       11b         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	ь	Gross income from other sources (Do not net amounts due or paid to other sources against		4.1	
12a       Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b		•			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10417	12		
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
			Form	990 (	20091

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CENTER FOR AMERICAN PROGRESS ACTION FUND

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

Sec	tion A. Governing Body and Management									
				Yes	No					
1a	Enter the number of voting members of the governing body	a	7	1						
b	Enter the number of voting members that are independent	b	5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship w	ith any other	<b>]</b> . :		н 					
	officer, director, trustee, or key employee?	-	2		х					
З	Did the organization delegate control over management duties customarily performed by or under the d	lirect supervision								
	of officers, directors or trustees, or key employees to a management company or other person?									
4										
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		х					
6	Does the organization have members or stockholders?		6	1	х					
7a	Does the organization have members, stockholders, or other persons who may elect one or more memb	pers of the								
	governing body?		7a	-	x					
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persor	1s?	7b		х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken due	ring the year								
	by the following:									
a	The governing body?		8a	x						
b	Each committee with authority to act on behalf of the governing body?		8b	х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reache	ed at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	nue Code.)		•••••••						
				Yes	No					
10a	Does the organization have local chapters, branches, or affiliates?		10a		х					
b	If "Yes," does the organization have written policies and procedures governing the activities of such cha	apters, affiliates,		-	-					
	and branches to ensure their operations are consistent with those of the organization?		10b							
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing	the form?	11	х						
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				:					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	x						
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could	give rise								
	to conflicts?		12b	х						
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	s," describe								
	in Schedule O how this is done		12c	х						
13	Does the organization have a written whistleblower policy?		13	х						
14	Does the organization have a written document retention and destruction policy?		14	х						
15	Did the process for determining compensation of the following persons include a review and approval by	y independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			5	a trè s					
а	The organization's CEO, Executive Director, or top management official		15a		х					
b	Other officers or key employees of the organization		15b		х					
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)									
16 <u>a</u>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	it with a								
	taxable entity during the year?		16a		х					
p	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluat	e its participation								
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organiz	ation's	1.54		6					
	exempt status with respect to such arrangements?		16b	_						
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed DC, AL, AK, AZ, AR, CA, CT, F.	L,GA,IL,KS,KY								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50	)1(c)(3)s only) available	for							
	public inspection. Indicate how you make these available. Check all that apply.									
	Own website Another's website Upon request									
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confl	ict of interest policy, a	nd fina	ncial						
	statements available to the public.									
20	State the name, physical address, and telephone number of the person who possesses the books and m	ecords of the organiza	tion: 🕨	•						
	NEERA TANDEN - (212)682-1611									
	1333 H STREET, NW 10TH FLOOR, WASHINGTON, DC 20005									
			Form	990 (2	2009)					

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SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with cr within the organization's tax year. 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. Enter 0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	1			C)	1 0411	00.0	(D)	(E)	(F)
Name and Title	Average			Pos		<b>,</b>		Reportable	Reportable	Estimated
	hours	(check all that apply)						compensation	compensation	amount of
	per week	Individual trustae or director	Institutional frustee	Ottesr		Highesi compensated employee	ļ.	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JOHN PODESTA				<u> </u>	<u>†</u>					
DIRECTOR/PRESIDENT/CEO	9.00	x		x				59,840.	0.	5,612.
PETER EDELMAN			1	-			1		· · · · · · · · · · · · · · · · · · ·	
DIRECTOR	1,00	x						0.	0.	0.
JUDITH FEDER			<b></b>				1			
DIRECTOR	1.00	x						17,404.	0.	0.
BRODERICK JOHNSON		<u> </u>					t			······································
DIRECTOR	1.00	x						ο.	0.	0.
TOM PEREZ						-	1			
DIRECTOR	1.00	x		İ .	ŀ			0.	0.	0,
HILARY ROSEN							<u> </u>		· · · · ·	
DIRECTOR	1.00	x						0.	0.	0.
DANIEL ZINGALE			-							
DIRECTOR	1.00	x						0.	ο.	0.
CHRISTIE HEFNER										
DIRECTOR	1.00	x						٥.	0.	0.
SARAH ROSEN WARTELL										
TREASURER/EXECUTIVE VP	1.00			х				8,330.	ο.	805.
DEBORAH FINE										
SECRETARY/GEN. COUNSEL	14.00			х				56,943.	ο.	5,174.
JENNIFER PALMIERI					-					
SVP FOR COMMUNICATIONS	23.00					х		111,978.	0.	12,793.
DAVID MADLAND										· · · · · ·
DIR AMERICAN WORKER PROJ	40.00					х		107,905.	ο.	16,057.
TARA MCGUINNESS									-	
DIRECTOR, PROGRESSIVE ME	40.00					х		130,757.	ο.	12,793.
FAIZ SHAKIR										· · · · · · · · · · · · · · · · · · ·
DIRECTOR OF RESEARCH	40.00					х		110,894.	ο.	11,497.
ILIA V RODRIGUEZ										
DIRECTOR GOVERNMENT AFFA	40.00					x		101,584.	0.	10,955.
				-						

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932007 02-04-10

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Form 990 (2009)

Form 990 (2009) CENTER FOR A									30~019270	8		Page 8
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	es, a	ndl	High	est	Compensated Employ	ees (continued)			
(A) Name and title	(B) Average hours	(cl		Pos	C) ition that	app	ly)	(D) Reportable compensation	(E) Reportable compensation		(F) Estima amour	ted t of
	per week	Individual Irustee or director	Institutional bustee	Officer	Key amployee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	ed ot ons compe		sation the ation ated
		-										
		-						:				
										-		
										Ť		
1b Total     Total number of individuals (including but r     componential from the examplestion	not limited to th	iose	liste	d al	bove	► ) wh	0 r	705,635, eceived more than \$100		).	7.	5,686.
compensation from the organization										<b>r</b>	Yes	
<ul> <li>3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s</li> <li>4 For any individual listed on line 1a is the si</li> </ul>	such individual					,		-	· · ·		30 <sup>1</sup> 010 3	x
<ul> <li>For any individual listed on line 1a, is the si and related organizations greater than \$15</li> <li>Did any person listed on line 1a receive or</li> </ul>	0,000? If *Yes,	* col	mple	ete S	Sche	edule	JI	or such individual		4	1	x
the organization? If "Yes," complete Sched Section B. Independent Contractors	iule J for such	pers	оп .					ed organization for serv			5	x
<ol> <li>Complete this table for your five highest co the organization.</li> </ol>	mpensated in	depe	nde	nt ç	ontr	acto	rs t	hat received more than	\$100,000 of compe	nsatio	on from	
(A) Name and business	address					•		(B) Description of s	ervices	Com	(C) pensati	on
CHRIS WAYNE & ASSOCIATES, 1111 19TH : NW, STE, 406 , WASHINGTON, DC 20036	STREET							EVENT PLANNING	·			2,584.
VAN NESS, FELDMAN, P.C., 1050 THOMAS JEFFERSON STREET, NW, WASHINGTON, D	3				-			WHITE PAPER	······································			000.
							_					
												<u> </u>
2 Total number of independent contractors ( \$100,000 in compensation from the organi		ot lir	nited	d to		se lis 2	ted	above) who received m	ore than			
932008 02-04-10										Fo	m 990	(2009)

irt V	111	Statement of Revenu	le				1	
 					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fro tax under sections 512 513, or 514
1	a	Federated campaigns	1a		신 사가 문제되었			
		Membership dues				[관리 전환권을		
		Fundraising events		160,060.		나는 것을 물을 얻을 것을 수 없다.		
	đ	Related organizations	1d					
		Government grants (contribution						
i -	ť	All other contributions, gifts, grants,	and					
		similar amounts not included above	1f	8,679,365.				
	g	Noncash contributions included in lines 1a	1-1f: \$					
	h.	Total. Add lines 1a-1f			8,839,425.			
				Business Code	an e sa se			
2	а							
	b			·····				
	Ċ							
	d							
	е							
1		All other program service revenue						
!	g	Total. Add lines 2a-2f						
3		Investment income (including di						
		other similar amounts)			2,285.			2,2
4		Income from investment of tax-e						·
5		Royalties				alerer e le la le la secto	· · · · · · · · · · · · · · · · · · ·	
			(i) Real	(ii) Personal				
		Gross Rents						
		Less: rental expenses						
		Rental income or (loss)			and a state of the second s	- 计分词标准 (22)	amin'ny sorah-da	사람은 말을 다니 것
		Net rental income or (loss)			All and Andrew Market	a di se su der teat teat se suat.		antiga tito di Cara
1	а		(i) Securitie	es (ii) Other				물을 다 다 물
		assets other than inventory						
	D	Less: cost or other basis						
	_	and sales expenses						
	с d	Gain or (loss)		<u> </u>	가는 사람들은 것이 있다.	말 아이는 것이 같아요.	i na sina menua	1
		Gross income from fundraising e			e volumente de Maria de P			
0.		including \$ 160,0	•					
		contributions reported on line 10		1				
		Part IV, line 18	-,	a 18,540.				
	h	Less: direct expenses	••••••	b 31,735,				
		Net income or (loss) from fundra			~13,195.	an an an an Arthread an Arthread	- 15~ 가면한 것 않는	ee fiber - <b>13,1</b>
		Gross income from gaming activ	÷ .				and a second second	т <b>з,</b>
		Part IV, line 19		a				
ł		Less: direct expenses			동 표준은 그네			
		Net income or (loss) from gamin			·····································	amu katin e		• * *
		Gross sales of inventory, less rei					1.1.1.2. m/s	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		and allowances		a	[영향] 환경화			
Ł	b	Less: cost of goods sold		b				
		Net income or (loss) from sales of			e est esclar d'A	na san ing kara	and the set of the set of	na tra atra di
		Miscellaneous Revenue		Business Code				n i ja se
11 a	3	WEBSITE ADVERTISING RE		541800	138,428.	1980 Francis A. S.	138,428,	1999 - 1988 - 198 
Ł	c							
c		· · · · · · · · · · · · · · · · · · ·		_				
c	3	All other revenue						
e	9	Total. Add lines 11a-11d		►	138,428.			
12		Total revenue. See instructions			8,966,943.	0.	138 428	-10,91

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

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	212,000.	212,000.		
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		n		
5	Compensation of current officers, directors, trustees, and key employees	154,108.	91,488.	62,620.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8)				
7	Other salaries and wages	3,547,784.	3,146,881.	341,955.	58,948.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	217,401.	190,131.	23,573.	3,697.
9	Other employee benefits	281,785.	249,091.	28,582.	4,112.
10	Payroll taxes	264,491.	231,259.	28,726.	4,506.
11	Fees for services (non-employees):				
а	<b>v</b>				
b		137,186.	120,347.	16,839.	-
C	×	16,682,		16,682.	
d	· · · · · · · · · · · · · · · · · · ·	22,500.	22,500.		
e	•				
f	Investment management fees				
g		357,623.	288,264.	69,359.	
12	Advertising and promotion	16,190.	16,154.		5,
13	Office expenses	95,936.	83,674.	10,786.	1,476.
14	Information technology				
15	Royalties				
16	Оссиралсу	668,893,	584,850.	72,648.	11,395.
17	Travel	81,865.	81,748.	201.	-83.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	651,787.	651,787.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,496.	3,055.	-1,619.	бО.
23	Insurance	17,924.	15,672.	1,947.	305.
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	OTHER	345,380.	247,742.	94,798.	2,840.
b	OPERATIONAL OVERHEAD	160,982.	179,505.	-15,740.	-2,783.
С	WEB HOSTING FEES	73,962.	73,962.	0.	
d	FURNITURE & EQUIPMENT E	66,260.	57,969,	7,184.	1,107.
e	PROPERTY TAX	53,743.	46,912.	5,917.	914,
f	All other expenses	20,833.	20,833.		
25	Total functional expenses. Add lines 1 through 24f	7,466,812.	6,615,824.	764,489.	86,499.
26	Joint costs. Check here 🕨 🛄 if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

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Form 990 (2009)

<sup>10</sup> 2009.04040 CENTER FOR AMERICAN PROGRES 127119\_1

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Part X Balance Sheet

				********************************		-	
1	5	Receivables from current and former officers, di	rectors	s, trustees, key			
		employees, and highest compensated employee	es. Co	mplete Part II		1	
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
ľ		4958(f)(1)) and persons described in section 495	58(c)(3	(B). Complete			
ľ		Part II of Schedule L				6	
ŝ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Å	9	Prepaid expenses and deferred charges	•••••••		2,739.	9	
	10a	Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	18,233,			
	Ь	Less: accumulated depreciation				10c	7,872.
	11	Investments - publicly traded securities				111	1,072,
	12	Investments - other securities. See Part IV, line 1	 			12	<u> </u>
	13	Investments - program-related. See Part IV, line	· ·		····-		· · · · · · · · · · · · · · · · · · ·
	14	Intennible assets	···			13	·
	15	Intangible assets	• • • • • • • • • • • •		6,750.	14	0,
	16	Total assets. Add lines 1 through 15 (must equa	l line '		3,445,246.	15	3,970,349,
	17				1,092,986.		
	18	Accounts payable and accrued expenses			1,092,986.	17	117,958.
	19	Grants payable		••••••		18	
	19 20	Deferred revenue	••••••			19	
		Tax-exempt bond liabilities				_20	 
Liabilities	21 22	Escrow or custodial account liability. Complete F				21	
Ĩ	22	Payables to current and former officers, director					
Lia		highest compensated employees, and disqualifie					
	~~	of Schedule L			·	22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	i third	parties		24	
		Other liabilities. Complete Part X of Schedule D	•••••			25	
	26	Total liabilities. Add lines 17 through 25	<u></u>	[	1,092,986.	26	117,958.
		Organizations that follow SFAS 117, check he	re 🕨	and complete			
		lines 27 through 29, and lines 33 and 34.					신산지 않는 것 같아.
ces							
lances	27	Unrestricted net assets		·····	1,589,705.	27	2,106,211.
Balances	28	Unrestricted net assets				27 28	2,106,211. 1,746,180.
nd Balances	28 29	Unrestricted net assets	••••••		1,589,705.		
Fund Balances	28 29	Unrestricted net assets	••••••		1,589,705.	28	
s or Fund Balances	28 29	Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117, ch complete lines 30 through 34.	ieck h	ere 🕨 🛄 and	1,589,705.	28	
sets or Fund Balances	28 29 30	Unrestricted net assets	ieck h	ere 🕨 🛄 and	1,589,705.	28	
Assets or Fund Balances	28 29 30 31	Unrestricted net assets	ieck h	ere  and and ant fund	1,589,705.	28 29	
let Assets or Fund Balances	28 29 30 31 32	Unrestricted net assets	uipmer	ere  and and tfund or other funds	1,589,705.	28 29 30	
Net Assets or Fund Balances	28 29 30 31 32 33	Unrestricted net assets	uipmer	ere  and and t fund or other funds	1,589,705.	28 29 30 31	

CENTER FOR AMERICAN PROGRESS ACTION FUND

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Accounts receivable, net

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(B) End of year

2,593,308,

1,023,048.

346,121.

(A) Beginning of year

2,148,129.

344,629.

931,596,

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Form 990 (2009)

932011 02-04-10

Form	990 (2009) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708		Pa	ge <b>12</b>
Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			: <u>.</u>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		x
b	Were the organization's financial statements audited by an independent accountant?	2b	х	
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2¢	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			5. S.,
	consolidated basis, separate basis, or both:	100		
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Зb		

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(Form 990, 990-EZ,	Schedule of Contributors	OM8 No. 1545-0047
or 990-PF) Department of the Treasury	Attach to Form 990, 990-EZ, or 990-PF.	2009
Internal Revenue Service Name of the organizati	on	Employer identification number
	CENTER FOR AMERICAN PROGRESS ACTION FUND	30-0192708
Organization type(chec	:k one):	
Filers of:	Section:	
Form 990 or 990-EZ	x 501(c)( 4 ) (enter number) organization	
	4947(a)(1) ποπexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) ποπexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule		
x For an organiza	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more ( nplete Parts I and II.	in money or property) from any one
x For an organiza	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more ( nplete Parts I and II.	in money or property) from any one
For an organiza contributor. Con Special Rules     For a section 50 509(a)(1) and 17	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more ( mplete Parts I and II. 01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the '0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	regulations under sections
For an organiza contributor. Con Special Rules     For a section 50 509(a)(1) and 17 of the amount of For a section 50 aggregate contri	nplete Parts I and II. 11(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the '0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of	e regulations under sections the greater of (1) \$5,000 or (2) 2% pontributor, during the year,
<ul> <li>For an organiza contributor. Consider the section 50 (3)(1) and 17 of the amount of the amount of the amount of the prevention of the prevention of the prevention of the section 50 (aggregate contributions for the purpose. Do not for the purpose. Do not section for the purpose. Do not purpose. Do not section for the purpose. Section for the purpose for the purpose. Section for t</li></ul>	nplete Parts I and II. 11(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. P1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contibutions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, liter	e regulations under sections the greater of (1) \$5,000 or (2) 2% ontributor, during the year, ary, or educational purposes, or ontributor, during the year, it aggregate to more than \$1,000. <i>Isively</i> religious, charitable, etc., se it received nonexclusively

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

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Name of organization

Page 1 of 5 of Part I Employer identification number

CENTER FOR AMERICAN PROGRESS ACTION FUND

30-0192708

Part I Contributors (see instructions)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$10,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contributio
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2		\$10,000,	Person x Payroll Noncash (Complete Part II if ther is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3		\$10,000,	Person x Payroli Noncash (Complete Part II if there is a noncash contributio
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$26,000,	Person x Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$25,000,	Person x Payroll Noncash (Complete Part II if there is a noncash contributio
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
6		\$801.690.	Person x Payroll Noncash

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Name of organization

Page 2 of 5 of Part 1

Employer identification number

30-0192708

## CENTER FÓR AMERICAN PROGRESS ACTION FUND

Part I	Contributors (see instructions)
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(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$5.000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$25,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9		\$ <u>36,000.</u>	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
10		\$ <u>5,599,615.</u>	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
11		\$ <u>10,000,</u>	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>12</u> 923452 02-01		\$ 84 , 000 , Schedule B (Form 9	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.) 90, 990-EZ, or 990-PF) (2009)
	15		

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Name of organization

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Employer identification number

30-0192708

CENTER FOR AMERICAN PROGRESS ACTION FUND Part I Contributors (see instructions)

(b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Aggregate contributions	Type of contribution         Person       x         Payroll
(b)	(c) Aggregate contributions \$\$\$(c)	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b)	Aggregate contributions	Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
	(c)	Payroli Noncash (Complete Part II if there is a noncash contribution.)
		(d)
		Type of contribution
	\$5,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b) ess, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$ <u>10,000.</u>	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b) ess, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$300,000,	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b) ess, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
e	ess, and ZIP + 4	(b)       (c)         Aggregate contributions         \$

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Page 4 of 5 of Part I

Employer identification number Name of organization CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708

# Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    19</u>		\$25,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	······································	\$	Person x Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$5,000,	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
22		\$5.000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$415,050.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
24		\$\$	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
923452 02-01-10		Schedule B (Form 9 17	990, 990-EZ, or 990-PF) (2009)

Name of organization

Page 5 of 5 of Partl

Employer identification number

30-0192708

CENTER FOR AMERICAN PROGRESS ACTION FUND

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$100,509.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
<u>26</u>		\$230,000,	Person x Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$10,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
<u></u>		\$50,000,	Person x Payroli Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$645,453.	Person x Payroli Noncash (Complete Part II if there is a noncash contribution
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$125,714,	Person x Payroll Noncash (Complete Part II if there is a лопcash contribution.

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SCHEDULE C	P	olitical Campaign	and Lobbvir	na Activities	5	OMB No. 1545-0047
(Form 990 or 990-EZ)		anizations Exempt From Incom	-	-		2009
Department of the Treasury	-	Complete if the organ				Open to Public
Internal Revenue Service	►	Attach to Form 990 or Form 99	0-EZ. 🕨 See separa	ate instructions.		Inspection
<ul> <li>Section 501(c)(3) org.</li> <li>Section 501(c) (other</li> <li>Section 527 organiz</li> <li>If the organization ans</li> <li>Section 501(c)(3) org.</li> <li>Section 501(c)(3) org.</li> <li>If the organization ans</li> <li>Section 501(c)(4), (5</li> <li>Name of organization</li> </ul>	wered "Yes," to ganizations: Com er than section 5 ations: Complet wered "Yes," to ganizations that ganizations that wered "Yes," to ), or (6) organiza CENTER FOR	Form 990, Part IV, line 3, or For nplete Parts I-A and B. Do not cor 01(c)(3)) organizations: Complete	rm 990-EZ, Part VI, Ii nplete Part I-C. Parts I-A and C below rm 990-EZ, Part VI, Ii der section 501(h)): C on under section 501( Tax), then	ine 46 (Political Carr v. Do not complete P ine 47 (Lobbying Ac Complete Part II-A. Do (h)): Complete Part II-	art I-B. tivities), th o not comp B. Do not o Employe 3	ivities), then en lete Part II-B. complete Part II-A. r identification number 0~0192708
•	-	zation's direct and indirect politica				
					<b>▶</b> \$	
3 Volunteer hours	•••••		••••		<u></u>	0.
Part I-B Compl	oto if the or	ganization is exempt unde	r contion E01(a)	(2)		
		incurred by the organization under			► ¢	
2 Enter the amount of	of any excise tax	incurred by organization manage	rs under section 4955	5	►°	······································
		on 4955 tax, did it file Form 4720 f				Yes No
b If "Yes," describe in	n Part IV.					
		panization is exempt unde				3).
<ol> <li>Enter the amount o exempt function ac</li> </ol>	f the filing organ tivities	d by the filing organization for sec lization's funds contributed to oth	er organizations for s	ection 527	►\$ ►\$	869,989.
		s. Add lines 1 and 2. Enter here ar			► \$	869,989.
4 Did the filing organi	zation file Form	1120-POL for this year?			·· · · <u> </u>	X Yes No
5 Enter the names, a For each organizati that were promptly	ddresses and er on listed, enter t and directly deli	nployer identification number (EIN the amount paid from the filing org ivered to a separate political organ t, provide information in Part IV.	<li>i) of all section 527 po ganization's funds. Als</li>	olitical organizations t so enter the amount	to which pa of politicat	ayments were made. contributions received
• (a) Name	•	(b) Address	(c) EIN	(d) Amount paid filing organizatic funds. If none, en	bn's coi ter-0-, c	(e) Amount of political ntributions received and promptly and directly lelivered to a separate political organization. If none, enter -0
	· · · · · ·					
		·····				
		·····				
For Privacy Act and Pa LHA	perwork Reduc	tion Act Notice, see the Instruct	tions for Form 990 o	r 990-EZ. Sched	ule C (For	m 990 or 990-EZ) 2009

932041 02-04-10

13261103 137216 127119

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Schedule C (Form 990 or 990-EZ) 2009	CENTER FOR AM	ERICAN PROGRESS AG	TION FUND	30-019	2708 Page 2
Part II-A Complete if the of (election under se		empt under section	on 501(c)(3) and fi	led Form 5768	
· · · · · · · · · · · · · · · · · · ·	zation belongs to an a	ffiliated group.			
	•	and "limited control" p	ovisions apply.		
	nits on Lobbying Exp nditures" means am	penditures ounts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to in	Ifluence public opinio	n (grass roots lobbying)			
b Total lobbying expenditures to in					
c Total lobbying expenditures (add	flines 1a and 1b)				
d Other exempt purpose expenditu			••••		
e Total exempt purpose expenditu	res (add lines 1c and	1d)			
f Lobbying nontaxable amount. Er		the following table in bo	th columns.	·····	
If the amount on line 1e, column (a		obbying nontaxable an of the amount on line 16		el de la contra de En la contra de la c	
Not over \$500,000					
Over \$500,000 but not over \$1,0					
Over \$1,000,000 but not over \$1	방법 것을 가격했다.				
Over \$1,500,000 but not over \$1		000 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	\$1,00	0,000.			
g Grassroots nontaxable amount (	enter 25% of line 1f)			<u>Det refer de la férie en la</u>	
h Subtract line 1g from line 1a. If z					
i Subtract line 1f from line 1c. If ze					
j If there is an amount other than a	zero on either line 1h d	or line 1 i, did the organi	ation file Form 4720		
reporting section 4911 tax for thi	s year?			[	Yes No
(Some organ	izations that made a columns below. See	veraging Period Under section 501(h) election the instructions for lin	n do not have to com es 2a through 2f on p	plete all of the five age 4.)	
	Loppying Exp	enditures During 4-Ye	ar Averaging Period	····	1
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))				말 가 말 수 있 것 [	·
c Total lobbying expenditures					
d Grassroots nontaxable amount			-		
e Grassroots ceiling amount		· 1. WEI DAY / CARPELL			
(150% of line 2d, column (e))					

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009

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Page 3

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# Schedule C (Form 990 or 990-EZ) 2009 CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)		
		Yes	N	lo	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a h	Volunteers?				para sett terres	
					<u>Set it, e et s</u>	<u>Cat à</u>
с А	Media advertisements?					
	Publications, or published or broadcast statements?					·
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
•1 ;	Other activities? If "Yee " departies in Part IV					
:	Other activities? If "Yes," describe in Part IV		2. Y. I	. 15		
1	Total. Add lines 1c through 1i					
za	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1				199
	If "Yes," enter the amount of any tax incurred under section 4912	2011년 22				
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
Dor	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
r ai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c	)(5), (	or se	ction	
			_		Yes	N
1	Were substantially all (90% or more) dues received nondeductible by members?		[	1		
2	Did the organization make only in house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		ſ	3		
1 2	Dues, assessments and similar amounts from members	cal		1		
	expenses for which the section 527(f) tax was paid). Current year			2a		
b	Carryover from last year	•••••••••••••••••••	····	2b		
C	Total	••••••••••••••••••	ŀ	2c		
з	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	••••••	·····  -	3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	·····	·····  -			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical				
	expenditure next year?			4		
5	Taxable amount of lobbying and political expenditures (see instructions)		·····  -	5		
Part	IV Supplemental Information		····. ].	~ 1		
or an	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar y additional information. I-A, LINE 1:	id Part II-B,	line 1i	. Also	, complete	this p
AP 1	ACTION DOES NOT ENDORSE CANDIDATES FOR PUBLIC OFFICE, RUN CANDIDATE					
DVE	RTISING OR EXPLICITLY ADVOCATE FOR THE ELECTION OR DEFEAT OF				<b>.</b>	
ARTI	CULAR CANDIDATES, HOWEVER, AT VARIOUS TIMES DURING THE TAX YEAR,	<u> </u>				
AP J	ACTION MADE COMMUNICATIONS TO THE FUBLIC COMMENDING OR CRITICIZING					
ARTI	CULAR PUBLIC POLICY POSITIONS TAKEN BY VARIOUS CANDIDATES, THESE					
32043	02-04-10	Schedu	le C (F	orm	990 or 990	-EZ) :
611	21 .03 137216 127119 2009.04040 CENTER FOR AMER	RICAN I	PRO	GRE	S 127	119

Schedule C (Form 990 or 990-EZ) 2009 CENTER FOR AMERICAN PROGRESS ACTION FUND Part IV Supplemental Information (continued)	30-0192708	Pa
POLICY ASSESSMENTS TOOK THE FORM OF POSITION PAPERS, BLOG POSTS, PRESS		
RELEASES, AND OTHER SIMILAR PUBLIC COMMUNICATIONS.		
EBERSES, AND OTHER STRILLER FOBLIC COMMUNICATIONS.		
· · · · · · · · · · · · · · · · · · ·		<u> </u>
	· · · ·	
	· ···	
	······································	
	Schedule C (Form 990 or 990	1-671
2044 02-04-10		

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.



Department of the Treasury Internal Revenue Service

Schedule D

(Form 990)

Nam	e of the organization	Employer identification number	
Dai	CENTER FOR AMERICAN PROGRESS		30-0192708
.ra	organization answered "Yes" to Form 990, Part IV, line		hus of Accounts. Complete if the
	organization answered res to Form 990, Partix, inte	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at and of year		
2	Total number at end of year Aggregate contributions to (during year)		
3	Aggregate grants from (during year)	· · · ·	
4	Aggregate value at end of year		
4 5	Did the organization inform all donors and donor advisors in v	witting that the assets hold in denot	udvinged funde
5	are the organization's property, subject to the organization's	5	
6	Did the organization inform all grantees, donors, and donor ad		
Û	for charitable purposes and not for the benefit of the donor of		
	Impermissible private benefit?		
Par	t II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization		50,1 artiv, inc 7.
•	Preservation of land for public use (e.g., recreation or p	·	n historically important land area
	Protection of natural habitat		certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the f	orm of a conservation essement on the last
-	day of the tax year.	conscivation contribution in the r	orm of a conservation easement of the last
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements	•••••••••••••••••••••••••••••••••••••••	2b
с	Number of conservation easements on a certified historic stru		
đ	Number of conservation easements included in (c) acquired a	ofter 8/17/06	2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated b	v the organization during the tax
	year <b>&gt;</b>		
4	Number of states where property subject to conservation eas	ement is located >	
5	Does the organization have a written policy regarding the peri		of
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, a	and enforcing conservation easemer	
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section	170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and exp	ense statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizati		
	conservation easements.		-
Par	t III Organizations Maintaining Collections of		r 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 ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		f public service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these it		
b	If the organization elected, as permitted under SFAS 116, to r	eport in its revenue statement and b	alance sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or	research in furtherance of public se	vice, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical trea		ncial gain, provide
	the following amounts required to be reported under SFAS 11		
a	Revenues included in Form 990, Part VIII, line 1		> \$
ъ	Assets included in Form 990, Part X		> \$
LHA 932051 02-01-1	For Privacy Act and Paperwork Reduction Act Notice, see	the Instructions for Form 990.	Schedule D (Form 990) 2009
02-01-	0		

Sche		AMERICAN PROGRE					30-0192			age 2
Pa	rt III Organizations Maintaining (	Collections of A	rt, Historical 1	Freasures, o	or Oth	er Simil	<u>ar Asse</u>	ts (cont	inued)	1
з	Using the organization's acquisition, access	ion, and other record	ds, check any of th	e following that	at are a s	significant	use of its	collectio	n item	ıS
	(check all that apply):									
а	Public exhibition	c	I Loan ore:	xchange progr	ams					
b	Scholarly research	e	e 🛄 Other							
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how they furthe	r the organizati	ion's exe	empt purpo	ose in Par	t XIV.		
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m							Yes		] No
Pa	rt IV Escrow and Custodial Arran							9, or		
	reported an amount on Form 990, Pa		-							
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for contributi	ons or other as	sets no	t included			·	
	on Form 990, Part X?		•					Yes		No
b	If "Yes," explain the arrangement in Part XIV			••••••••••••••••••••••••						
	· · · ·	•	U					Amount	t	
с	Beginning balance					1c			-	
d	Additions during the year				•••••	1d				
	Distributions during the year									
1	Ending balance									<u></u>
	Did the organization include an amount on F	orm 990 Part X line	212		• • • • • • • • • • • • • •			Yes	T	No
	If "Yes," explain the arrangement in Part XIV				••••••			. 103		1 110
1	t V Endowment Funds. Complete		swered "Yes" to f	Form 990. Part	IV. line	10.	,			
L		(a) Current year	(b) Prior year	(c) Two year			ears back	(e) Four	vears	hack
1a	Beginning of year balance	(_) Contoint ) Cui		(0)		<u>(u)</u>		(0).00	Jouro	
	Contributions						-0313 F T D			- 21:
	Net investment earnings, gains, and losses				20 A. A.		1000 - 1000 1000 - 1000 - 1000			<u>····</u>
	Grants or scholarships					<u>an es sen en es</u>				<del></del>
	Other expenditures for facilities				na na pro-					
Ģ	and programs								e de la composition de la comp	К. et .
Ŧ	Administrative expenses			·····································	ena Sector de Sector				<u>, ,</u>	· ·
, g	End of year balance								<u></u>	
2	Provide the estimated percentage of the year				. ł			·		
	Board designated or quasi-endowment		%							
	Permanent endowment	%								
		<sup>70</sup>								
	Are there endowment funds not in the posse		ation that are hold	no al a dasimintata	مريحها والمريد					
Ja	by:	ession of the organiza	auon mat are neio	ano aoministe	rea tor t	ine organiz	ation	r	. 1	
									Yes	No
	(i) unrelated organizations				•••••		•••••••••••	3a(i)		
Ъ	(ii) related organizations	a listaal oo urardurad a				•••••	••••••••••	3a(ii)		
~	If "Yes" to 3a(ii), are the related organization: Describe in Part XIV the intended uses of the	s listed as required o			•••••			3b		
Par	t VI Investments - Land, Building	s and Fourinm	ent See Form OC	N Part V line	10					
	Description of investment			;						
	Description of anyestment	(a) Cost or o basis (investr		st or other s (other)		ccumulate preciation	1	(d) Bool	c value	;
1a	Land					a second				
	Buildings					<u></u>	· · · · ·			
~	Leasehold improvements									
				18 222		1.0	261			070
	Equipment			18,233.		,	361.		1,	872.
	Other		V. ookum= /D) //	10(a))			<del>.</del>			0.7.0
i vidi	a noo iinea Ta unoogu Te, toolunin (u) must e	קיים רטווו ששט, רשת	, corunn (σ), line	10(0).)			I		7.	872.

Schedule D (Form 990) 2009

932052 02-01-10

Part VII Investments - Other Securities. Se (a) Description of security or category (including name of security) inancial derivatives	er onn 550, Part A, IDE 12.		
(including name of security)		(c) Method of valuation:	
icancial derivativas	(b) Book value	Cost or end-of-year market value	
Inditudi ucityatiyes		· · · · · · · · · · · · · · · · · · ·	
Nosely-held equity interests			
Other			
		······································	
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.) 🕨			
Part VIII Investments - Program Related. s	ee Form 990, Part X, line 13.	•••• •••••••••••••••••••••••••••••••••	
(a) Description of investment type	(b) Book value	(c) Method of valuation:	
(a) beschption of investment type	(b) Book value	Cost or end-of-year market value	
**************************************			
		****	
	· · · · · · · · · · · · · · · · · · ·		u
		· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) 🕨			
Part IX Other Assets. See Form 990, Part X, ine	15		Y
	Description	(b) Book v	alua
	· · · · · · · · · · · · · · · · · · ·		
	······································		
ntal. (Column (b) must equal Form 990 Part X, col (B) line	15)		
otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities, See Form 990, Part X	9 15.)	▶	
Part X Other Liabilities. See Form 990, Part X,	line 25.		
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	i 15.) line 25.	iount	
Part X Other Liabilities. See Form 990, Part X,	line 25.	iount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	iount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	iount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25.	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability ederal income taxes	line 25. (b) Arr	incount	
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability ederal income taxes	line 25. (b) Arr		
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability ederal income taxes	line 25. (b) Arr		ty for

Sche	dule D (Form 990) 2009 CENTER FOR AMERICAN PROGRESS ACTION FUNI	)		30-0192708	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	Financial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		8,966,943.
2	Total expenses (Form 990, Part IX, column (A), line 25)				7,466,812.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				1,500,131.
4	Net unrealized gains (losses) on investments				
5	Donated services and use of facilities				
6	Investment expenses				
7	Prior period adjustments				
8	Other (Describe in Part XIV.)				
9	Total adjustments (net). Add lines 4 through 8				٥.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and				1,500,131.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per F	Return	
1	Total revenue, gains, and other support per audited financial statements			1	8,015,053.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			14.54 1	
а	Net unrealized gains on investments	2a		1. S.	
	Donated services and use of facilities	2b			
	Recoveries of prior year grants				
	Other (Describe in Part XIV.)		2,509,672		
	Add lines 2a through 2d			2e	2,509,672.
3	Subtract line 2e from line 1			3	5,505,381.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				· · · · · ·
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)		3,461,562		
	Add lines 4a and 4b			4c	3,461,562.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	8,966,943.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per	Return	
1	Total expenses and losses per audited financial statements			1	7,498,547.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			et e h	
а	Donated services and use of facilities	2a			
	Prior year adjustments	2b			
	Other losses	2c			
	Other (Describe in Part XIV.)	2d	31,735.		
	Add lines 2a through 2d			2e	31,735.
з	Subtract line 2e from line 1			3	7,466,812.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)				
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	7,466,812,
Par	t XIV Supplemental Information			• • • •	
Com	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	lines 1a a	nd 4; Part IV, lines 1	b and 2b; Part	V. line 4: Part
	2; Part XI, line B; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl				
			, <b>,</b>		
PART	XII, LINE 2D - OTHER ADJUSTMENTS:				

NET ASSETS RELEASED FROM RESTRICTIONS: 2477937.

,

SPECIAL	EVENT	EXPENSES:	31735.
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

CONTRIBUTION : 3461562.

932054 02-01-10 Schedule D (Form 990) 2009

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2009.04040 CENTER FOR AMERICAN PROGRES 127119\_1

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	Schedule D /For	m 000\
		Schedule D (For 27 CENTER FOR AMERICAN PROGRES 12

SCHEDULE G		Supplemental Info	rmat	ion	Regarding		I	OMB No. 1545-0047
(Form 990 or 990-EZ)		Fundraising or G						2009
Department of the Treasury nternal Revenue Service	or if	e if the organization answered "\ the organization entered more the Attach to Form 990 or Form 990	1an \$15,	000 o	n Form 990-EZ, line	6a.		Open To Public
Name of the organization								entification number
Fundrais		AMERICAN PROGRESS ACTION Complete if the organization ans		/es" ti	Form 990 Part IV		30-0192708 Form 990-F2	
required to	complete this par	t.						L HIELS ALE HOL
		sed funds through any of the follow	+			<b>'</b> -		
a Mail solicitati	email solicitation:			-	overnment grants nment grants			
c Phone solicit			ial fundra	-	~			
d L in-person sol								
		or oral agreement with any individu art VII) or entity in connection with					or Yes	5 🗔 No
	highest paid ind	ividuals or entities (fundraisers) pu						
(i) Name of ind	ividual		(iii) fund	Dia		(v) A	mount paid	(vi) Amount paid
or entity (fund		(ii) Activity	have c or con contrib	ustody .traj of	(iv) Gross receipts from activity	fu	retained by) ndraiser d in col. (i)	to (or retained by) organization
			Yes	No		-		
<u> </u>	<u></u>	· · · · · · · · · · · · · · · · · · ·						
	······							
· · · · · · · · · · · · · · · · · · ·								
· · · · · · · · ·								
otal	h the organizatio	n is registered or licensed to solici	► t funds c	or has	been notified it is ex	empt fi	rom registrati	on or licensing.
		······································						
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			····· ·					
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	edu art		OR AMERICAN PROGRES			192708 Page 2
<u> </u>		on Form 990-EZ, line 6a. List events with				11010 1101 \$10,000
		<u> </u>	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			ANNUAL DINNER			col. (c))
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	178,600.			178,600.
	2	Less: Charitable contributions	160,060.			160,060.
	3	Gross income (line 1 minus line 2)	18,540.			18,540.
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	25,060.			25,060.
Direct 8	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	6,675.			6,675.
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		🚩	( 31,735)
Pa	11  rt		n (d), and line 10 answered "Yes" to Form	990, Part IV, line 19, or r	reported more than	-13,195.
		\$15,000 on Form 990 EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
es	2	Cash prizes				
<b>Direct Expenses</b>	3	Noncash prizes				
Direct I	4	Rent/facility costs				-
	5	Other direct expenses				
	c	Valuataoriahar	Yes%	Yes%	Yes%	
		Volunteer labor	No No	No	No No	
	7	Direct expense summary. Add lines 2 through	1 5 in column (d)		►	()
	8	Net gaming income summary. Combine line 1	, column (d), and line 7		▶	
		ier the state(s) in which the organization opera				Yes No
		he organization licensed to operate gaming ac	tivities in each of these s	states?		<u>9a</u>
D.		No," explain:				
40-	141.					
		re any of the organization's gaming licenses re Yes," explain:	evoked, suspended or te	rminated during the tax y	/ear?	<u>10</u> a
5	*)					
			, <u>, , , , , , , , , , , , , , , , , , </u>			
		es the organization operate gaming activities w				11
12	ls t	he organization a grantor, beneficiary or truste	e of a trust or a member	of a partnership or other	entity formed to	
		ninister charitable gaming?				
s208	2 02	-03-10		29	Schedule G (Fo	rm 990 or 990-EZ) 2009

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Schedule G (Form 990 or 990-EZ) 2009 CENTER FOR AMERICAN PROGRESS ACTION FUND 30-019	2708		age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	%	1.1	ŝ.
b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	<u>%</u>		
			5 .
Name ►			1.1
	-		
Address			
	-		an ar i su e
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 15a		<u> </u>
	1. <u>1</u> .		
b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
of gaming revenue retained by the third party $\blacktriangleright$ \$			
c If "Yes," enter name and address of the third party:			14
		ŀ	
Name	_   ·		1.0
Address 🕨		<b> </b>	. · ·
Address	-   .		1.1
16 Gaming manager information;			
Name 🕨			
	- 600		
Garning manager compensation 🕨 \$			
Description of services provided 🕨			
	_		1.
		- 12 	
Director/officer Employee Independent contractor			<b>.</b>
17 Mandatory distributions:			
a is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state naming license?		1.144	t and the
retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	. 17a		
organization's own exempt activities during the tax year > \$			

Schedule G (Form 990 or 990-EZ) 2009

932083 02-03-10

SCHEDULE I (Form 990)		Grants and Government	d Other Assistance ts, and Individuals	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	e -		OMB No. 1545-0047	
Department of the Trassury Intornal Ravenua Servica	Complet	olete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.	in answered "Yes" on Fo Attach to Form 990.	' on Form 990, Par m 990.	t IV, line 21 or 22.		Open to Public Inspection	
Name of the organization CENTER FOR AMERICAN PROGRESS	ERICAN PROGRE	SS ACTION FUND					Employer identification number 300192708	
Part I General Information on Grants and Assistance	and Assistance							,
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate t	he amount of the grants	s or assistance, the	grantees' eligíbility	for the grants or ass	istance, and the select		
oriteria used to award the grants or assistance? 2 Describe in Part IV the organization's procerdures for monitoring the use of ment funds in the United States	istance? ocedures for mor	itoring the use of grant	funds in the Liniter	4 Ctatae	****		X Yes No	
E	Governments an	nd Organizations in the	e United States, C	omplete if the orda	nization answered "Y	es" to Form 990 Part	V line 21 for any	
	\$5,000. Check th	is box if no one recipier	nt received more th	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if addition:	al space is needed V	
1 (a) Name and address of organization or government	(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	
TIDES CENTER/HEALTH CARE FOR								
AMERICA EDUCATION FUND - 1825 K							PO SUPPORT EDUCATIONAL	
STREET NW SUITE 400 - WASHINGTON,							HEALTH CARE FOR AMERICA	
DC 20006	35-2332813	501(C)(3)	100,000.	0.			PROJECT	
AFFIRMATIVE OPTIONS COALITION 555 PARK STREET, SUITE 420 SAINT PAUL, MN 55103	41-1734880	201(C)(3)	30,000.	0			SUPPORT CHARITABLE BDUCATIONAL ACTIVITIES	1
9TO5, NATIONAL ASSOCIATION OF WORKING WOMEN ~ 207 FAST RIFFALO								
STREET #211 - MILWAIKER WT 53202	34-1946311	501(0)(3)	000 05				SUPPURT CRAKTTABLE	
		IC) IC) TAD	. uuu , uc	•			EDUCATIONAL ACTIVITIES	
ARABELLA LEGACY FUND 734 15TH STREET, NW, SUITE 600 WASHINGTON, DC 20005	20-5806345	501(C)(3)	25,000.				SUPPORT CHARITABLE EDUCATIONAL ACTIVITIES	
COALITION ON HUMAN NEEDS								
1120 CONNECTICUT AVENUE, SUITE 312 WASHINGTON, DC 20036	26-4680984	501(C)(3)	21,000.	. 0		X4 1 <sup>-1</sup>	SUPPORT CHARITABLE EDUCATIONAL ACTIVITIES	
USC UNKUCH INSTITUTE OF POLITICS 3518 TROUSDALE PARKWAY, VKC 263							SUPPORT CHARITABLE	
LOS ANGELES, CA 90089	95-1642394	501(C)(3)	5,000.	0.		_ <b>P</b>	EDUCATIONAL ACTIVITIES	
2 Enter total number of section 501(c)(3) and government organizations	nd government o	rganizations					•	
-	2				***************************************	**********************	.0	
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Natice,	see the Instructions t	for Form 990.				Schedule I (Form 990) 2009	

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Schedule (Form 990) 2009 CENTER FOR AVERICAN PROGRESS ACTI Part III Grants and Other Assistance to Individuals in the United States. C Use Part IV and Schedule F-1 (Form 990) if additional space is needed.	PROGRESS ACTION FUND United States. Complete it space is needed.	rund plete if the organizi	ation answered "Yes"	PROGRESS ACTION FUND United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. space is needed.	300192708 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	le the information	required in Part I,	line 2, and any other	additional Information.	
SCHEDULE I, PART I, LINE 2: CENTER FOR AMERICAN PROGRESS ACTION FUND	GRESS ACTION	FUND			
REQUIRES GRANTEE ORGANIZATIONS TO REPRESENT, WARRANT	WARRANT AND AGREE:	THAT IT			
WILL USE GRANT FUNDS SOLELY FOR PURPOSES CONSISTENT WITH CAPAF'S TAX-EXEMPT	WITH CAPAF'S	TAX-EXEMPT			
STATUS UNDER SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE; THAT NO	иИЕ СОРЕ; ТНА	T NO			
PORTION OF GRANT FUNDS WILL BE USED DIRECTLY OR IND	INDIRECTLY TO EX	TO EXPRESSLY OR			
IMPLICITLY SUPPORT OR OPPOSE ANY CANDIDATE SEEKING ELECTION TO PUBLIC	ELECTION TO P	UBLIC			
OFFICE OR PROVIDE A BENEFIT TO ANY POLITICAL PARTY C	Y OR CANDIDATE,	THAT IT			
WILL ALLOW CAPAF STAFF OR REPRESENTATIVES TO CONDUCT	CONDUCT EVALUATIONS AND AUDITS	AND AUDITS			
OF THE USE OF GRANT FUNDS, WHICH MAY INVOLVE VISITS TO OBSERVE, REVIEW AND	TO OBSERVE,	REVIEW AND			
932102 02-02-10		32			Schedule 1 (Form 990) 2009

.....

Part IV Supplemental Information	
DISCUSS ITS OPERATIONS, FINANCIAL RECORD	DS, AND OTHER MATERIALS CONNECTED
WITH THE GRANTEZ; AND THAT IT WILL SEND	CAPAF FINAL FINANCIAL AND NARRATIVE
REPORTS BY A DATE SPECIFIED IN THE ORIG	INAL AWARD LETTER, CAPAF REQUIRES
DONEE ORGANIZATIONS TO PROVIDE NARRATIVE	E AND FINANCIAL REPORTS THAT: ARE
SIGNED BY AN OFFICER OF THE ORGANIZATION	N; DESCRIBE HOW THE FUNDS WERE SPENT
AND WHAT WAS ACCOMPLISHED; AND PROVIDE A	A REASONABLY DETAILED ACCOUNT OF THE
ACTIVITIES CONDUCTED BY THE GRANTEE IN F	PERFORMANCE OF THE AGREED UPON WORK.
· · · · · · · · · · · · · · · · · · ·	
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32291 04-24-09	Schedule I (Form 990
61103 137216 127119	33 2009.04040 CENTER FOR AMERICAN PROGRES 12711

CENTER FOR AMERICAN PROGRESS ACTION FUND

30-0192708

Page 2

Schedule I (Form 990) 2009

#### Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990

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

Name of the organization

#### CENTER FOR AMERICAN PROGRESS ACTION FUND

Open to Public Inspection Employer identification number

OMB No. 1545-0047

09

30-0192708

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROGRESSIVE LEADERS THROUGHOUT THE COUNTRY AND THE WORLD,

FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE AMENDED AS OF JUNE

11, 2009, IN RELEVANT PART, TO INCREASE THE NUMBER OF AUTHORIZED DIRECTORS

FROM SEVEN TO EIGHT.

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE DEPARTMENT WORKED

DIRECTLY WITH AN INDEPENDENT ACCOUNTING FIRM ENGAGED TO PREPARE THE 990 ON

BEHALF OF THE ORGANIZATION. THE FINANCE DEPARTMENT MANAGED THE PROCESS,

WITH CLOSE COORDINATION WITH THE LEGAL DEPARTMENT. THE ACCOUNTING FIRM

PROVIDED A DRAFT 990, WHICH WAS REVIEWED AND COMMENTED ON BY THE FINANCE,

ADMINISTRATION AND LEGAL TEAMS. CERTAIN PORTIONS OF THE 990 WERE REVIEWED

AND COMMENTED ON BY OUTSIDE TAX COUNSEL, THE CORPORATE OFFICERS AND THE COO

AS WELL,

AFTER REVIEW AND COMMENT BY THE COO AND CHAIR, THE COMPLETE 990 AND SUMMARY

MATERIALS WERE PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD FOR REVIEW AND

CONSIDERATION ON BEHALF OF THE FULL BOARD. THE AUDIT COMMITTEE WAS OFFERED

THE OPPORTUNITY TO DISCUSS THE MATERIALS WITH CORPORATION STAFF AND THE

ACCOUNTING FIRM THAT PREPARED THE 990. THE AUDIT COMMITTEE APPROVED THE

FORM 990 AND THE FULL BOARD RECEIVED THE APPROVED VERSION BEFORE IT WAS

FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE CORPORATION IS COMMITTED TO

PREVENTING OUTSIDE FINANCIAL INTERESTS OF ITS BOARD MEMBERS OR EMPLOYEES

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. <sup>002211</sup> 02-03-10 34 Schedule O (Form 990) 2009

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SCHEDULE O

Department of the Treasury internal Revenue Service

(Form 990)

## Supplemental Information to Form 990

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

Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer Identification number 30-0192708

OMB No. 1545-0047

Open to Public

FROM INFLUENCING ITS ACTIVITIES. TO THAT END. IT HAS ADOPTED AND ENFORCES

POLICIES TO PREVENT CONFLICTS OF INTEREST AND THE APPEARANCE OF CONFLICTS

OF INTEREST, INCLUDING SEPARATE POLICIES (1) GOVERNING OFFICERS AND

DIRECTORS, AND (2) EMPLOYEES.

COMPLIANCE WITH POLICIES GOVERNING OFFICERS AND DIRECTORS

UNDER THE TERMS OF THE CONFLICT OF INTEREST POLICY ADOPTED BY THE BOARD OF

THE CORPORATION, AN INTERESTED BOARD MEMBER OR OFFICER IS DEFINED AS ANY

BOARD MEMBER, OFFICER OR MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS

WHO HAS A PINANCIAL INTEREST IN A PARTICULAR TRANSACTION OR ARRANGEMENT, A

BOARD MEMBER OR OFFICER HAS A FINANCIAL INTEREST IF HE/SHE OR A MEMBER OF

HIS/HER IMMEDIATE FAMILY HAS OR WILL HAVE WITHIN A MATERIAL PERIOD OF TIME

(1) A CONTROLLING OR MATERIAL OWNERSHIP OR INVESTMENT INTEREST IN ANY

ENTITY WITH WHICH CAP ACTION HAS A TRANSACTION OR ARRANGEMENT; OR (2) A

COMPENSATION ARRANGEMENT WITH CAP ACTION OR WITH ANY ENTITY OR INDIVIDUAL

WITH WHICH CAP ACTION HAS A TRANSACTION OR ARRANGEMENT, AN INTERESTED

BOARD MEMBER OR OFFICER MUST DISCLOSE THE EXISTENCE OF HIS OR HER FINANCIAL

INTEREST AND ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES

WITH BOARD-DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR

ARRANGEMENT WITH WHICH HE OR SHE MAY HAVE AN ACTUAL OR POTENTIAL CONFLICT

OF INTEREST.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIALS FACTS, AND

AFTER DISCUSSION WITH THE INTERESTED PERSON, THE DISINTERESTED BOARD OR

COMMITTEE MEMBERS DECIDE IF A CONFLICT OF INTEREST EXISTS WITHOUT THE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 02-03-10

Schedule O (Form 990) 2009

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Department of the Treasury Internal Revonue Service

## Supplemental Information to Form 990

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

Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

OMB No. 1545-0047

Open to Public

Inspection

INTERESTED PERSON BEING PRESENT FOR THOSE DELIBERATIONS.

A VOTING MEMBER OF ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION

MATTERS AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM CAP

ACTION FOR SERVICES IS PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT

MEMBER'S OWN COMPENSATION.

AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE

MEETING, BUT AFTER SUCH PRESENTATION, HE OR SHE LEAVES THE MEETING DURING

THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT

RESULTS IN THE CONFLICT OF INTEREST.

IF APPROPRIATE, THE BOARD OR COMMITTEE WILL APPOINT A DISINTERESTED PERSON

OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR

ARRANGEMENT AND TO COMPILE SUCH DATA AND INFORMATION ABOUT WHAT

ORGANIZATIONS SIMILAR TO CAP ACTION ARE PAYING FOR COMPARABLE GOODS OR

SERVICES AS MAY BE APPROPRIATE.

AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE WILL DETERMINE

WHETHER CAP ACTION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR

ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT

GIVE RISE TO A CONFLICT OF INTEREST.

IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY

ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF

INTEREST, THE BOARD OR COMMITTEE WILL DETERMINE BY A MAJORITY VOTE OF THE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. <sup>832211</sup> <sup>02-03-10</sup> 36

Schedule O (Form 990) 2009

13261103 137216 127119

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990

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

Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND

2009 Open to Public Inspection

OMB No. 1545-0047

Employer identification number 30-0192708

DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT (1) IS IN

THE BEST INTEREST OF CAP ACTION AND FOR ITS OWN BENEFIT, AND (2) WHETHER

THE TRANSACTION IS FAIR AND REASONABLE TO CAP ACTION. THE BOARD OR

COMMITTEE WILL DECIDE WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT

IN CONFORMITY WITH SUCH DETERMINATION.

IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A PERSON HAS

FAILED TO DISCLOSE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST, IT WILL

INFORM THE PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD THE PERSON AN

OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.

IF AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER

INVESTIGATION AS MAY BE ARRANGED IN THE CIRCUMSTANCES, THE BOARD OR

COMMITTEE DETERMINES THAT THE MEMBER HAS IN FACT FAILED TO DISCLOSE AN

ACTUAL OR POTENTIAL CONFLICT OF INTEREST, IT WILL TAKE APPROPRIATE

DISCIPLINARY OR CORRECTIVE ACTION.

COMPLIANCE WITH POLICIES GOVERNING EMPLOYEES

ALL EMPLOYEES HAVE A DUTY TO DISCLOSE IMMEDIATELY TO THEIR SUPERVISOR. THE

CEO OR THE EVP THE EXISTENCE OF ANY ACTUAL OR POTENTIAL CONFLICT OF

INTEREST SO THAT SAFEGUARDS CAN BE ESTABLISHED IF APPROPRIATE. UPON ANY

SUCH DISCLOSURE, THE SUPERVISOR, CEO OR EVP INFORMS THE GENERAL COUNSEL AND

A DECISION IS MADE BY THE RELEVANT PARTIES, WHICH WILL INCLUDE IN EACH CASE

AT LEAST THE EVP AND GC, REGARDING WHETHER AN ACTUAL OR POTENTIAL CONFLICT

EXISTS AND, IF SO, WHAT SAFEGUARDS CUGHT TO BE PUT IN PLACE.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 92211 02-03-10

Schedule O (Form 990) 2009

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Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990

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



Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

FORM 990, PART VI, LINE 15:

CAP ACTION OPERATES UNDER A COST SHARING AGREEMENT WITH CENTER FOR AMERICAN

PROGRESS, APPROVED BY THE BOARDS OF EACH ORGANIZATION, UNDER WHICH CAP

EMPLOYS ALL THE ORGANIZATIONS' STAFF AND PAYS FOR GENERAL AND

ADMINISTRATIVE EXPENSES, AND CAP ACTION REIMBURSES CAP FOR ITS SHARE OF

THESE EXPENSES, COMPENSATION FOR STAFF AND FELLOWS IS SET BY THE

COMPENSATION COMMITTEE OF CAP'S BOARD OF DIRECTORS AND CAP ACTION RELIES ON

THE PRACTICES PUT IN PLACE BY CAP'S BOARD OF DIRECTORS TO ENSURE EMPLOYEE

COMPENSATION IS NOT EXCESSIVE.

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

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

OH, OK, OR, PA, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: CAP ACTION MAKES ITS GOVERNING

DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE

TO THE PUBLIC. CAP ACTION'S GOVERNING DOCUMENTS ARE INCLUDED IN ITS FORM

1024, APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(C)(4).

CHANGES TO ITS GOVERNING DOCUMENTS ARE FILED WITH ITS ANNUAL FORM 990.

BOTH FORMS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUESTS RECEIVED AT ITS

WASHINGTON, D.C. OFFICE. CAP ACTION'S ANNUAL FORM 990 IS ALSO MADE

AVAILABLE TO THE PUBLIC BY WAY OF THE ONLINE INFORMATION SERVICE,

GUIDESTAR.ORG. CAP ACTION'S AUDITED FINANCIAL STATEMENTS ARE MADE

AVAILABLE TO THE PUBLIC UPON REQUEST AT ITS WASHINGTON, D.C. OFFICE.

 CAP ACTION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTANT

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

 \$832211 02-03-10

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SCHEDULE C	)
(F 000)	

Department of the Treasury Internal Revenue Service

(Form 990)

## Supplemental Information to Form 990

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

Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND

2009 Open to Public Inspection

OMB No. 1545-0047

Employer identification number 30-0192708

ON AN ANNUAL BASIS. CAP ACTION'S AUDIT COMMITTEE, ACTING WITH DELEGATED

AUTHORITY ON BEHALF OF THE FULL BOARD OF DIRECTORS, OVERSEES ALL ASPECTS OF

THE ORGANIZATION'S FINANCIAL STATEMENT AUDIT. EACH YEAR, THE AUDIT

COMMITTEE APPROVES THE ORGANIZATION'S AUDITOR. AT ANY STAGE OF THE AUDIT,

THE AUDIT COMMITTEE HAS THE OPPORTUNITY TO MEET WITH THE AUDITOR WITH OR

WITHOUT CAP ACTION MANAGEMENT OR STAFF PRESENT. AT THE CONCLUSION OF THE

AUDIT, THE AUDIT COMMITTEE REVIEWS THE AUDIT REPORT, WHICH INCLUDES

COMMUNICATIONS TO THE AUDIT COMMITTEE REQUIRED UNDER STATEMENT OF AUDITING

STANDARDS \$114. AFTER ITS REVIEW AND DISCUSSION WITH THE AUDITOR, THE

AUDIT COMMITTEE VOTES TO ACCEPT OR REJECT THE AUDIT.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. <sup>932211</sup> 0<sup>2-03-10</sup>

Schedule O (Form 990) 2009

Form	99	O
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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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



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Department of the Treasury Internal Revenue Service

Аг	or the	2008 cai	endar year, or tax year beginning and en	nding		
Bc	heck if oplicable:	Please use (RS	C Name of organization		D Employer identific	ation number
	Address change	abel or print or	CENTER FOR AMERICAN PROGRESS ACTION H	FUND		
	Name change	type.	Doing Business As		30-0	192708
	]inilial ]return ]Termin-	See Specific	Number and street (or P.O. box if mail is not delivered to street address) Ro 1333 H STREET, NW 10TH FLOOR	oom/suite	E Telephone number	
-	_lation ]Amenda Ireturn		City or town, state or country, and ZIP + 4			)682-1611
-	_Ireturn ]Applica Ition		WASHINGTON, DC 20005		G Gross receipts \$	8,886,450.
	pending		ne and address of principal officer: JOHN PODESTA		H(a) Is this a group re	Yes X No
			E AS C ABOVE		for affiliates?	
<u> </u>	avere		$135 \times 145 \times 145 \times 145$ $135 \times 1501(c) (4) = (insert no.) = 4947(a)(1) \text{ or } = 527$		H(b) Are all affiliates inc	
			W.AMERICANPROGRESSACTION.ORG		1	list. (see instructions)
			n: X Corporation Trust Association Other	L Voor	H(c) Group exemption	State of legal domicile: DC
		Summ				State of legal domicile. DC
_			scribe the organization's mission or most significant activities: SHAPE	THE	NATTONAL PO	LTCY DEBATE
Activities & Governance			RANSFORM IDEAS INTO POLICY		MATIONAL FO	DICI DEDAIE
na			s box  if the organization discontinued its operations or dispose	ed of more	than 25% of its asset	
IAV	Ł				3	6
õ			of independent voting members of the governing body (Part VI, line 1b)	•••••		4
s a			ber of employees (Part V, line 2a)			0
vitie	6 1	Total num	nber of volunteers (estimate if necessary)		6	<u>0</u>
ţ,	7a 1	Total gros	ss unrelated business revenue from Part VIII, line 12, column (C)	••••••		34,631.
4	b 1	Vet unrel:	ated business taxable income from Form 990-T, line 34			19,724.
•					Prior Year	Current Year
Revenue	8 (	Contribut	ions and grants (Part VIII, line 1h)		3,146,131.	8,653,399.
			service revenue (Part VIII, line 2g)			
	10	nvestme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		25,092.	14,396.
ш			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			187,470.
			enue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,171,223.	8,855,265.
	13 (	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)		2,766.	127,000.
			paid to or for members (Part IX, column (A), line 4)			
es es	15 \$	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\dots}$		1,409,048.	3,968,755.
Expenses			nal fundraising fees (Part IX, column (A), line 11e)			121,750.
Ř			draising expenses (Part IX, column (D), line 25) 🕨 263,92	8.		
ш			penses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,207,050.	
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,618,864.	7,580,502.
. 0	19	Revenue	less expenses. Subtract line 18 from line 12		552,359.	1,274,763.
ts or					Beginning of Year	End of Year
Net Assets ( Fund Balanc	20		ets (Part X, line 16)		1,427,506.	3,445,246.
let A	21		ilities (Part X, line 26)	······	350,009.	1,092,986.
			ts or fund valances. Subtract line 21 from line 20		1,077,497.	2,352,260.
	art II			statemente	and to the best of you knowled	the second by a Ward the barrier of the
		and compl	alties of perfury, I declare that I havelexamined this return, including accompanying schedules and ete. Declaration of preparer (other than officer) is based on all information of which preparer has an	y knowledge	and to the best of my knowled	ige and belier, it is true, correct,
Sig	n		The Whatte		i Ulici	Ina
Hei		200	native of officer		Date	0-1
1101	G		ARAH ROSEN WARTELL, TREASURER/EXECUTI	ve vr	5	
			be or print name and title		-	
		Preparer		T Ch	Neck if Prepar	er's identifying number
Pai		signature		1 and se	)]- nployed 🕨 🔲 (see in	structions)
	parer's	Firm's nam	LARSONAILEN LL	<u>~~~</u>		
Use	e Only	yours if self~emplo	Med > 2900 SOUTH OTINCY ST. SUITE 150	)		
		address, a ZIP + 4	ARLINGTON, VA 22206		Phone no 🕨 7	03-998-5100
Ma	y the IF	RS discus	ss this return with the preparer shown above? (see instructions)			X Yes No

	990 (2008) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708 Page 2
Par	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: CENTER FOR AMERICAN PROGRESS ACTION FUND'S PRIMARY EXEMPT PURPOSE CONTAINS TWO MAJOR ELEMENTS. THESE ARE HIGHLIGHTED IN PAGE 2, PART III, LINES 4A & 4B
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 EZ? Yes X No If "Yes", describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: )(Expenses \$ 4,883,812. including grants of \$ 127,000.)(Revenue \$ )) TO IMPACT THE NATIONAL DEBATE AND TRANSFORM PROGRESSIVE IDEAS INTO POLICY THROUGH RAPID RESPONSE COMMUNICATIONS, PUBLIC EDUCATION, GRASSROOTS ORGANIZING AND ADVOCACY IN PARTNERSHIP WITH AMERICAN CITIZENS, EXECUTIVE AND LEGISLATIVE BRANCH POLICYMAKERS AND PROGRESSIVE LEADERS THROUGHOUT THE COUNTRY AND THE WORLD.
4b	(Code: )(Expenses \$ 1,716,711. including grants of \$ )(Revenue \$ TO PROMOTE A PROGRESSIVE AGENDA UTILIZING A MODERN COMMUNICATIONS PLATFORM THAT REACHES ONLINE AUDIENCES WITH WEB SITE PUBLICATIONS, EMAIL OUTREACH, AND NEW MEDIA.
·	
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► \$ 6,600,523. (Must equal Part IX, Line 25, column (B).)

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Form 990 (2008)

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			AMERICAN	PROGRESS	ACTION	FUND	30-0192708	Page 3
ecklist of F	Required Sc	hedul	25					

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And and a second se	990 (2008) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192	708	Pa	age 3
Par	IV Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1		<u> </u>
	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<b></b>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		~~	i
	public office? If "Yes," complete Schedule C, Part I	3	X	ļ
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<b> </b>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		
£	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	_		
7	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>x</u>
ſ	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		X
b				w
9	Schedule D, Part III	8		<u>x</u>
3	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			v
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	9		X
11	Did the organization hold assets in term, permanent, or quasi-endowments? If yes, "complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	10		<u> </u>
	If "Yes," complete Schedule D, Parts VI, VII, VII, IX, or X as applicable		v	1
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	11	X	
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	40	x	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12 13	Δ	x
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	13 14a		$\frac{\Lambda}{X}$
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		<u> </u>
_	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			<u> </u>
	located outside the United States? If "Yes," complete Schedule F, Part II	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	10		<u> </u>
	located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Х	
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	X	<u> </u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and If	21	Х	<u> </u>
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	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	1	
<b>2</b> 5a	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? // "Yes," complete Schedule L, Part /	25a	L	X
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	25b	<b> </b>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
<u>~</u> -	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
<u></u>	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	L	X

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Form **990** (2008)

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# Form 990 (2008) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708 Page 4

			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		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
С	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part IJ	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
	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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
		-	000	0000

Form 990 (2008)

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Form 990 (2008)	CENTER	FOR	AMERICAN	PROGRESS	ACTION	FUND
Part V Statements R	egarding C	ther I	<b>RS Filings and</b>	I Tax Complia	nce	

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1a East the number reported in Exx 3 of Form 1006, Annual Summary and Transmittal of U.S. Information Returns, Filter 6- If not applicable         1a         6.8         5           b East the number of Forma W2GS included in line 1a. Enter 6- If not applicable         1a         6.8         5           c Bit the regarization comply with backup withholding intes for reportable gammeris to vendors and reportable gaming (gambling) winnings to pice winners?         2a         East the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 2a         0         7a						Yes	No
b       Enter the number of Forms W-2G included is line 1a. Enter-O if not applicable       10       <	1a						
b       Enter the number of Forms W-2G included is line 1a. Enter-O if not applicable       10       <		U.S. Information Returns. Enter -0- if not applicable	1a		68		
Important of the propose reported on Form W43, Transmittal of Wage and Tax Statements, take the propose reported on Ime 2a, did the organization lie all required foderal employments, take the transmittal of Wage and Tax Statements, take the transmittal of Xage was the transmittal of the transmittal of Wage and Tax Statements, take the transmittal of Xage was the transmittal of the transmittal of Vage the transmittal of Wage and Tax Statements, take the transmittal of Xage was the transmittal of the organization was a transmittal or other authority over, a transmittal of the organization was a bank account, accurites account, or other functional account)?       Image the transmittal of transmittal of Yage transmittal of transmittal of Yage transmittal or the transmittal or transmite transmite transmittal or transmittal or transmittal		Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			0		
2a       Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements,       2a       0         b       If at least one is reported on line 2a, did the organization file all required feeteral employment tax returns?       2b         Note, If the sum of lines Ta and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)       3a       X         b       If the sum of lines Ta and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)       3b       X         b       If "Yes," has it filed a form 900-T for this yes? // 'We," provide an explanation in Schedule O       3a       X         4       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: ►	C						
The calendary year ending with or within the year covered by this return       2a       0         b       If at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b         Note. If the sum of lines 1a and 2a is greater than 250, you may be required to effect at employment (see instructions)       3a       X         3b       Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?       3a       X         4a       At any time during the calendar year, did the organization have an interest in, or a signature or other authonty over, a financial account)?       4a       X         5b       X       b       X       b       X         5a       Ut Yeas, "enter the name of the foroling country.>       See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         5a       Was the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         5a       Ut any taxable party notify the organization file form 88867. Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5b       X         6a       X       If Yeas," id dithe organization include with every solicitation an coyness statement that such contributions or gifts were not tax deductible?       6a       X         7b		(gambling) winnings to prize winners?		*********	1c	Х	
b If at least one is reported on line 2a, did the organization file all required foelard employment tar retures?       2b         Note, If the sum of lines 1a and 2a is greater than 260, you may be required to e-file this return. (see instructions)       3a       X         3a Did the organization have unrelated business gross income of \$1,000 or more during the year overred by this return?       3a       X         b If "Yes," has it filed a Form 990-T for this year? // Two," provide an explanation in Schedule O       3b       X         4 At any time during the calendary year, did the organization have an intrest in, or a signature or other authonity over, a financial account in a foreign country. ►       3b       X         5e the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         b Was the organization a party to a prohibited tax shefter transaction?       5a       X         b Uf any taxable party notify the organization file form 8282 T, Backoure by Tax-Evernpt Entity Regarding Prohibited Tax Shefter Transaction?       5c       5c         6a       X       Work the organization provide good or services in exchange for any quicit pro quo contributions or gifts wore not tax deductible?       5c       5c         c If "Yes," tald the organization movide yead or othe was defined by a good or services provided?       7b       X         b If "Yes," tald the organization on the during the earry quici pro quo contributions or gifts wore not tax deductibl	2a				5. A.		
b If at least one is reported on line 2a, did the organization file all required foelard employment tar retures?       2b         Note, If the sum of lines 1a and 2a is greater than 260, you may be required to e-file this return. (see instructions)       3a       X         3a Did the organization have unrelated business gross income of \$1,000 or more during the year overred by this return?       3a       X         b If "Yes," has it filed a Form 990-T for this year? // Two," provide an explanation in Schedule O       3b       X         4 At any time during the calendary year, did the organization have an intrest in, or a signature or other authonity over, a financial account in a foreign country. ►       3b       X         5e the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         b Was the organization a party to a prohibited tax shefter transaction?       5a       X         b Uf any taxable party notify the organization file form 8282 T, Backoure by Tax-Evernpt Entity Regarding Prohibited Tax Shefter Transaction?       5c       5c         6a       X       Work the organization provide good or services in exchange for any quicit pro quo contributions or gifts wore not tax deductible?       5c       5c         c If "Yes," tald the organization movide yead or othe was defined by a good or services provided?       7b       X         b If "Yes," tald the organization on the during the earry quici pro quo contributions or gifts wore not tax deductibl		filed for the calendar year ending with or within the year covered by this return	2a		0		
3a       Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? <sup>3a</sup> X          b       ff "Yes," has it filed a Form 990-T for this year? <i>It No</i> ," provide an explanation in Schedule O <sup>3b</sup> X          b       ff "Yes," has it filed a Form 990-T for this year? <i>It No</i> ," provide an explanation in Schedule O <sup>3b</sup> X          b       If "Yes," has it filed a Form 990-T for this year? <i>It No</i> ," provide an explanation in Schedule O <sup>4a</sup> X          b       If "Yes," enter the name of the forcign country: <i>I</i> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and              6a       X <sup>5a</sup> X          5a <sup>5d</sup> X                     Sa          X                           Sa	b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns? .		2b	- Surged age (sur	
b If "Yes," has it field a Form 900-T for this year? If "No," provide an explanation in Schedule O 4 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," inter the name of the foreign country: 5 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 at any time during the tax year? 5 D di any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 D di any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 D di any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 D di any taxable party notify the organization file Form 8806-T. Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transacture? 5 D di Any taxable party notify the organization solicit any contributions and express statement that such contributions or gifts 5 were not tax deductible? 7 Organization solicit any contributions under section 170(c). 8 Dif the organization notify the dore or the wave or the goods or services provided? 7 D If "Yes," did the organization only the dore or the wave or the goods or services provided? 7 D If "Yes," thickate the number of Forms 8282 filed during the year 7 D If "Yes," thickate the number of Forms 8282 filed during the year 9 Section 501(c)(3) and other sponsoring organization, or a personal benefit contract? 7 D If Section 501(c)(3) and other sponsoring organization, or a helm shale, add the organization file. Section 501(c)(3) and other sponsoring organization, or a party to a personal sequere? 9 Section 501(c)(3) and other sponsoring organization, or a full moright be yar? 9 Section 501(c)(3) and othe		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instru	ictions)		er,	
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; a foreign country (such as a bank account, securities account, or other financial account)?       4a       X         b If "Yes," enter the name of the foreign country; b       —       4a       X         See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       X         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b       Did any taxable party nolly the organization filie Form 8866 T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5b       X         6a       X       11 "Yes," (did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6a       X         7       Organization solid any contributions under section 170(c).       8b       X         8       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7a       X         9       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         9       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         9       If the organization, during the yea	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by	this return?	За	Х	,
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) a counting country (such as a bank account, securities account, or other financial account)?       4a       X         b If "Yes," enter the name of the foreign country: b       See the instructions to exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       See the instructions to exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       Sa       X         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       Sa       X         5a       Was the organization of the organization fille form 8886-7, Disclosure by Tax-Exempt Entity Regarding Prohibited       Tax Shelter Transaction?       Sa       X         6a       Did the organization notify the end tax deductible?       Ga       X       Sc	þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	
b       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.         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a         5a       Was the organization include with every solicitation that it was or is a party to a prohibited tax shelter transaction?       5b         5a       If "Yes," to question 5a or 5b, did the organization tile Form 88867, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5c         6a       If "Yes," to question 5a or 5b, did the organization are express statement that such contributions or gifts were not tax deductible?       6a       X         6b       X       for ganization solicit any contributie contributions under section 170(c).       6a       X         7       Organization provide goods or services in exchange for any quid pro quo contribution of more than \$757       7a       X         7       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         7       If if Yes," indicate the number of Forms 8282 filed during the year.       7d       X       7d       X         9       Id the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X       X <td>4a</td> <td>At any time during the calendar year, did the organization have an interest in, or a signature or other</td> <td>autho</td> <td>ority over, a</td> <td></td> <td></td> <td></td>	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	ority over, a			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and       Imancial Accounts.         Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       Sa       X         b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       Sa       X         c If "Yes," to question 5a or 5b, did the organization file Form 88657, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       Sa       X         Ga Did the organization solicit any contributions that were not tax deductible?       Ga       X       Sa         7 Organization solicit any contributions that were not tax deductible?       Ga       X       Sa         7 Organization solicit any contributions under section 170(c).       Sa       X       X         8 Did the organization provide goods or services in exchange for any quicit pro quo contribution of more than \$75?       7a       X         7 Did the organization notify the donor of the value of the goods or services provided?       7d       X         9 Did the organization, during the year, neaviewa ny funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         9 For all contributions of qualified Intellectual property, did the organization, file Form 8898 as required?       7n       X         9 For all contributions of qualified Intellectual property, did t		financial account in a foreign country (such as a bank account, securities account, or other financial	accou	unt)?	4a		X
Financial Accounts.       5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         6a       Dif any taxable party notify the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5c       5c         6a       Dif due organization solid: any contributions that were not tax deductible?       6a       X         7       Organization shat may receive deductible contributions under section 170(c).       6b       X         7       Organization notify the donor of the value of the goods or services provided?       7a       X         6       Dif the organization notify the donor of the value of the goods or services provided?       7a       X         6       Dif the organization notify the donor of the value of indeposts or services provided?       7a       X         7       Dif the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         8       If "Yes," indicate the number of Forms 8282 filed during the year       7d       Y       X         9       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7	, p	If "Yes," enter the name of the foreign country:					
5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c       If "Yes," to question 5a or 5b, did the organization file Form 8866-T, Disclosure by Tax Exempt Entity Regarding Prohibited       5c       6a       X         6a       Did the organization solicit any contributions that were not tax deductible?       6a       X       6b       X         7       Organization solicit any contributions that were not tax deductible?       6a       X       6b       X         7       Organization stat may receive deductible contributions under section 170(c).       7a       X       7b       7a       X         11       "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7a       X         11       "Yes," did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         12       Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         12       Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7t		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank	and		读述	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax. Shelter Transaction?       5c       5c         6a Did the organization solicit any contributions that were not tax deductible?       6a       X       5c         7 Organizations that may receive deductible contributions under section 170(c).       6b       X       7a       X         7 Organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?       7a       X       7a       X         7 Did the organization notify the donor of the value of the goods or services provided?       7a       X       7b       7c       X         7 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         9 For all contributions of cars, boats, airplanes, and other vehicles, did the organization file Prom 8282 filed during the vehicles, did the organization file SC as required?       7t       X         9 For all contributions of cars, boats, airplanes, and other vehicles, did the organization file SC as required?       7t       X         9 For all contributions of cars, boats, airplanes, and other vehicles, did the organization files and section 509(a)(3) supporting organizations maintaining donor advised funds.       9a		Financial Accounts.					
c       If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?       5c         6a       Did the organization solicit any contributions that were not tax deductible?       6a       X         7       Organization solicit any contributions that were not tax deductible?       6a       X         7       Organization include with every solicitation an express statement that such contributions or gifts       6a       X         7       Organization solicit any contributions under section 170(c).       7a       X         1       Did the organization notify the donor of the value of the goods or services the contribution of more than \$757       7a       X         1       If "Yes," did the organization notify the donor of the value of the goods or services the goods	5a						X
Tax Shelter Transaction?       Sc       Sc         Ga Did the organization solict any contributions that were not tax deductible?       Ga X         b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Ga X         7 Organizations that may receive deductible contributions under section 170(c).       Bit Tyes," did the organization notify the donor of the value of the goods or services provided?       Ta         8 Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       To         c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Tr       X         9 For all contributions of qualified intellectual property, did the organization, during the year, neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       Tr       X         1 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       Tr       X         1 Did the organization, during the year, nay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       Tr       X         4 Did the organization, during the year, nay premiums, directly or indirectly, on a personal benefit contract?       Tr       X         9 For all contributions of qualified intellectual property, did the organization file a Form 1098C as required? <td< td=""><td></td><td>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans</td><td>action</td><td>?</td><td></td><td></td><td>X</td></td<>		Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action	?			X
6a       Did the organization solicit any contributions that were not tax deductible?       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       X         7       Organizations that may receive deductible contributions under section 170(c).       8b       X       8b       X         a       Did the organization notify the donor of the value of the goods or services provided?       7a       X       X         c       Did the organization notify the donor of the value of the goods or services provided?       7b       7a       X         c       Did the organization notify the donor of the value of the goods or services provided?       7d       7a       X         c       Did the organization, notify the donor of the value of the goods or services provided?       7d       7a       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7e       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7f       X       g         for all contributions of qualified intellectual property, did the organization file a Form 1098C as required?       7h       X       g         for all contributions of acars, boats, airplanes, and other vehicles,	C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	/ Rega	arding Prohibited			
b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       X         7       Organizations that may receive deductible contributions under section 170(c).       6b       X         9       Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?       7a       X         9       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7b         0       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         1       M"Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         9       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7t       X         9       For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required?       7h       X         8       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       9a		***************************************			5c		ŀ
were not tax deductible?       6b       X         7       Organizations that may receive deductible contributions under section 170(c).       7a       X         a Did the organization provide goods or services in exchange for any quid pro quoi					6a	X	
7       Organizations that may receive deductible contributions under section 170(c).       7         a Did the organization provide goods or services in exchange for any quid pro que contribution of more than \$75?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7e       X         b Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h         8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)       8       8         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       9a       9a         9 Section 501(c)(7) organizations. Enter: N/A       10a       10a       10a       10a         10 Section 501(c)(12) organizations. En	b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions	or gifts			
7       Organizations that may receive deductible contributions under section 170(c).       7         a Did the organization provide goods or services in exchange for any quid pro que contribution of more than \$75?       7a       X         b If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b       7c       X         c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7e       X         b Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h         8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)       8       8         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       9a       9a         9 Section 501(c)(7) organizations. Enter: N/A       10a       10a       10a       10a         10 Section 501(c)(12) organizations. En		were not tax deductible?			6b	X	
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       X         e       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7n       X         f       Did the organizations. boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       X         g       For contributions of qualified intellectual property dry and the reganization file a Form 1098-C as required?       7h       X         g       Section 501(c)(3) and other sponsoring organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       8       8         g       Section 501(c)(7) organizations. Enter: N/A       10a       10a       10b       10a         g       Did the organization make	7	Organizations that may receive deductible contributions under section 170(c).					
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       7c       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d	а		re thar	n \$75?	7a		X
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d         e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1038-C as required?       7h       X         8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.       8       9         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a       9a       9a         10 Section 501(c)(3) and other sponsoring organizations under section 4966?       9a       9a<	b		•••••		7b		
d If "Yes," indicate the number of Forms 8282 filed during the year       7d         e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       8         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?       8       9         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       9         a Did the organization make any taxable distributions under section 4966?       9a       9a         b Did the organization make a distribution to a donor, donor advisor, or related person?       9b       9a         10 Section 501(c)(7) organizations. Enter: N/A       10a       10b       10b         11 Section 501(c)(12) organizations, Enter: N/A       11a       11a       12a         12 Section 501(c)(12) organizations, Enter: N/A       11a<	C						
e       Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       8         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?       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make a distribution to a donor, donor advised funds.       9b         10       Section 501(c)(7) organizations. Enter: N/A       10a       10b         11       Section 501(c)(12) organizations. Enter: N/A       11a       10a       11a         b       Gross income from members or shareholders       11a       11b       11b       12a			1		7c		X
benefit contract?       7e       X         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       7h         8       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)       8       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a       9a         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a       9a         9       Section 501(c)(7) organization make any taxable distributions under section 4966?       9a       9a         10       Section 501(c)(7) organizations, Enter: N/A       10a       10a       10a         11       Section 501(c)(12) organizations, Enter: N/A       10a       10b       11a       11a         11       Section 501(c)(12) organizations, Enter: N/A       11a       11a       11a							
1       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f       X         g       For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g       7g         h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h       7h         8       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)       8       8         9       Section 501(c)(3) and other sponsoring organization, or a fund maintained by a sponsoring organization, have       8       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8       8         9       Section 501(c)(7) and other sponsoring organizations maintaining donor advised funds.       8       9         9       Section 501(c)(7) organizations. Enter: N/A       9b       9b       9b       9b       9b       9b       9b       9c         10       Section 501(c)(12) organizations. Enter: N/A       10a	е					遊遊	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?       7g         h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h         8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)       7h         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8         9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a         9 Did the organization make any taxable distributions under section 4966?       9a         9 Did the organizations. Enter: N/A       10a         10 Section 501(c)(7) organizations. Enter: N/A       10a         11 Section 501(c)(12) organizations. Enter: N/A       10a         12 Section 501(c)(12) organizations. Enter: N/A       11a         13 Gross income from members or shareholders       11a         14 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 900 in lieu of Form 1041?       12a		benefit contract?	••••••	••••	7e	ļ	
h       For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?       7h         8       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)       8         9       Section 501(c)(3) and other sponsoring organization, or a fund maintained by a sponsoring organization, have       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9a         9       Did the organization make any taxable distributions under section 4966?       9a         9       Did the organizations. Enter: N/A       9b         10       Section 501(c)(7) organizations. Enter: N/A       10a       10a         11       Section 501(c)(12) organizations. Enter: N/A       10a       10b         11       Section 501(c)(12) organizations. Enter: N/A       11a       12a         12       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a						ļ	X
8       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       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       9         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter: N/A       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter: N/A       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a	-	For all contributions of qualified intellectual property, did the organization file Form 8899 as required	l?		<u>7g</u>	ļ	ļ
supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have       8         excess business holdings at any time during the year?       8         9       Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.       8         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make any taxable distributions under section 4966?       9a         ction 501(c)(7) organizations. Enter: N/A       9b         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter: N/A       11a         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a		For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	Casr	required?	7h	100707-53	
excess business holdings at any time during the year? 8   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?   9 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?	0					法法	
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 9a   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?						推动	
a Did the organization make any taxable distributions under section 4966?       9a         b Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10 Section 501(c)(7) organizations. Enter: N/A       9b         a Initiation fees and capital contributions included on Part VIII, line 12       10a         b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11 Section 501(c)(12) organizations. Enter: N/A       10b         a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a	a			*****	9/96/96/94		14422-644
b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter: N/A       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter: N/A       10b         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a		Did the exercise time sector and the state of the sector o			-	\$3.C	
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.)         112a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?							
<ul> <li>a Initiation fees and capital contributions included on Part VIII, line 12</li></ul>					90	100 A	Hereitar
b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b         11       Section 501(c)(12) organizations. Enter: N/A         a       Gross income from members or shareholders       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a			1 +0-	1			
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?	-	Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities	100				
a Gross income from members or shareholders       11a         b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b         12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a				· [			
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amounts due or received from them.) 11b 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a				· · · · · · · · · · · · · · · · · · ·			國際
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	-		1 1 11				
	12a				122	1920-23	1216226
				1		1000	

Form **990** (2008)

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## CENTER FOR AMERICAN PROGRESS ACTION FUND

#### 30-0192708 Page 6 Rart VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the

Internal Revenue Code.)

Form 990 (2008)

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,	1886		1. 
	processes, or changes in Schedule O. See instructions.	S-S-S-S		
1a	Enter the number of voting members of the governing body 1a 6			
	Enter the number of voting members that are independent			2
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			
	of officers, directors or trustees, or key employees to a management company or other person?	3		х
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?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		223	<b>B</b> ereta
	by the following:			
а	The governing body?	8a	X	10005-000
b	Each committee with authority to act on behalf of the governing body?	86	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		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		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			<u> </u>
	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		**	<u> </u>
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		x
Sec	tion B. Policies	<u> </u>	L	
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			-
	to conflicts?	12b	x	
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	x	1
13	Does the organization have a written whistleblower policy?	13	X	<u> </u>
14	Does the organization have a written document retention and destruction policy?	14	x	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent		72943	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а		15a	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	x

а	The organization's CEO, Executive Director, or top management official?	15a		х
b	Other officers or key employees of the organization?	15b		Х
	Describe the process in Schedule O. (see instructions)		\$1.24	
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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		100	
	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		
0	Read Distance			-

#### Section C. Disclosure

## 17 List the states with which a copy of this Form 990 is required to be filed DC, AL, AK, AZ, AR, CA, CT, FL, GA, IL, KS, KY

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 X 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, and financial
	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:
	SARAH ROSEN WARTELL - (212)682-1611

	Η	STREET,	NW,	10 TH	FΙ	LOOR ,	WASH	IINGTO	)N,	DC	20005	
832006 12-18-08		SEE	SCHI	EDULE	0	FOR	FULL	LIST	OF	STA	TES	

#### 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.

X Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A)	(B)			(C	C)			(D)	(E)	(F)
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours	(cl	(check all that app		ly)	compensation	compensation	amount of		
	per week	sctor	ector					from the	from related organizations	other
	, , con	or din	æ			ated		organization	(W-2/1099-MISC)	compensation from the
		ustee	truste			pensi		(W-2/1099-MISC)	(	organization
		luai tr	tional		nploye	st com				and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compansated employee	Por me			organizations
JOHN PODESTA										
DIRECTOR/PRESIDENT/CEO	14.00	x		x				0.	0.	0.
PETER EDELMAN					<b> </b>	┢				
DIRECTOR	1.00	X						o.	0.	0.
JUDITH FEDER	[									
DIRECTOR	1.00	X						0.	0.	0.
BRODERICK JOHNSON										
DIRECTOR	1.00	X						0.	0.	0.
TOM PEREZ			Ì							
DIRECTOR	1.00	X						0.	0.	0.
HILARY ROSEN										
DIRECTOR	1.00	X			<u> </u>			0.	0.	0.
RON KLAIN	1	Í		ĺ	1					
DIRECTOR	1.00	X			ļ		<b> </b>	0.	0.	0.
SARAH ROSEN WARTELL		1								
TREASURER/EXECUTIVE VP DEBORAH FINE	6.00	<u> </u>		X	<b> </b>			0.	0.	0.
SECRETARY/GEN. COUNSEL	19.00			x		ŀ		0.		
DAVID MADLAND	19.00	┣—		<u> </u> ≏				U.	0.	0.
DIR AMERICAN WORKER PROJ	44.00		1	l I		x		0.	0.	0.
	11.00	┢			┢	╇	-	V.	· · ·	0.
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Form 990 (2008)

Form 990 (2008) CENTER F(	OR AMERI		<del>/</del> N	PF	200	GRI	ss	S ACTION FUN	D 30-01	9 <b>2708</b> Page <b>8</b>
Part VII Section A. Officers, Directors, Tru (A) Name and title	(B) Average hours		J	0) Posi	<b>;)</b> tion			Compensated Employ (D) Reportable compensation	rees (continued) (E) Reportable compensation	(F) Estimated amount of
	hot, motivate or director finstitutional trustee or director Key employee						Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	other compensation from the organization and related organizations
							-			
1b Total								0.		0. 0.
2 Total number of individuals (including those	e in 1a) who re	ceiv	ed n	nore	tha		-			▶ 0
<ul> <li>3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s</li> <li>4 For any individual listed on line 1a, is the si</li> </ul>	director or tru such individual	stee	e, ke	y en	nplo	yee,	orl	highest compensated e	mployee on	Yes No
and related organizations greater than \$15 5 Did any person listed on line 1a receive or the organization? <i>If "Yes," complete Sched</i>	0,000? <i>If "Yes,</i> accrue compei	" co nsat	impl tion 1	ete S from	Schi i any	edul y uni	e J . rela	for such individual ted organization for sen	vices rendered to	<u>4 X</u>
Section B. Independent Contractors 1 Complete this table for your five highest co										
the organization.		uep					215		\$100,000 of comp	ensation from
(A) Name and business	-							(B) Description of		(C) Compensation
FINANCIAL DYNAMICS, 88 P FLOOR, NEW YORK, NY 1000	5		-	3:	2N)	D		PUBLIC OPINI ANALYSIS	ON	259,622.
CHRIS WAYNE & ASSOCIATES STREET, NW, STE 406, WAS				2	00	36		EVENT PLANNI	ING	175,061.
2 Total number of independent contractors ( from the organization ►	including those 2	e în	1) w	ho r	ecei	ived	mo	re than \$100,000 in con	npensation	

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Form					ERICAN P	ROGRESS AC	TION FUND	30-0192	708 Page 9
						(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	) (   ; 	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grant similar amounts not included abov Noncesh contributions included in lines <b>Total.</b> Add lines 1a-11	1b           1c         2           1d         1           ons)         1e           s, and         1f           ia-1f; \$         1	08,701. 8,444,698.	8653399.			
Program Service Revenue	2 a t	a b c d	All other program service revel		Business Code				
		g	Total. Add lines 2a-2f						
	3 4 5		Investment income (including other similar amounts) Income from investment of tax Royalties	exempt bond p	roceeds	14,396. 7,500.			14,396. 7,500.
	1	b c	Gross Rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
đ	•	d	and sales expenses Gain or (loss) Net gain or (loss) Gross,income from fundraising		▶				
Other Revenue			including \$ 208,7 contributions reported on line Part IV, line 18 Less: direct expenses	01. of 1c). See a					
0			Net income or (loss) from func			-15,761.	<b>BBBAUADON AND AND AND AND</b>		-15,761.
		b	Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam	a b					
	10	a b	Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sale	returns a b					
	11		Miscellaneous Revenu	e ENERGY	Business Code 900099 541800	<u>161,100</u> . 34,631.		34,631.	161,100.
8320 02-02	12	d	All other revenue	·····		195,731 8855265		34,631.	167,235. Form <b>990</b> (2008)

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# Form 990 (2008) CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708 Page 10 Part IX Statement of Functional Expenses

	Section 501(c)(3) All other organizations must comp	and 501(c)(4) organiza lete column (A) but are	tions must complete al not required to complete	l columns. ete columns (B), (C), and	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	127,000.	127,000.		
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.				
4	See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,	100 247	100.045		
6	trustees, and key employees	182,347.	108,845.	69,978.	3,524.
7	Other salaries and wages	3,129,361.	2,804,253.	288,501.	36,607.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	209,784.	184,819.	22,430.	
9	Other employee benefits	213,053.	189,520.	21,040.	2,535.
10 11	Payroll taxes Fees for services (non-employees):	234,210.	206,338.	25,042.	2,830.
	Management				
b	Legal	48,659.	2,768.	45,891.	
с 6	Accounting	15,036.	00.005	15,036.	
d e	Lobbying Professional fundraising services. See Part IV, line 17	28,905. 121,750.	28,905.		101 750
f	Investment management fees	121,750.			121,750.
g		826,632.	735,761.	82,077.	8,794.
12 13	Advertising and promotion	154,863.	154,851.	9.	3.
14	Office expenses Information technology	22,961.	18,984.	2,711.	1,266.
15	Royalties				
16	Occupancy	671,352.	591,689.	58,148.	21,515.
17	Travel	179,244.	171,349.	113.	7,782.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	304,766.	287,926.		16,840.
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·		
22	Depreciation, depletion, and amortization	19,997.	19,475.	381.	141.
23	Insurance	24,478.	21,306.	2,315.	857.
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.)				
a		286,800.	286,800.	0.	0.
b	OPERATIONAL OVERHEAD COMMISSIONED PAPERS	163,494.	142,339.	15,441.	5,714.
c d	TELEPHONE	91,097. 70,955.	<u>91,097.</u> 61,602.	0.5,652.	0. 3,701.
e	FURNITURE & EQUIPMENT E	66,192.	57,186.	6,648.	2,358.
f	All other expenses	387,566.	307,710.	54,638.	25,218.
25 26	Total functional expenses. Add lines 1 through 24f	7,580,502.	6,600,523.	716,051.	263,928.
26	Joint Costs. Check here b if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined				
·	educational campaign and fundraising solicitation				

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# Form 990 (2008) (

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## CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708 Page 11

					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			793,285.	1	2,148,129.
	2	Savings and temporary cash investments	•••••	•••••••••••••••••••••••••••••••••••••••	334,941.	2	344,629.
	3	Pledges and grants receivable, net	267,668.	3	931,596.		
	4	Accounts receivable, net	•••••	***********************************	<u> </u>	4	<u> </u>
	5	Receivables from current and former officers, di					
		employees, or other related parties. Complete F				5	
	6	Receivables from other disqualified persons (as				attaite	
		4958(f)(1)) and persons described in section 495		alerana. Contra			
		Part II of Schedule L	and the second secon	6			
ß	7	Notes and loans receivable, net	*******		· · · · · · · · · · · · · · · · · · ·	7	
Assets	8	Inventories for sale or use				8	
Ą	9	Prepaid expenses and deferred charges	••••••			9	2,739.
	10a	Land, buildings, and equipment: cost basis	10a			or times.	
	Ь	Less: accumulated depreciation. Complete					
		Part VI of Schedule D	106	6,830.	15,432.	10c	11,403.
	11	Investments - publicly traded securities			10/1041	11	11,403.
	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	16,180.	15	6,750.		
1	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	1,427,506.	16	3,445,246.
	17	Accounts payable and accrued expenses	11,918.	17	1,092,986.		
	18	Grants payable			18	1/052/5001	
	19	Deferred revenue	***************************************		19		
	20					20	·····
Ø	21	Escrow account liability. Complete Part IV of Sc			······	21	
Liabilities	22	Payables to current and former officers, directo				2/1984).	
iabi		highest compensated employees, and disqualit				÷.,7	
		of Schedule L		•	and register while international systems of the first state of the second system of the second system of the s	22	
	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities. Complete Part X of Schedule D			338,091.	25	0.
	26	Total liabilities. Add lines 17 through 25			350,009.	26	1,092,986.
		Organizations that follow SFAS 117, check h	ere 🕨	X and complete			
ŝ	ŀ	lines 27 through 29, and lines 33 and 34.					
ances	27	Unrestricted net assets			921,559.	27	1,589,705.
	28			•••••	155,938.	28	762,555.
pu	29	Permanently restricted net assets		·····		29	
Ŀ		Organizations that do not follow SFAS 117, c					
ې د		complete lines 30 through 34.					
sets	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or e	quipme	ent fund		31	
Net Assets or Fund Bal	32	Retained earnings, endowment, accumulated in	ncome,	or other funds		32	
<b>.</b>	33	Total net assets or fund balances	•••••••	•••••••	1,077,497.	33	2,352,260.
	34	Total liabilities and net assets/fund balances			1,427,506.	34	3,445,246.
<b>Fa</b>	it XI	Financial Statements and Reporting	]				

			res	NO
1	Accounting method used to prepare the Form 990; 🔲 Cash 🛛 🛣 Accrual 🔲 Other	杨健		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	But Brouder	X
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	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		1 · · · ·	
	Act and OMB Circular A-133?	3a		х
<u>b</u>	If "Yes," did the organization undergo the required audit or audits?	Эb		
	1 12-18-08	Form	990	2008)

Form **990** (2008)

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Schedule B (Form 990, 990-EZ, or 990-PF)	
Department of the Treasury Internal Revenue Service	

## Schedule of Contributors

Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

1

Name of the organiza	ation	Employer identification numbe
	CENTER FOR AMERICAN PROGRESS ACTION FUND	30-0192708
Organization type (ch	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( $4$ ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

#### **General Rule**

X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

#### Special Rules

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990 EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of	lorgan	ization
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Employer identification number

30-0192708

## CENTER FOR AMERICAN PROGRESS ACTION FUND

## Part Contributors (see instructions)

(a)	(d)	(c)	(d)
No,	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	•	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll I Ioncash I (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B	(Form	990,	990-EZ,	o	990-PF) (2	(800

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CENTER FOR AMERICAN PROGRESS ACTION FUND

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30-0192708

## Part Contributors (see instructions)

(a)	(b)	(c)	(d)
<u>No,</u>	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
7	<u>}</u>	\$•	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

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Schedule B (Form 990	, 990-EZ, or 990-PF) (	(2008)
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## CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number

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30-0192708

Page

## Part Contributors (see instructions)

(a) No.	(b)	(c)	(d)
NO.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
13	<u>}</u>	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
14	Ţ	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No,	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b)	(c)	(d)
140.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
<u>   16</u>	<u>I</u>	\$ <u>.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d)
		Aggregate contributions	Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d)
18	} 	Aggregate contributions	Type of contribution          Person       X         Payroll
823452 12-	1 <u></u> 18-08	Schedule B (Form	is a noncash contribution.) 990, 990-EZ, or 990-PF) (2008)
			,,,,

#### Schedule 8 (Form 990, 990-EZ, or 990-PF) (2008)

#### Name of organization

Part

## CENTER FOR AMERICAN PROGRESS ACTION FUND

**Contributors** (see instructions)

#### (a) (b) (c) (ď) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 19 X Person Payroll Noncash \$ (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No, Name, address, and ZIP + 4 Aggregate contributions Type of contribution 20 X Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 21 ] X Person Payroll Noncash Somplete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 22 Х Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 23 X Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No, Name, address, and ZIP + 4 Aggregate contributions Type of contribution 24 X Person Payroll \$ Noncash (Complete Part II if there

is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

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Employer identification number

30-0192708

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No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
25	]	\$	Person X Payroll Noncash (Complete Part II If there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
26	<u>i</u>		Person X
	· · · · · · · · · · · · · · · · · · ·	\$	Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
27	· ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	
No,	Name, address, and ZIP + 4	Aggregate contributions	(d) Type of contribution
28	-	\$	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
29	<u>}</u>	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
30			Person X Payroll
		\$	Noncash
	<u> </u>		is a noncash contribution.)

#### Part **Contributors** (see instructions)

CENTER FOR AMERICAN PROGRESS ACTION FUND

(b)

Name of organization

(a)

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Employer identification number

30-0192708

(c)

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(d)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Schedule B	(Form 990,	990-EZ.	or 990-PP	7 (2008)

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Employer identification number

## CENTER FOR AMERICAN PROGRESS ACTION FUND

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Part	Contributors (see instructions)		
(a)	(b)	(a)	
No.	Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
32	<u>}</u>	\$	Person X. Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	(d)
		Aggregate contributions	Type of contribution
33		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d)
	· · · · · · · · · · · · · · · · · · ·	\$	Type of contribution         Person       X         Payroll
(a) No.	(b) Namė, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    35</u>	]	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d)
36	G J J	\$	Type of contribution       Person    X      Payroll

is a noncash contribution.) Schedule B (Form 998, 990-EZ, or 990-PF) (2008) ,

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Employer identification number

30-0192708

## CENTER FOR AMERICAN PROGRESS ACTION FUND

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## Part I Contributors (see instructions)

(a)	(b)	(c)	(ď)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
37	·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
38	· · · · · · · · · · · · · · · · · · ·	\$ <u>·</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No	(b) Name, address, and ZIP ± 4	(c) Aggregate contributions	(d) Type of contribution
<u>    39</u>		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>40</u>	· ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No	(b) Name, address. and ZID + 4	(c) Aggregate contributions	(d) Type of contribution
42	]	\$	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Schedule	эÐ	(Form	990,	990-EZ,	or	990-PF	(2008	ù

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Page	8	of	12	of Part I
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Employer identification number

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## CENTER FOR AMERICAN PROGRESS ACTION FUND

Part I	Contributors (see instructions)		· · · · · · · · · · · · · · · · · · ·
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>43</u>	<u>.</u>	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
44	·	\$ <u>`</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>4</u> 5	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>46</u>		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
47	3 	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
48	!	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Schedule	B (Form	990,	990-EZ,	or 990-i	PF) (2008)

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## CENTER FOR AMERICAN PROGRESS ACTION FUND

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Employer identification number

30-0192708

## Part Contributors (see instructions)

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
<u>49</u>		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
50	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	••••••••••••••••••••••••••••••••••••••	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person X Payroll Voncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
54		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

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Employer identification number

## 30-0192708

## CENTER FOR AMERICAN PROGRESS ACTION FUND Part Contributors (see instructions)

(a)	(b)	(c)	
No,	Name, address, and ZIP + 4	Aggregate contributions	(d) Type of contribution
55		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
56		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
57		\$	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
58	}	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
60		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Schedule B (Fo	orm 990, 990-EZ, or 990-PF) (2008)		. Pa	go 11 of 12 of Part I
Name of organization			Employer identification num	
CENTE	R FOR AMERICAN PROGRESS ACTION FUND		30-0	192708
Rant I	Contributors (see instructions)			······································
(a) No,	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	ions	(d) Type of contribution
				· · · · · · · · · · · · · · · · · · ·

61			Person X Payroll
		\$	Noncash
			(Complete Part II if there is a noncash contribution.)
(a)			
No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
62	2	· · · ·	Person X
		\$.	Payrolit Noncash
		۹ <u></u>	(Complete Part II if there
			is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(C)	(d)
		Aggregate contributions	Type of contribution
63			Person X
		ò	Payrol}
		·	(Complete Part II if there
		1	is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
64	2		Person X
		\$	Payroli Noncash
	· · · · · · · · · · · · · · · · · · ·	♥	(Complete Part II if there
	·		is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
65			Person X
			Payroll
		\$	Noncash (Complete Part II if there
			is a noncash contribution.)
(0)			1
(a)	(b)	(c)	(d)
No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			(d) Type of contribution Person X
<u>No.</u>		Aggregate contributions	Type of contribution Person X Payroli
<u>No.</u>			Type of contribution Person

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Schedule B	(Form 990	, 990-EZ,	or 990-J	PF) (2008)

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Employer identification number

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# CENTER FOR AMERICAN PROGRESS ACTION FUND

Part	Contributors	(see instructions)	

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
<u>67</u>		\$}	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    68</u>	· · · · · · · · · · · · · · · · · · ·	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) 	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    69</u>	<u></u>	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    70</u>	•	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	<u>}</u>	\$'	Person X Payroll Noncash (Complete Part II If there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE C	Po	litical Campaign a	and Lobbyin	g Activities		OMB No. 1545-0047
(Form 990 or 990-EZ)	For Orga	nizations Exempt From Incom	e Tax Under section :	- 501(c) and section 5	527	2008
Department of the Treasury Internal Revenue Service						Open to Public in Inspection
		Form 990, Part IV, line 3, or Fo		ne 46 (Political Cam	paign Ac	ctivities), then
		plete Parts I-A and B. Do not cor				
		1(c)(3)) organizations: Complete	Parts I-A and C below.	. Do not complete Pa	art I-B.	
<ul> <li>Section 527 organiz If the organization ans</li> </ul>		Part FA only. Form 990, Part IV, line 4, or Fol	m 900 E7 Dort VI lin			
		ave filed Form 5768 (election un				
		ave NOT filed Form 5768 (election				
		Form 990, Part IV, line 5 (Proxy		·//· ·/······		
<ul> <li>Section 501(c)(4), (5)</li> </ul>	), or (6) organizati	ions: Complete Part III.				
Name of organization					Employ	er identification number
	CENTER 1	FOR AMERICAN PROC	GRESS ACTIO	N FUND		<u> 30-0192708</u>
		vall organizations exemp	ot under section	501(c) and secti	on 527	organizations.
· · · · · · · · · · · · · · · · · · ·		chedule C for details.				
		ation's direct and indirect politica				0 DE0 670
3 Volunteer hours					🏲 ຈິ 👝	2,230,070.
	*******					U.
Part I-B To be	completed by	all organizations exem	ot under section	501(c)(3),		
		chedule C for details.				
1 Enter the amount of	of any excise tax	incurred by the organization und	er section 4955		► \$	· · · · · · · · · · · · · · · · · · ·
2 Enter the amount of	of any excise tax i	incurred by organization manage	ers under section 4955	5	►\$_	
3 If the organization	incurred a section	n 4955 tax, did it file Form 4720 i	for this year?	·····		. Yes No
4a was a correction r b lf "Yes," describe	nade?					Yes No
		y all organizations exem	nt under section	501(c) except s	ection	501(2)(3)
		chedule C for details.			ection	501(5)(5).
		by the filing organization for sec	ction 527 exempt func	tion activities	▶ \$	2,258,678.
		ization's funds contributed to ot				2,230,070
exempt function a	ctivities		-		► \$	0.
3 Total of direct and	indirect exempt f	unction expenditures. Add lines	1 and 2 and enter her	е and ол		
Form 1120-POL, li	ne 17b				🏲 \$	2,258,678.
4 Did the filing organ	nization file Form	1120-POL for this year?				X Yes No
5 State the names, a Enter the amount	naid and indicate	nployer identification number (Ell if the amount was paid from the	N) of all section 527 po filing organization's fu	Ditical organizations	to which	payments were made.
promptly and direct	tly delivered to a	separate political organization,	such as a separate sec	predated fund or a po	contribu olitical ac	tions received and
If additional space	is needed, provid	de information in Part IV.		gregeried (and b) a p		
(a) Nam	e	<b>(b)</b> Address	(c) EIN	(d) Amount paid filing organizati funds. If none, en	on's 🕻	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
		· · · · · · · · · · · · · · · · · · ·				
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<u>,</u>						
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Schedule C (Form 990 or 990-EZ) 2008

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Schedule C (Form 990 or 990-EZ) 2008	CENTER FOR	AMERICAN P	ROGRESS ACT	ION FUNBO-0	192708 Page 2
Part II-A To be completed by				at filed Form 5768	
(election under sec			edule C for details.		
	tion belongs to an affi	• •			
B Check 🕨 🛄 if the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)			<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a Total lobbying expenditures to infl					
b Total lobbying expenditures to infl					
c Total lobbying expenditures (add I	ines 1a and 1b)				
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	s (add lines 1c and 1c	J)			·····
f_Lobbying nontaxable amount. Ent					
If the amount on line 1e, column (a) (	or (b) is: The tob	bying nontaxable am	ount is:		<b>全国中国在中国</b> 主义
Not over \$500,000					
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		0 plus 10% of the exc	·····		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.	i		and the second
			······································		
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. Ente	r -0- if line g is more th	an line a			
i Subtract line 1f from line 1c. Enter					
j If there is an amount other than ze					
reporting section 4911 tax for this	year?				Yes No
	4-Year Ave	eraging Period Under	Section 501(h)		
(Some organiz	zations that made a s	ection 501(h) election	n do not have to com	plete all of the five	
Colum		structions for lines 2a		structions.}	
		nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	<b>(d)</b> 2008	<b>(e)</b> Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount				-	
e Grassroots ceiling amount	國行政主义的编制合作	NOT A MARKED		CAR CHARLES	
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

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## Schedule C (Form 990 or 990 EZ) 2008 CENTER FOR AMERICAN PROGRESS ACTION FUND0-0192708 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.

		(1	(a)		(b)	
		Yes	No	Ато	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
a	Volunteers?					
p	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			an stat	6 Contraction	
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
j	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i				······	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912				2	
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			-		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			合成 医静脉	ti internetion	
Par	<b>To be completed by all organizations exempt under section 501(c)(4)</b> <b>501(c)(6).</b> See the instructions for Schedule C for details.	, section	501(c)(5	), or sec	tion	
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?			X		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		x	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	••••••			X	
Par	To be completed by all organizations exempt under section 501(c)(4)	. section	501(c)(5	, or sec	tion	
	501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR	if Part I	I-A. que	stion 3 is		
	answered "Yes." See Schedule C instructions for details.		<i>,</i> ,			
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
C			20			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	••••••	5			
	UV Supplemental Information					
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	nd Part II-B	, line 1i, Als	o, comniete	this nart	
	ny additional information.		,	-, - sinpice	, and pure	
PAI	RT I-A, LINE 1:					
					-	
CAI	P ACTION DOES NOT ENDORSE CANDIDATES FOR PUBLIC OFF	ICE,	NOR DO	ES IT		
	PLICITLY ADVOCATE FOR THE ELECTION OR DEFEAT OF PAR					
		1100	<u> </u>			
CAI	NDIDATES. HOWEVER, AT VARIOUS TIMES DURING THE TAX	YEAR	, CAP	ACTIO	N	
MA	DE COMMUNICATIONS TO THE PUBLIC COMMENDING OR CRITI	CIZIN	G PART	ICULA	R	
PU)	BLIC POLICY POSITIONS TAKEN BY VARIOUS CANDIDATES.	THES	E POLI	СҮ		

Schedule C (Form 990 or 990-EZ) 2008

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Schedule C (Form 990 or 990-EZ) 2008 CENTER FOR AMERICAN PROGRESS ACTION FUND0-0192708 Page Part IV Supplemental Information (continued)
ASSESSMENTS TOOK THE FORM OF POSITION PAPERS, BLOG POSTS, PRESS
RELEASES, AND OTHER SIMILAR PUBLIC COMMUNICATIONS.

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(Form	990)
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Department	of the	Treasury	
Internal Sev	enue S	entice	

# **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.



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Name	e of the organization CENTER FOR AMERICAN PROGRESS ACTION I	מתוק	Employer identification number 30-0192708
Par		nds or A	ccounts. Complete if the
100.00	organization answered "Yes" to Form 990, Part IV, line 6.		
	(a) Donor advised funds	(	b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		······
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor a	advised fun	ds
	are the organization's property, subject to the organization's exclusive legal control?		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may		
	for charitable purposes and not for the benefit of the donor or donor advisor or other impermissib		
Pa	t I Conservation Easements. Complete if the organization answered "Yes" to Form 9		
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
		n historical	ly important land area
	Protection of natural habitat  Preservation of of the second sec		
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a	conservati	on easement on the last day
	of the tax year.		on electronic on the last day
			Held at the End of the Year
а	Total number of conservation easements		2a
b			2b
с	Number of conservation easements on a certified historic structure included in (a)		2c
d		•••••	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated to	by the organ	
	year >		5
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violatio		
	enforcement of the conservation easements it holds?		
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the y	'ear 🕨 🔄	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and exp		
	include, if applicable, the text of the footnote to the organization's financial statements that desc	ribes the or	ganization's accounting for
	conservation easements.		
Ea	Companizations Maintaining Collections of Art, Historical Treasures, of Art, Historical Treasure	or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.		· · · · · · · · · · · · · · · · · · ·
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement a		
	treasures, or other similar assets held for public exhibition, education, or research in furtherance	of public se	rvice, provide, in Part XIV, the text of
L	the footnote to its financial statements that describes these items.		
b		balance sh	eet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or research in furtherance of public site as these times	ervice, prov	ide the following amounts relating to
	these items:		<b>X</b> A
	<ul> <li>(i) Revenues included in Form 990, Part VIII, line 1</li></ul>		. 🕨 💲
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for fin		🕨 \$
2	the following amounts required to be reported under SFAS 116 relating to these items:	iancial gain,	provide
а			► ¢
	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

	tule D (Form 990) 2008 CENTER	FOR AMERIC	AN P	ROGRES	S ACTI	ON FU	JND (	30-01	92708	Pa	age 2
Par	III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, o	or Othe	er Simila	ar Asse	ts (contin	ued)	<u> </u>
3	Using the organization's accession and othe	r records, check an	y of the f	ollowing tha	it are a signif	icant use	of Its coll	ection iter	ns (check	ail	
	that apply):			-	_				·		
а	Public exhibition	c	1 🗆 I	Loan or exc	hange progra	ams					
b	Scholarly research	6									
C	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organizati	on's exe	mpt purpo	se in Parl	XIV.		
	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be m								Yes	Γ	No
Par	Trust, Escrow and Custodia reported an amount on Form 990, Pa	Arrangements	Compl	ete if organi	ization answe	ered "Ye	s" to Form	990, Par	t IV, line 9	, or	
1a	Is the organization an agent, trustee, custod										
	on Form 990, Part X?				,				Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fe	bllowing	table:							
									Amount		
	Beginning balance										
d	Additions during the year						1d				
е	Distributions during the year	*****					1e			·· ··	
1	Ending balance						11				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes		No
	If "Yes," explain the arrangement in Part XIV										
Par	Endowment Funds. Complete		ered "Ye	s" to Form !	990, Part IV,	line 10,					
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years	back
	Beginning of year balance		ex 2 de	2 A 40 -					1 Anna anna an		a failine
	Contributions										
	Investment earnings or losses		0.54 eX.94 0.4 CA 8					nerozi Menski			
d	Grants or scholarships		70 A	18 N 10 M			<b>演奏</b> 的法	建新 闷			
е	Other expenditures for facilities		229	77904	素白梅。			ang sa			ny Car
	and programs										
	Administrative expenses							19 E 12			
g	End of year balance		1.72 5.7.1								
2	Provide the estimated percentage of the year	ar end balance held	as:								
а	Board designated or quasi-endowment 🕨		_%								
b	Permanent endowment 🕨	%									
		%									
3a	Are there endowment funds not in the posse	ession of the organi	zation th	at are held a	and administe	ered for t	the organiz	zation			
	by:								- F	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	is listed as required	on Sche	dule R?					3b		
4	Describe in Part XIV the intended uses of the	e organization's end	lowment	funds,							
Pa	t VI Investments - Land, Buildin	gs, and Equipm	ient. Se	ee Form 990	), Part X, line	10.					
	Description of investment	(a) Cost or basis (invest		1	t or other (other)	(c) [	Depreciatio	'n	(d) Book	valu	e
	Land										
b	Buildings										
C	Leasehold improvements										<del></del>
	Equipment			1	18,233.		6,8	30.	11	L,4	03.
e	Other							<b> </b>			
Tota	I. Add lines 1a-1e. (Column (d) should equal F	orm 990, Part X, co	lumn (B),	line 10(c).)		·····			11	.,4	03.

Schedule D (Form 990) 2008

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Schedule D (Form 990) 2008 CENTER FOR	AMERICAN PRO	GRESS ACTION FU	JND 30-0192708 Page 3
Part VII Investments - Other Securities. S	ee Form 990, Part X, line		
(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation: nd-of-year market value
Financial derivatives and other financial products			
Closely-held equity interests	<u>_</u>		
Other			
Tatal (Col /b) about any Form 000 Dark V ast (D) Key 10 V			
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)			
(a) Description of investment type	(b) Book value		
·····		·	·····
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)			
Part VIII Investments - Program Related. See Form 990, Part X, line 13.       (c) Method of valuation: Cost or end-of-year market value         (a) Description of investment type       (b) Book value       Cost or end-of-year market value         Image: Cost of the second sec			
(a	) Description		(b) Book value
		_	
Total. (Column (b) should equal Form 990, Part X, col (B)	line 15.)		<b>&gt;</b> I
Part X Other Liabilities. See Form 990, Part ) (a) Description of liability	s, ine 25.	(b) Amount	
Federal income taxes			
		<b>6</b> .%	
			parties and the second second second
		<b>1</b>	
<u>,</u>			
· · · · · · · · · · · · · · · · · · ·			
	······		
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25 )		
In Part XIV, provide the text of the footnote to the organi			

art XIV, pr under FIN 48. 832053 12-23-08 on sinancial statements that reports the organization's liability for uncertain tax positions y

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	dule D (Form 990) 2008 CENTER FOR AMERICAN PROGRES	S ACTION	FUND	30-0	192708	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to F	inancial Stat	ements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		8,855,	265.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		7,580,		
3	Excess or (deficit) for the year. Subtract line 2 from line 1	·	3		1,274,	
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		1,274	
Par	<b>EXII</b> Reconciliation of Revenue per Audited Financial Statemen	ts With Reve	nue per	Return	<b>,</b> ,	
1					8,855,	265.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•••••••••••••••			
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
c	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	20		i se al c		
	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	8,855	.265.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		**********	849-133-11 27-1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
c	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		,	5	8,855	
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts With Exp	enses p	er Retur	<u>n</u>	
1	Total expenses and losses per audited financial statements			1	7,580	,502.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25;					
а	Donated services and use of facilities	2a				
	Prior year adjustments	2b				
C	Losses reported on Form 990, Part IX, line 25	2c				
d						
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	7,580	,502.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
c	Add lines 4a and 4b			40		0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	·····		5	7,580	,502.
Pa	TXIV Supplemental Information			<b>-</b> L-	·····	
~	K K AT Y K Y K A Y K Y K Y K Y K Y K Y K Y K Y					

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

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SCHEDULE G

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(Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

2008

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OMB No. 1545-0047

	,,,,	uiat enner	more th	an \$15,000 on Form 9	90-EZ, line 6a. 🛛 🙀	Open To Public
n			·		3.00	entification number
CENTER	FOR AMERICAN PRO	GRES	S A	CTION FUND	30-0192	
ing Activities	. Complete if the organization a	nswered	"Yes"	to Form 990, Part IV,	line 17.	
tions ations tations vlicitations on have a written o	e X So f	licitation licitation ecial fund idual (inc	of non- of gove Iraising Iuding	government grants imment grants i events officers, directors, tri	ustees or	s 🗌 No
n highest paid ind	ividuals or entities (fundraisers)	pursuant	to agr	eements under whic	h the fundraiser is to	be
	(ii) Activity	fú hav or o	draiser custody ontrol of	from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	<b>(vi)</b> Amount paid to (or retained by) organization
DOM		Ye			· · · · · · · · · · · ·	-
ROOP	FUNDRAISING		X	974,000	121,750.	852,250.
				974.000	121 750	852,250.
ich the organization AR , CA , CT ,	on is registered or licensed to so FL , GA , IL , KS , KY , I	blicit fund 4E, MD	s or ha	s been notified it is r	xempt from registrat	tion or licensing
	CENTER ing Activities e organization rais ions ations tations ticitations bicitations on have a written of ced in Form 990, P n highest paid ind east \$5,000 by the dividual draiser) ROUP ich the organization AR , CA , CT ,	CENTER FOR AMERICAN PR(         ing Activities. Complete if the organization a         te organization raised funds through any of the form of the form set in the organization is g X spatiations         ations       f So tations         ations       g X spatiations         plicitations       g X spatiation in the organization in the organization of the organization in the organization of the organization is registered or licensed to so the organization is registered or licensed to	CENTER FOR AMERICAN PROGRES ing Activities. Complete if the organization answered the organization raised funds through any of the following ac- tions e Solicitation of ations f Solicitation of tations g Solicitation of tations g Solicitation of solicitations on have a written or oral agreement with any individual (included in Form 990, Part VII) or entity in connection with profese in highest paid individuals or entities (fundraisers) pursuant east \$5,000 by the organization. Form 990-EZ filers are not dividual dividual dividual file PROFESSIONAL PROFESSIONAL PROFESSIONAL PROFESSIONAL Yes Content of the organization is registered or licensed to solicit fund- AR , CA , CT , FL , GA , IL , KS , KY , ME , MD	CENTER FOR AMERICAN PROGRESS Adding Activities. Complete if the organization answered "Yes"         te organization raised funds through any of the following activities itons         ations       e X Solicitation of non-raised funds through any of the following activities itons         ations       f Solicitation of non-raised funds through any of the following activities itons         ations       f Solicitation of non-raised funds through any of the following activities itons         ations       f Solicitation of gove failers         ations       g X Special fundraising dicitations         on have a written or oral agreement with any individual (including or ed in Form 990, Part VII) or entity in connection with professional in highest paid individuals or entities (fundraiser) pursuant to agreeast \$5,000 by the organization. Form 990-EZ filers are not required through any of the fundraiser for example.         dividual finite fundraiser       f(ii) Activity         PROFESSIONAL       Yes No         ROUP       FUNDRAISING         X       and	CENTER FOR AMERICAN PROGRESS ACTION FUND ing Activities. Complete if the organization answered "Yes" to Form 990, Part IV, the organization raised funds through any of the following activities. Check all that appli- tions e Solicitation of non-government grants ations f Solicitation of government grants ations g Solicitation of government grants g Solicitation of government grants g Solicitation of government grants ations g Solicitation of government grants ations (ii) Activity (iii) Out ativity (iv) Gross receipts from activity PROFESSIONAL Yes No PROFESSIONAL Yes No PROFESSIONAL Yes No 974,000 ich the organization is registered or licensed to solicit funds or has been notified it is c AR , CA , CT , FL , GA , IL , KS , KY , ME , MD , MA , MI , MS , SI ;	CENTER FOR AMERICAN PROGRESS ACTION FUND       30-0192         ing Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.       e organization raised funds through any of the following activities. Check all that apply.         ions       e I Solicitation of non-government grants         itions       f Solicitation of government grants         tations       g I Special fundraising events         Wittens       g I Special fundraising events         witten or oral agreement with any individual (including officers, directors, trustees or ed in Form 990, Part VI) or entity in connection with professional fundraising services?       I Yee         nhighest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to east \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.       (i) Amount paid for or activity         dividual traiser)       (ii) Activity       Yee No       974,000.       121,750.         ROUP       FUNDRAISING       Yee No       974,000.       121,750.         weak       974,000.       121,750.       121,750.         ich the organization is registered or licensed to solicit funds or has been notified it is exempt from registance or licensed to solicit funds or has been notified it is exempt from registance or licensed to solicit funds or has been notified it is exempt from registance or licensed to solicit funds or has been notified it is exempt from registance or licensed to solicit funds or has been notified it is e

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

Schedule G (Form 990 or 990-EZ) 2008

Schedule G	(Form 990 or 990-EZ) 2008	CENTER	FOR	AMERICAN	PROGRESS	ACTION	FUND0-0192708	Page 2
Part II	Fundraising Events,	Complete if the	organiz	ation answered "Y	'es" to Form 990,	Part IV, line 18	, or reported more than \$15	,000
	on Form 990-EZ, line 6a, Lis							

		on Form 990-EZ, line 6a. List events with				
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			ANNUAL		NONE	
			DINNER			(Add col. (a) through
			(event type)	(event type)	(total purple and	col, (c))
3			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	224,125.			224,125.
"						
	2	Less: Charitable contributions	208,701.		·	208,701.
	3	Gross revenue (line 1 minus line 2)	15,424.			15,424.
	4	Cash prizes				
nses	5	Non-cash prizes				
Direct Expenses	6	Rent/facility costs	16,840.		·······	16,840.
Direc	7	Other direct expenses	14,345.			14,345.
•	8	Direct expense summary. Add lines 4 through	n 7 in column (d)			( 31,185.)
	9	Net income summary. Combine lines 3 and 8	in column (d)		•	-15,761.
Pa	'nť	<b>Gaming.</b> Complete if the organization	answered "Yes" to Form	990. Part IV. line 19. or r	eported more than	1 15,701.
832.733		\$15,000 on Form 990-EZ, line 6a.			oported more man	
				(b) Pull tabs/Instant		(d) Total gaming (Add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
9Ve						
ш		0				
	1	Gross revenue	· · · · · · · · · · · · · · · · · · ·			
es	2	Cash prizes				
ŝĽ						
× bě	3	Non-cash prizes				
Direct Expenses	4	Rent/facility costs				
J	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No //	□ No ∧	
	7	Direct expense summary. Add lines 2 throug		<u></u>		
		-		***************************************		<u>,                                     </u>
	8	Net gaming income summary. Combine lines	1 and 7 in column (d)			
						Yes No
9	En	ter the state(s) in which the organization opera	ates daming activities.			
		the organization licensed to operate gaming a		statos?		
		No," Explain:	sumos in caon of these	States	***************************************	
•	, ,,					
40						
		ere any of the organization's gaming licenses r	evoked, suspended or te	erminated during the tax	year?	10a
Ľ	) IT '	'Yes," Explain:				
		·····				
11		es the organization operate gaming activities				11
12	ls i	the organization a grantor, beneficiary or truste	ee of a trust or a membe	r of a partnership or othe	r entity formed to	
		minister charitable gaming?				

Schedule G (Form 990 or 990-EZ) 2008

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Schedule G (Form 990 or 990-EZ) 2008 CENTER FOR AMERICAN PROGRESS ACTION FUNDO	-01927	08 P	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			arat. Nati
a The organization's facility 13a b An outside facility 13b	<u> %</u>	- <u>19</u>	
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records	<u>%</u>		
Name			
Address			stants.
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15	a	100000
b If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount			
of gaming revenue retained by the third party > \$			
c If "Yes," enter name and address:			
			2.02°.
Name 🕨			
		物理法	
Address			
16 Gaming manager information:			3992. 4.902
Name 🕨			
Gaming manager compensation 🕨 \$			
Description of services provided			
	Ø		
	—— <b>K</b>		
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?		a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year			
organization s own eventhr activities unulling the tax year 🍉 🕈			

Schedule G (Form 990 or 990-EZ) 2008

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CMB No. 1545-0047 2008 Copenition Public	Employer identification number 30-0192708	ince, and the selection	]	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Control of the Contr	(g) Description of (h) Purpose of grant non-cash assistance or assistance	TO SUFFORT EDUCATIONAL HEALTH CARE FOR AMERICA PROJECT	TO SUPPORT EDUCATIONAL ANTI-POVERTY PROJECT			• • 0.
rants and Other Assistance to Organizations, Governments, and Individuals in the U.S. ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.		the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		nization answered "Yes" # IV and Schedule I-1 (Fi	(f) Method of (i) Wethod of (i) valuation (book, no FMV, appraisal, other)					
Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S. organization answered "Yes," on Form 990, Pa		grantees' eligibility	l States.	omplete if the orga	(e) Amount of non-cash assistance	0	o			
ants and Other Assistance to Organizatio Governments, and Individuals in the U.S. Janization answered "Yes," on Form 990,	ACTION FUND	or assistance, the	funds in the United	United States. Or	(d) Amount of cash grant	100,000.	21,000.			
Grants and Governn Complete if the organizatio	PROGRESS		toring the use of grant 1	d Organizations in the	(c) IRC section	501(C)(3)	501(C)(3)			janizations
Comp	R AMERICAN	nd Assistance to substantiate the trance?	scedures for monit	Governments and	(b) EIN	35-2332813	23-7026896			id government org
	e organization CENTER FOR AMERIC	General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of organization records to substantiate the amount of	criteria used to award the grants of assistance:	I Other Assistance to	1 (a) Name and address of organization or government	FH CARE FOR FUND - 1825 K 400 - 306	ENCE ON CIVIL FUND - 1629 K 1000 - 006			Enter total number of section 501(c)(3) and government organizations
SCHEDULE 1 (Form 990) Department of the Tressury	Name of the organization	1 Does the organize	2 Describe in Part IV	Patel Grants and	1 (a) Name and add	TIDES CENTER/HEALTH CARE FOR AMERICA EDUCATION FUND - 182 STREET, NW, SUITE 400 - WASHINGTON, DC 20006				<ul><li>2 Enter total number</li><li>3 Enter total number</li></ul>

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Schedule I (Form 990) 2008 CENTER FOR AMER	AMERICAN PROC	PROGRESS ACTION FUND	CON FUND		30-0192708 Page2
er Assistance to Individuals ir 1 (Form 990) if additional space	<b>ited States.</b> Com ed.	plete if the organiz	ation answered "Yes"	on Form 990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV. appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the	de the information	i required in Part I,	line 2, and any other	information required in Part I, line 2, and any other additional information.	
SCHEDULE I, PART I, LINE 2: CENTER	FOR	AMERICAN PROGRESS	RESS ACTION	I FUND	
REQUIRES GRANTEE ORGANIZATIONS TO I	REPRESENT,	, WARRANT	AND AGREE:	THAT IT	
WILL USE GRANT FUNDS SOLELY FOR PUI	FOR PURPOSES CC	NSISTENT	CONSISTENT WITH CAPAF'S	S TAX-EXEMPT	
STATUS UNDER SECTION 501(C)(4) OF 1	THE INTER	INTERNAL REVENUE CODE;		THAT NO	
PORTION OF GRANT FUNDS WILL BE USED	D DIRECTLY	К	INDIRECTLY TO E	EXPRESSLY OR	
IMPLICITLY SUPPORT OR OPPOSE ANY CA	ANY CANDIDATE	SEEKING E	SEEKING ELECTION TO	PUBLIC	
OFFICE OR PROVIDE A BENEFIT TO ANY	POLITICA	L PARTY O	POLITICAL PARTY OR CANDIDATE;	; THAT IT	
WILL ALLOW CAPAF STAFF OR REPRESENTATIVES		TO CONDUCT	EVALUATIONS	S AND AUDITS	
OF THE USE OF GRANT FUNDS, WHICH MAY		E VISITS	INVOLVE VISITS TO OBSERVE,	REVIEW AND	Solitation of the second states
832102 12-18-08					ocuentie i (rorni aso) zouo

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Schedule I (Form 990) 2008 CENTER FOR AMERICAN PROGRESS ACTION FUND 0-0192708 Page 2 Part IV Supplemental Information
DISCUSS ITS OPERATIONS, FINANCIAL RECORDS, AND OTHER MATERIALS CONNECTED
WITH THE GRANTEE; AND THAT IT WILL SEND CAPAF FINAL FINANCIAL AND NARRATIVE
REPORTS BY A DATE SPECIFIED IN THE ORIGINAL AWARD LETTER. CAPAF REQUIRES
DONEE ORGANIZATIONS TO PROVIDE NARRATIVE AND FINANCIAL REPORTS THAT: ARE
SIGNED BY AN OFFICER OF THE ORGANIZATION; DESCRIBE HOW THE FUNDS WERE SPENT
AND WHAT WAS ACCOMPLISHED; AND PROVIDE A REASONABLY DETAILED ACCOUNT OF THE
ACTIVITIES CONDUCTED BY THE GRANTEE IN PERFORMANCE OF THE AGREED UPON WORK.
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Schedule I (Form 990) 2008

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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.



Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND 30-0192708

FORM 990, PART VI, SECTION A, LINE 1: THE CAP ACTION EXECUTIVE COMMITTEE WAS ESTABLISHED BY THE BOARD AND DELEGATED AUTHORITY TO ACT ON THE BOARD'S BEHALF ON MOST MATTERS BETWEEN FORMAL BOARD MEETINGS. AMONG OTHER AUTHORITIES, THE EXECUTIVE COMMITTEE OR THE FULL BOARD MUST APPROVE SIGNIFICANT CHANGES TO THE BUDGET DURING THE YEAR.

THE CAP ACTION EXECUTIVE COMMITTEE CONVENED ON JULY 30, 2008: (1) TO REVIEW THE PROPOSED REVISED CAP ACTION 2008 BUDGET THAT WAS RECOMMENDED TO THE EXECUTIVE COMMITTEE BY STAFF, AND (2) IF SATISFIED, TO APPROVE AND ADOPT SUCH BUDGET (AS PROPOSED OR AS MODIFIED BY THE EXECUTIVE COMMITTEE) ON BEHALF OF THE BOARD. THE COMMITTEE VOTED TO APPROVE AND ADOPT THE BUDGET.

FORM 990, PART VI, SECTION A, LINE 10: THE FINANCE DEPARTMENT WORKED DIRECTLY WITH AN INDEPENDENT ACCOUNTING FIRM ENGAGED TO PREPARE THE 990 ON BEHALF OF THE ORGANIZATION. THE FINANCE DEPARTMENT MANAGED THE PROCESS, WITH CLOSE COORDINATION WITH THE LEGAL DEPARTMENT. THE ACCOUNTING FIRM PROVIDED A DRAFT 990, WHICH WAS REVIEWED AND COMMENTED ON BY THE FINANCE, ADMINISTRATION AND LEGAL TEAMS. CERTAIN PORTIONS OF THE 990 WERE REVIEWED AND COMMENTED ON BY OUTSIDE TAX COUNSEL, THE CORPORATE OFFICERS AND THE SVP FOR COMMUNICATIONS AS WELL.

AFTER REVIEW AND COMMENT BY THE EVP AND CEO, THE COMPLETE 990 AND SUMMARY MATERIALS WERE PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD FOR REVIEW AND CONSIDERATION ON BEHALF OF THE FULL BOARD. THE AUDIT COMMITTEE WAS OFFERED THE OPPORTUNITY TO DISCUSS THE MATERIALS WITH CORPORATION STAFF, AS WELL AS THE OUTSIDE TAX COUNSEL AND THE ACCOUNTING FIRM THAT PREPARED THE 990. THE LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

Department of the Treasury Internal Revenue Service Name of the organization

#### 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.



CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

#### AUDIT COMMITTEE APPROVED THE FORM 990 BEFORE IT WAS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE CORPORATION IS COMMITTED TO PREVENTING OUTSIDE FINANCIAL INTERESTS OF ITS BOARD MEMBERS OR EMPLOYEES FROM INFLUENCING ITS ACTIVITIES. TO THAT END, IT HAS ADOPTED AND ENFORCES POLICIES TO PREVENT CONFLICTS OF INTEREST AND THE APPEARANCE OF CONFLICTS OF INTEREST, INCLUDING SEPARATE POLICIES (1) GOVERNING OFFICERS AND DIRECTORS, AND (2) EMPLOYEES.

#### COMPLIANCE WITH POLICIES GOVERNING OFFICERS AND DIRECTORS

UNDER THE TERMS OF THE CONFLICT OF INTEREST POLICY ADOPTED BY THE BOARD OF THE CORPORATION, AN INTERESTED BOARD MEMBER OR OFFICER IS DEFINED AS ANY BOARD MEMBER, OFFICER OR MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS WHO HAS A FINANCIAL INTEREST IN A PARTICULAR TRANSACTION OR ARRANGEMENT. Α BOARD MEMBER OR OFFICER HAS A FINANCIAL INTEREST IF HE/SHE OR A MEMBER OF HIS/HER IMMEDIATE FAMILY HAS OR WILL HAVE WITHIN A MATERIAL PERIOD OF TIME (1) A CONTROLLING OR MATERIAL OWNERSHIP OR INVESTMENT INTEREST IN ANY ENTITY WITH WHICH CAP ACTION HAS A TRANSACTION OR ARRANGEMENT; OR (2) A COMPENSATION ARRANGEMENT WITH CAP ACTION OR WITH ANY ENTITY OR INDIVIDUAL WITH WHICH CAP ACTION HAS A TRANSACTION OR ARRANGEMENT. AN INTERESTED BOARD MEMBER OR OFFICER MUST DISCLOSE THE EXISTENCE OF HIS OR HER FINANCIAL INTEREST AND ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH BOARD-DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT WITH WHICH HE OR SHE MAY HAVE AN ACTUAL OR POTENTIAL CONFLICT

OF INTEREST.

Department of the Treasury Internal Revenue Service Name of the organization 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.



CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIALS FACTS, AND

AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, THE DISINTERESTED BOARD OR

COMMITTEE MEMBERS DECIDE IF A CONFLICT OF INTEREST EXISTS WITHOUT THE

INTERESTED PERSON BEING PRESENT FOR THOSE DELIBERATIONS.

A VOTING MEMBER OF ANY COMMITTEE WHOSE JURISDICTION INCLUDES COMPENSATION MATTERS AND WHO RECEIVES COMPENSATION, DIRECTLY OR INDIRECTLY, FROM CAP ACTION FOR SERVICES IS PRECLUDED FROM VOTING ON MATTERS PERTAINING TO THAT MEMBER'S OWN COMPENSATION.

AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE MEETING, BUT AFTER SUCH PRESENTATION, HE OR SHE LEAVES THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE CONFLICT OF INTEREST.

IF APPROPRIATE, THE BOARD OR COMMITTEE WILL APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT AND TO COMPILE SUCH DATA AND INFORMATION ABOUT WHAT ORGANIZATIONS SIMILAR TO CAP ACTION ARE PAYING FOR COMPARABLE GOODS OR SERVICES AS MAY BE APPROPRIATE.

AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE WILL DETERMINE WHETHER CAP ACTION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

Department of the Treasury Internal Revenue Service Name of the organization

## **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.



CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE WILL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT (1) IS IN THE BEST INTEREST OF CAP ACTION AND FOR ITS OWN BENEFIT, AND (2) WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO CAP ACTION. THE BOARD OR COMMITTEE WILL DECIDE WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION.

IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT A PERSON HAS FAILED TO DISCLOSE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST, IT WILL INFORM THE PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.

IF AFTER HEARING THE RESPONSE OF THE MEMBER AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE ARRANGED IN THE CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THAT THE MEMBER HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, IT WILL TAKE APPROPRIATE DISCIPLINARY OR CORRECTIVE ACTION.

COMPLIANCE WITH POLICIES GOVERNING EMPLOYEES

ALL EMPLOYEES HAVE A DUTY TO DISCLOSE IMMEDIATELY TO THEIR SUPERVISOR, THE

CEO OR THE EVP THE EXISTENCE OF ANY ACTUAL OR POTENTIAL CONFLICT OF

Department of the Treasury Internal Revenue Service Name of the organization 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.



CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

SUCH DISCLOSURE, THE SUPERVISOR, CEO OR EVP INFORMS THE GENERAL COUNSEL AND A DECISION IS MADE BY THE RELEVANT PARTIES, WHICH WILL INCLUDE IN EACH CASE AT LEAST THE EVP AND GC, REGARDING WHETHER AN ACTUAL OR POTENTIAL CONFLICT EXISTS AND, IF SO, WHAT SAFEGUARDS OUGHT TO BE PUT IN PLACE.

FORM 990, PART VI, SECTION B, LINE 15: CAP ACTION OPERATES UNDER A COST SHARING AGREEMENT WITH CENTER FOR AMERICAN PROGRESS, APPROVED BY THE BOARDS OF EACH ORGANIZATION, UNDER WHICH CAP EMPLOYS ALL THE ORGANIZATIONS' STAFF AND PAYS FOR GENERAL AND ADMINISTRATIVE EXPENSES, AND CAP ACTION REIMBURSES CAP FOR ITS SHARE OF THESE EXPENSES. COMPENSATION FOR STAFF AND FELLOWS IS SET BY THE COMPENSATION COMMITTEE OF CAP'S BOARD OF DIRECTORS AND CAP ACTION RELIES ON THE PRACTICES PUT IN PLACE BY CAP'S BOARD OF DIRECTORS TO ENSURE EMPLOYEE COMPENSATION IS NOT EXCESSIVE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: DC,AL,AK,AZ,AR,CA,CT,FL,GA,IL,KS,KY,ME,MD,MA,MI,MN,MS,MO,NH,NJ,NM,NY,NC,ND OH,OK,OR,PA,SC,TN,UT,VA,WA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19: CAP ACTION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. CAP ACTION'S GOVERNING DOCUMENTS ARE INCLUDED IN ITS FORM 1024, APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(C)(4). CHANGES TO ITS GOVERNING DOCUMENTS ARE FILED WITH ITS ANNUAL FORM 990. BOTH FORMS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUESTS RECEIVED AT ITS WASHINGTON, D.C. OFFICE. CAP ACTION'S ANNUAL FORM 990 IS ALSO MADE

Depertment 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.



Name of the organization

CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

GUIDESTAR.ORG. CAP ACTION'S AUDITED FINANCIAL STATEMENTS ARE MADE

AVAILABLE TO THE PUBLIC UPON REQUEST AT ITS WASHINGTON, D.C. OFFICE.

CAP ACTION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTANT ON AN ANNUAL BASIS. CAP ACTION'S AUDIT COMMITTEE. ACTING WITH DELEGATED AUTHORITY ON BEHALF OF THE FULL BOARD OF DIRECTORS, OVERSEES ALL ASPECTS OF THE ORGANIZATION'S FINANCIAL STATEMENT AUDIT. EACH YEAR, THE AUDIT COMMITTEE APPROVES THE ORGANIZATION'S AUDITOR. AΤ ANY STAGE OF THE AUDIT, THE AUDIT COMMITTEE HAS THE OPPORTUNITY TO MEET WITH THE AUDITOR WITH OR WITHOUT CAP ACTION MANAGEMENT OR STAFF PRESENT. AT THE CONCLUSION OF THE AUDIT, THE AUDIT COMMITTEE REVIEWS THE AUDIT REPORT, WHICH INCLUDES COMMUNICATIONS TO THE AUDIT COMMITTEE REQUIRED UNDER STATEMENT OF AUDITING STANDARDS #114. AFTER ITS REVIEW AND DISCUSSION WITH THE AUDITOR, THE AUDIT COMMITTEE VOTES TO ACCEPT OR REJECT THE AUDIT.

FORM 990, PART VII, SECTION A

COMPENSATION

CENTER FOR AMERICAN PROGRESS ACTION FUND ("CAP ACTION") ENTERED INTO A

COST SHARING AGREEMENT WITH THE CENTER FOR AMERICAN PROGRESS ("CAP") A

PUBLIC CHARITY DESCRIBED IN SECTION 501(C)(3) ON JUNE 1, 2003 (LATER

AMENDED ON JUNE 1, 2008.) CAP AND CAP ACTION ARE NOT RELATED

ORGANIZATIONS FOR PURPOSES OF FORM 990. IN ACCORDANCE WITH THE COST

SHARING AGREEMENT, FOR CONVENIENCE, CAP PAYS ALL OF BOTH ORGANIZATIONS'

Department of the Treasury Internal Revenue Service Name of the organization

### 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.



CENTER FOR AMERICAN PROGRESS ACTION FUND

Employer identification number 30-0192708

AND CAP ACTION IN TURN, REIMBURSES CAP FOR ITS SHARE OF THESE EXPENSES

ATTRIBUTABLE TO ITS OWN OPERATIONS.

AS A RESULT OF THIS ARRANGEMENT, CAP ACTION PAYS NO WAGES TO ANY

EMPLOYEES. ALL WAGES ATTRIBUTABLE TO WORK PERFORMED FOR CAP ACTION AND

CAP ARE PAID BY CAP AND REPORTED BY CAP ON FORM W-2. CALENDAR YEAR

2008 COMPENSATION ATTRIBUTABLE TO CAP ACTION AND REIMBURSED TO

CAP AND THEREFORE NOT INCLUDED IN COLUMNS D, E, AND F, RESPECTIVELY,

ARE AS FOLLOWS: JOHN PODESTA - \$75,967, \$0, \$7,601; SARAH ROSEN WARTELL

<u>- \$26,665, \$0, \$2,501; DEBORAH FINE - \$63,848, \$0, \$5,766; DAVID</u>

MADLAND, \$101,812, \$0, \$15,046. THE HOURS PROVIDED IN PART VII,

SECTION A., COLUMN B REFLECT THE ACTUAL HOURS ATTRIBUTABLE TO CAP

ACTION ACTIVITIES.

FORM 990, PART IX

STATEMENT OF FUNCTIONAL EXPENSES

OFFICER, DIRECTOR, TRUSTEE, AND KEY EMPLOYEE COMPENSATION REPORTED IN

PART IX, LINE 5, ARE PREPARED UNDER THE ACCRUAL METHOD OF ACCOUNTING

AND THEREFORE REFLECT REPORTABLE COMPENSATION ATTRIBUTABLE TO CAP

ACTION.

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FOR THE YEAR ENDED DECEMBER 31, 2007

PUBLIC INSPECTION COPY

# PUBLIC INSPECTION COPY

Form	990
Departr	ment of the Treasury

Internal Revenue Service

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# **Return of Organization Exempt From Income Tax**

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



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

Α	For t	he 2	2007 calendar year, or tax year beginning	and e	endina	· · · · · · · · · · · · · · · · · · ·			mspee	aun
B	Check applic	(if	Please C Name of organization				D Fm	nlover	identification num	her
_			use IRS					proyer	acitineation num	DEI
	_]cha	dress ange	print or CENTER FOR AMERICAN PROGRESS ACT	ION	FUNI	D		30-0	0192708	
	]cha	me ange	See Number and street (or P.O. box if mail is not delivered to street addres	s)		Room/suit				
	Init	urn	Specific 1333 H STREET, NW 10TH FLOOR	,					<u>2)682-161</u>	1
	_Jatio		tions. City or town, state or country, and ZIP + 4					ounting m		X Accruai
	_Jret	iende urn	WASHINGTON, DC 20005					Other (specify	n►	
	pe	plica nding	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable tr	usts	Hand	lare not ap	plicable		ction 527 organiz	ations
			must attach a completed Schedule A (Form 990 or 990-EZ).			s this a group				s X No
6	Webs	site:	WWW.AMERICANPROGRESSACTION.ORG						ates▶N/A	
1	Orga	niza	tion type (check only one) $\searrow$ 301(c) (4) (insert no.) 4947(a)(1) or	527	7 H(c) A	vre all affiliate	s includ		$N/A \square Ye$	
ĸ	Chec	k he	re 🕨 🛄 if the organization is not a 509(a)(3) supporting organization and its gro	oss	] (	lf "No," attach	a list.)		•	,
	receij	pts a	are normally not more than \$25,000. A return is not required, but if the organization			s this a separ anization cov	ate retui /ered bv	n filed a oroin	by an or- n ruling?	s X No
	choo	ses	to file a return, be sure to file a complete return.		1	Froup Exempt				
									ation is not require	d to attach
			ceipts: Add lines 6b, 8b, 9b, and 10b to line $12 > 3, 171, 2$	23.	1 8	Sch. B (Form	990, 990	)-EZ, 01	r 990-PF).	
R	art		Revenue, Expenses, and Changes in Net Assets or Fund	d Bala	ances					·····
	1		Contributions, gifts, grants, and similar amounts received:					1.00		
		а	Contributions to donor advised funds	1a						
		b	Direct public support (not included on line 1a)	1b	1	L,349,	896.			
		C	Indirect public support (not included on line 1a)	10		L,796,				
		d	Government contributions (grants) (not included on line 1a)	11						
		e	Total (add lines to through 1d) (cash \$3, 146, 131. noncash \$	6			)	1e	3,146	131
	2		Program service revenue including government fees and contracts (from Part VII, I	ine 93)			/	2		1-1-1-
	3	\$	Membership dues and assessments							
	4	ł	interest on savings and temporary cash investments					<u>3</u> 4	25	,092.
	5				•••••	5		10241		
	6			6a	]		•••••	1000		•
		b	Less: rental expenses	6b						
ē		C	Net rental income or (loss). Subtract line 6b from line 6a					6c		
ent	7	,	Other investment income (describe -				}	7	, <u>,</u> ,	
Revenue	8	a	Gross amount from sales of assets other (A) Securities			(B) Other		Sec. in		
-			than inventory	8a						
		b	Less: cost or other basis and sales expenses	8b						
		C	Gain or (loss) (attach schedule)	8c						
			Net gain or (loss). Combine line 8c, columns (A) and (B)					8d		
	9		Special events and activities (attach schedule). If any amount is from gaming, chec	k here	▶ 🗔					
		a	Gross revenue (not including \$51,200. of contributions reported on line 1b)	9a						
		b	Less: direct expenses other than fundraising expenses	9b	ļ					
		C	Net income or (loss) from special events. Subtract line 9b from line 9a	SEE	STAT	EMENT	1	9c		
	10	а	Gross sales of inventory, less returns and allowances	10a						
			Less: cost of goods sold	106				1984 b. e. Berlinder		
		C	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b fr	om line	10a			10c		
	11		Other revenue (from Part VII, line 103)					11		
·	12		<b>101al revenue</b> . Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11					12	3,171	223.
ŝ	13		Program services (from line 44, column (B))					13	2,377	
Expenses	14		management and general (from line 44, column (C))					14		029.
xpe	15		Fundalising (norm me 44, column (D))					15		546.
ш	16		Payments to affiliates (attach schedule)					16		
u	17		Total expenses. Add lines 16 and 44, column (A)	<u></u>	<u></u>	<u></u>		17	2,618	864.
<u>ت</u>	18		LACESS OF (deficit) for the year. Subtract line 17 from line 12					18		359.
Net Assets	19		Net assets or fund balances at beginning of year (from line 73, column (A))					19		138.
Ä	20 21		Not assets or fund balances at and af war On the time to the		·····			20		0.
7230	01		Net assets or fund balances at end of year. Combine lines 18, 19, and 20		<u></u>			21	1,077	
12-2	7-07	L	HA For Privacy Act and Paperwork Reduction Act Notice, see the separate ins	truction	15.					<b>90</b> (2007)

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Form 990 (2007) CENTER F	OR	AMERICAN PRO	GRESS ACTION	י ח_ר כתאתוית ו	192708 Page 2
Fail n Statement of All	organiz	ations must complete colurr	n (A). Columns (B), (C), an	d (D) are required for section	$\frac{501}{2}$
Functional Expenses and	(4) or	ganizations and section 494	7(a)(1) nonexempt charitab	le trusts but optional for oth	iers.
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds					
(attach schedule)					
(cash \$0 • noncash \$0	).)				
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedu	ile)			STATEMENT 3	
(cash \$2,766.noncash \$C	).				
If this amount includes foreign grants, check here 🕨	] 226	2,766.	2,766.		
23 Specific assistance to individuals (attach					
schedule)	23				
24 Benefits paid to or for members (attach					
schedule)	24		- - -		
25a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	38,736.	20,420.	17,728.	ГОО
b Compensation of former officers, directors, key				<u> </u>	588.
employees, etc. listed in Part V-B	25b	0.	0.	0.	0
c Compensation and other distributions, not include	d l				0.
above, to disqualified persons (as defined under					
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25c				
26 Salaries and wages of employees not	. 200		· · · · · · · · · · · · · · · · · · ·		
included on lines 25a, b, and c	26	1,137,671.	1,031,488.	00 000	
27 Pension plan contributions not included on	. 20	<u></u>	1,031,400.	98,083.	8,100.
lines 25a, b, and c	27				1
28 Employee benefits not included on lines			·		
25a - 27	28	232,641.	210 220	01 000	
29 Payroll taxes	29	252,041.	210,220.	21,293.	1,128.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32	17,146.		18 446	
33 Supplies	33	9,120.	0.004	17,146.	
34 Telephone		24,009.	8,224.	809.	
35 Postage and shipping			22,555.	1,266.	188.
36 Occupancy	36	2, 542.	1,647.	484.	211.
37 Equipment rental and maintenance	37	21,998.	201, 149.	18,048.	2,418.
38 Printing and publications	38	12,763.	19,604.	2,158.	236.
39 Travel	39	76,855.	12,166.	142.	455.
40 Conferences, conventions, and meetings	40	196,462.	76,483.	<u> </u>	353.
41 Interest		190,402.	180,501.	3,072.	12,889.
42 Depreciation, depletion, etc. (attach schedule)		88,262.	91 0 00	F	
43 Other expenses not covered above (itemize)		00,202.	81,960.	5,553.	749.
a	43a				
b	43b				
c	430				
d	430				
e	43e				<u> </u>
f	431				
g SEE STATEMENT 2	43g	536,478.	E00 10C	0.0.000	
44 Total functional expenses. Add lines 22a through			508,106.	27,228.	1,144.
43g. (Organizations completing columns (B)-(D),				i T	
carry these totals to lines 13-15)	44	2 618 961	2 277 200	010 000	<b>~~</b>
Joint Costs. Check		2,618,864.	2,377,289.	213,029.	28,546.
Are any joint costs from a combined educational campa	y OUF ainn an	d fundraising colisitation	ortad in (D) Deserves		
If "Yes," enter (i) the aggregate amount of these joint co	aiyii afi hete ¢		oned in (B) Program servi	ces? ►	Yes X No
(iii) the amount allocated to Management and general	-οιοφ \$	· · · · · · · · · · · · · · · · · · ·	ii) the amount allocated to		<u>N/A</u> ;
723011 12-27-07	·	, dilu (	iv) the amount allocated to	Fundraising \$	<u>N/A</u>
			2		Form <b>990</b> (2007)
<b>A A A A B B B B B B B B B B</b>		4	-		

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Form 990 (2007)	Form	990	(2007)	
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CENTER FOR AMERICAN PROGRESS ACTION FUND Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the retum is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Wł	nat is the organization's primary exempt purpose?  SEE STATEMENT 5	Program Service Expenses
clie org	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ents served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) ganizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a b	THE ACTION FUND PROMOTES A PROGRESSIVE AGENDA OF NEW POLICY IDEAS AND BATTLES CONSERVATIVE POLICIES THROUGH ONLINE ACTIVISM, STATE BALLOT INITIATIVES, AND ADVOCACY AND EDUCATIONAL WORK WITH CITIZENS AND POLICYMAKERS ON CAPITOL HILL, IN STATE HOUSES, WITH STATE LEGISLATORS, AND IN CITY HALLS AROUND THE COUNTRY. (Grants and allocations \$ 2,766.) If this amount includes foreign grants, check here SEE STATEMENT 4	1,865,344.
С	(Grants and allocations \$ ) If this amount includes foreign grants, check here	511,945.
d	(Grants and allocations \$) If this amount includes foreign grants, check here	
	(Grants and allocations \$ )       ) If this amount includes foreign grants, check here         Other program services (attach schedule)         (Grants and allocations \$ )         If this amount includes foreign grants, check here         Total of Program Service Expenses (should equal line 44, column (B), Program services)	2,377,289.

Form 990 (2007)

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_	n 990 (	(2007) CENTER FOR A	MERICAN PROGRESS A	CTTON FILME	, 30-1	0192708 Page <b>4</b>
		Balance Sheets (See the instructions.)		ICTION TOND	50	UTJZIUO Fayer
Note	e: Whe shou	ere required, attached schedules and amounts uld be for end-of-year amounts only.	within the description column	(A) Beginning of year		<b>(B)</b> End of year
	45	Cash - non-interest-bearing		450 000		
	46	Cash - non-interest-bearing Savings and temporary cash investments		<u>456,990</u> 318,302		793,285.
					. 46	334,941.
	47 a	Accounts receivable	47a			
	b	Less: allowance for doubtful accounts	47b	-	47c	
					4/6	
	48 a	Pledges receivable	48a 267,668.			
	b	Less: allowance for doubtful accounts			48c	267,668.
	49	Grants receivable			49	207,000.
	50 a	Receivables from current and former officers key employees	s, directors, trustees, and			
	b	Receivables from other disqualified persons	(as defined under section		50a	·
ಭ		4958(f)(1)) and persons described in section			50b	
Assets	51 a	Other notes and loans receivable	51a		300	
Ä		Less: allowance for doubtful accounts			51c	
	52	Inventories for sale or use			52	······································
	53	Prepaid expenses and deferred charges			53	
	54 a	Investments - publicly-traded securities	► Cost FMV		54a	· · · · · · · · · · · · · · · · · · ·
		Investments - other securities	FMV		54b	
	55 a	Investments - land, buildings, and				
		equipment: basis	55a			
	1	Less: accumulated depreciation			55c	
	56	Investments - other			56	
		Land, buildings, and equipment: basis		7		
	58	Less: accumulated depreciation <b>STMT</b> 6		11,570.	. 57c	15,432.
	30	Other assets, including program-related investmer (describe		25.454		
	59	Total assets (must equal line 74). Add lines	SEE STATEMENT 7 )			<u> </u>
•	60	Accounts payable and accrued expenses		849,863.		1,427,506.
	61	Grants payable		16,018.	1	11,918.
	62	Deferred revenue			61	
Liabilities	63	Loans from officers, directors, trustees, and	kev employees		62 63	······································
bili	64 a				64a	
Lia	b	Mortgages and other notes payable			64b	
	65	Other liabilities (describe 🕨	SEE STATEMENT 8 )	308,707.		338,091.
•	66			324,725.	66	350,009.
	Orga	anizations that follow SFAS 117, check here	► LX and complete lines			
Se	67	67 through 69 and lines 73 and 74.				
u č	67 68			514,138.	1	921,559.
3ale	69	Temporarily restricted		11,000.	68	155,938.
nd E	1	Permanently restricted			69	
цц	loige	complete lines 70 through 74.	ck here 🕨 🛄 and			
° c	70	Capital stock, trust principal, or current fund	e			
set	71	Paid-in or capital surplus, or land, building, a	nd equipment fund		70	
Net Assets or Fund Balances	72	Retained earnings, endowment, accumulated	d income, or other funds		71	
Net	73	Total net assets or fund balances. Add lines 67 th			72	
		(Column (A) must equal line 19 and column (B) m	ust equal line 21)	525,138.	73	1,077,497.
	74	Total liabilities and net assets/fund balance	es. Add lines 66 and 73	849,863.	74	1,427,506.
					• · · • - L	Form <b>990</b> (2007)

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and the second sec	n 990 (2007) CENTER FOR AMERICAN E int IV-A Reconciliation of Revenue per Audited Fina instructions.)	<u>ROGRESS ACTI</u> ncial Statements V	ON FUND /ith Revenue p	<u>30-</u> er Re	<u>0192'</u> turn <sub>(</sub> s	708 Pa	ige 5
a	Total revenue, gains, and other support per audited financial stateme	ents			a 3	171 0	<u>.</u>
b	Amounts included on line a but not on Part I, line 12:		•••••		<u>a 3</u>	,171,22	43.
1	Net unrealized gains on investments		ht				
2	Donated services and use of facilities		h2				
3	Recoveries of prior year grants		h3				
4	Other (specify):		b4				
	Add lines b1 through b4	t			ь		0.
C	Subtract line b from line a					,171,22	
đ	Amounts included on Part I, line 12, but not on line a:				Č –		
1	Investment expenses not included on Part I, line 6b		d1				
2	Other (specify):		d2				
	Add lines d1 and d2				đ		0.
e	TOTAL REVENUE (PART) line (2) Add lines a and d			~ 1	e 3	,171,22	
6	The second and the se	ancial Statements (	Nith Expenses	per F	Return		
a	Total expenses and losses per audited financial statements				a 2	,618,86	54.
D	Amounts included on line a but not on Part I, line 17:						
1	Donated services and use of facilities		b1				
2	Prior year adjustments reported on Part I, line 20		b2				
3	Losses reported on Part I, line 20		b3				
4	Other (specify):		b4				
	Add lines b1 through b4				b		0.
C	Suppractime Dirotitime a				c 2	,618,86	54.
u.	Amounts included on Part 1, line 17, but not on line a:						
1	Investment expenses not included on Part I, line 6b		d1				
2	Other (specify):		d2				
	Add lines d1 and d2			1			~
					d		0.
e Pa	Add lines d1 and d2 <u>Total expenses (Part I, line 17). Add lines c and d</u>		•	<b>N</b>	-	618,86	
e Pa	rt V-A Current Officers, Directors, Trustees, and Ke	ev Employees (List ea	ich person who wa		-	618,86 ctor, trustee	
e Pa	<b>TV-A</b> <b>Current Officers, Directors, Trustees, and Ke</b> or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter	s an off	e 2 icer, dire	(E) Expen	, ise
Pa	<b>TV-A</b> <b>Current Officers, Directors, Trustees, and Ke</b> or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours	the person who was the instructions.) (C) Compensation	s an off	e 2	(E) Expen	, ise
e Pa	<b>TV-A</b> <b>Current Officers, Directors, Trustees, and Ke</b> or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter	s an off	e 2 icer, dire	(E) Expen	, ise
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	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces
	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces
	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces
	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces
	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces
	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces
	Current Officers, Directors, Trustees, and Ke or key employee at any time during the year even if they we (A) Name and address	ey Employees (List ea ere not compensated.) (Se (B) Title and average hours per week devoted to	the person who was the instructions.) (C) Compensation (If not paid, enter -0)	(D)Con employ plans compen	e 2 icer, dire	ector, trustee (E) Expen account a other allowa	, ise ind inces

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Form 990 (2007)

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1000	CENTER FOR AMERICAN P           V-A         Current Officers, Directors, Trustees, and Ker	ROGRESS ACTIO	N FUND	30-0192	<u>708</u>	5 - 1	age 6
75 a	Enter the total number of officers, directors, and trustees permitted t meetings			7		Yes	No
1	Are any officers, directors, trustees, or key employees listed in Form listed in Schedule A, Part I, or highest compensated professional and Part II-A or II-B, related to each other through family or business relat the individuals and explains the relationship(s)	d other independent contr	actors listed in Sci		75b		x
<ul> <li>c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." SEE STATEMENT 10</li> <li>If "Yes," attach a statement that includes the information described in the instructions.</li> </ul>						X	
<u>d</u>	Does the organization have a written conflict of interest policy?				75d	x	
	V-B Former Officers, Directors, Trustees, and Ke Benefits (If any former officer, director, trustee, or key en the year, list that person below and enter the amount of cor	plovee received compens	sation or other ben	ofite (doscribo	d hala	w) duri	ing
	(A) Name and address NONE	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)		to (I a	) Exper	nse and

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Pa	Int VI Other Information (See the instructions.)		Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed			100
	statement of each change	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
78 a	- is the organized on the control of the second of the sec	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78h		
7 <del>9</del>	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	is the organization related (other than by association with a statewide or nationwide organization) through common	an a'		
_	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	•
þ	If "Yes," enter the name of the organization			
	and check whether it is X exempt or nonexempt	a. C		
81 a	181a ().			
b	Did the organization file Form 1120-POL for this year?	81b		X
		E a um	000/	0007

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_	990 (2007) CENTER FOR AMERICAN PROGRESS ACTI	ON F	<u>UND 30-019</u>	2708	E	age 7
	Curler Information (continued)			<u> </u>	Yes	
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities	at no cl	narge or at substantially	Τ		
	iess than fair rental value?		с ,	82a		x
b	if "Yes," you may indicate the value of these items here. Do not include this					
	amount as revenue in Part I or as an expense in Part II.				1.1	
	(See instructions in Part III.)	82b	N/A			
83 a	Did the organization comply with the public inspection requirements for returns and exemptic	n appli	cations?	83a	X	
D	Did the organization comply with the disclosure requirements relating to guid pro guo contribution	utions?		83b	X	
84 a	a Did the organization solicit any contributions or gifts that were not tax deductible?					
b	in res, did the organization include with every solicitation an express statement that such of	ontribut	ions or nifts were not		X	
05 -	tax deductible?			84b	X	
80 a	so (o), (o), or (o). Were substantially an ones nondeductible by members?			85a	X	
D	bid the organization make only in-house lobbying expenditures of \$2,000 or less?			85b	X	
	in thes was answered to either 85a or 85b, do not complete 85c through 85h below unless the	he orga	nization received a			
	waiver for proxy tax owed for the prior year.					
ن م	Dues, assessments, and similar amounts from members	85c	<u> </u>			
đ	Section 162(e) lobbying and political expenditures	85d	<u>N/A</u>			
e f	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	<u>N/A</u>			
u a	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A			
y h	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	••••••	N/A	85g		
	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount to its reasonable estimate of dues allocable to reach the till be block.	nt on lin	e 85f			1
	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditu following tax year?					ļ
86	following tax year?	••••••	N/A	85h	decis (1970)	The second second
	line 12					
h	Gross receipts, included on line 12, for public use of club facilities		N/A			
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	86b	<u> </u>	-		
	Gross income from other sources. (Do not net amounts due or paid to other sources	<u>87a</u>	<u>N/A</u>			
-						
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable co	87b	N/A			
	or an entity disregarded as separate from the organization under Regulations sections 301.77	rporatio	on or partnership,			
	If "Yes," complete Part IX	01-2 an	a 301.7701-3?		1962	85.949 
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity	 	the meaning of	88a		<u>X</u>
	section 512(b)(13)? If "Yes," complete Part XI	WILL BUT	the meaning of	0.01		~~ <b>~</b> 77
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year und	 er:		88b	90 83 8	<u>X</u>
	section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 495		N/A	dis 2 million	a the	1. Harris
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess	benefit				
	transaction during the year or did it become aware of an excess benefit transaction from a price	or vear?	,			
	If "Yes," attach a statement explaining each transaction	-		89b	8008214	X
C	the organization managers or disqualified persons during the	e vear u	nder		land l	<u>x6015</u>
	sections 4912, 4955, and 4958					
đ	The Enter: Amount of tax on line 89c, above, reimbursed by the organization					
e	All organizations. At any time during the tax year, was the organization a party to a prohibited t	tax shel	ter transaction?	89e		<u>X</u>
T	t All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?					X
ĝ	g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization					
90 a	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?					Х
	List the states with which a copy of this return is filed $\blacktriangleright DC$	·				
b 91 a	Number of employees employed in the pay period that includes March 12, 2007					140
Jia	The books are in care of ► THE ORGANIZATION	Tele	phone no. 🕨 <u>(202)</u> 6			L
b	Located at $\blacktriangleright$ 1333 H STREET, NW 10TH FLOOR, WASHINGTON	I, D(	<u>C</u> ZIP + 4 ▶ <u>2</u>			
U	At any time during the calendar year, did the organization have an interest in or a signature or a financial account in a foreign country (such as a bank account in a foreign country).	other a	uthority over	ľ	Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other fill "Yes," enter the name of the foreign country $\blacktriangleright$ N/A	inancial	account)?	91b		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of F and Financial Accounts.	oreign	Bank			

Form **990** (2007)

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c       At any time during the calendar year, did the organization maintain an office outside of the United States?       11         11"Yes," enter the name of the foreign country ▶ N/A       N/A       >         22       Section 4947[a)(1) nonexempt charitable trusts filing Form 390 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accured during the tax year       ▶ 32       N/A         Eart VII Analysis of Income - Producing Activities (See the instructions.)         Note: Enter gross amounts unless otherwise indicated.         and enter the amount of tax-exempt interest received or accured during the tax year       ▶ 32       N/A         Section 4947[a)(1) nonexempt charitable trusts filing Form 390 in lieu of Form 1041- Check here and enter the amount of tax-exempt indicated.         Bitteret on samounts unless otherwise indicated.       (B)       Excluded by section 512, 513, or 54       (F)         Related or exempt indicated business income       Calender business       Amount       (D)       Related or exempt innection income         a	Form 990 (2007) CENTER FC Part VI Other Information (continued)	R AMERICAL	N PROGRESS A	ACTIO	<u>N FUND 3</u>	0-0192708 Page <b>8</b>
If "Yes," enter the name of the foreign country ▶       N/A         92       Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 104 1- Check here       >         and enter the amount of tax-exempt interest received or accrued during the tax year       >       92       N/A         Part Will       Analysis of Income-Producing Activities (See the instructions.)       Unrelated business income       Excludes try section 312, 513, or 514       (E)         Note: Enter gross amounts unless otherwise indicated.       Unrelated business income       Excludes try section 312, 513, or 514       (E)         93       Program service revenue:       (A)       (B)       (B)       (C)       (D)         94       Membership dues and contracts from government agencies       (B)       (C)       (D)       (D)         95       Interest on savings and temporary cash investments       14       25,092.       (D)         96       Undertest from securities       (D)       (D)       (D)       (D)         97       Net rental income or (loss) from sales of investment       14       25,092.       (D)         97       Net rental income or (loss) from sales of assets other than investrory       (D)       (D)       (D)       (D)         98       Net rental income or (loss) from sales of assets other than i						Yes No
92       Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041- Check here       92       N/A         and enter the amount of tax exempt interest received or accured during the tax year       92       N/A         Bart UII Analysis of Income-Producing Activities (See the instructions)       92       N/A         Note: Enter gross amounts unless otherwise indicated.       Unrelated business income       Evaluate try section 512, 513, or 514       (E)         93       Program service revenue:       (B)       (B)       (C)       (D)       Related or exempt indicated or exempt indicated income         a	If "Yes " enter the name of the foreign count			f the Unit	ed States?	91c X
and offer the amount of tax-exempt interest received or accrued during the tax year				beek bee		,
Interstation       Program service revenue:       Image of the program service revenue: </td <td>and enter the amount of tax-exempt interest</td> <td>received or accrue</td> <td>d during the tax year</td> <td>neck ner</td> <td></td> <td></td>	and enter the amount of tax-exempt interest	received or accrue	d during the tax year	neck ner		
Note: Enter gross amounts unless otherwise indicated.       Unrelated business income       Excluded by section 512, 513, or 514       (E) Related or exempt scode         93       Program service revenue:       (B) Business code       (C) C       (D) Business code       (C) C       (D) Business code       (C) C       (D) Business code       (C) C       (D) Business code       (C) C       (D) Business code       (C) C       (D) Business code	Part VII Analysis of Income-Produc	ing Activities (	See the instructions )			<u>N/A</u>
indicated.       (A)       (B)       (C)       (D)       Related or exempt function income functin income function income function income functin income function				Excluded	by section 512 513 or 51	4
93       Program service revenue:       Business code       Amount       Each- code       Amount       Headed or exempt function income         a			(B)	(C)		
b			Amount	sion		
c   d   d   f   Medicare/Medicaid payments   g   Fees and contracts from government agencies   g   Membership dues and assessments   95   Interest on savings and temporary cash investments   96   Dividends and interest from securities   97   98   14   25,092.      99   90   91   92   93   94   94   95   96   97   98   97   98   99   90   90   910   92   93   94   94   95   96   97   96   97   98   97   90   96   97   96   97   97   96   97   97   98   97   90   98   97   98   98   99   90   90   90   910   92   93   94   94   94   95   95   96   97   98   98   99   90   911 <tr< td=""><td></td><td></td><td></td><td>+</td><td></td><td></td></tr<>				+		
d   f   Medicare/Medicaid payments   g   Fees and contracts from government agencies   94   Membership dues and assessments   95   Interest on savings and temporary cash investments   96   97   98   97   98   98   99   90   90   91   92   93   94   94   95   96   97   98   97   98   97   98   97   98   97   98   97   90   91   92   93   94   94   95   96   97   98   97   98   97   90   91   92   93   94   94   95   95   96   97   98   98   97   98   97   98   98   97   98   97   98   97   98   98   97   98   98   98   99   90   99   90   91   91 </td <td></td> <td></td> <td>······</td> <td></td> <td></td> <td></td>			······			
e   f   Medicare/Medicaid payments   g   Fees and contracts from government agencies   94   Membership dues and assessments   95   96   97   98   97   98   98   99   90   91   92   93   94   95   96   97   98   97   98   99   90   90   91   92   93   94   94   95   96   97   97   98   98   90   90   91   92   93   94   94   95   95   96   97   97   98   98   99   90   91   92   93   94   94   95   95   96   97   98   98   99   90   91   92   93   94   94   95   95   96   97   98   98   99   99   99   91   91 <td>•</td> <td></td> <td></td> <td></td> <td></td> <td></td>	•					
g Fees and contracts from government agencies   94 Membership dues and assessments   95 Interest on savings and temporary cash investments   96 Dividends and interest from securities   97 Net rental income or (loss) from real estate:   a debt/financed property   98 Net rental income or (loss) from personal property   99 Other investment income   100 Gain or (loss) from sales of assets   other than inventory   101 Net income or (loss) from sales of inventory   102 Gross profit or (loss) from sales of inventory   103 Other revenue:   a   a   b   c   a   b   c   a   b   c   a   b   c   a   b   c   a   b   c   a   b   c   c   a   b   c </td <td>e</td> <td></td> <td></td> <td></td> <td></td> <td></td>	e					
g Fees and contracts from government agencies   94 Membership dues and assessments   95 Interest on savings and temporary cash investments   96 Dividends and interest from securities   97 Net rental income or (loss) from real estate:   a debt/financed property   98 Net rental income or (loss) from personal property   99 Other investment income   100 Gain or (loss) from sales of assets   other than inventory   101 Net income or (loss) from sales of inventory   102 Gross profit or (loss) from sales of inventory   103 Other revenue:   a   a   b   c   a   b   c   a   b   c   a   b   c   a   b   c   a   b   c   a   b   c   c   a   b   c </td <td>f Medicare/Medicaid payments</td> <td></td> <td></td> <td></td> <td></td> <td></td>	f Medicare/Medicaid payments					
94       Membership dues and assessments       14       25,092.         95       Interest on savings and temporary cash investments       14       25,092.         96       Dividends and interest from securities       97         97       Net rental income or (loss) from real estate:       98         98       Net rental income or (loss) from personal property       98         99       Other investment income       99         90       Gain or (loss) from sales of assets       96         910       Gain or (loss) from sales of assets       96         911       Net income or (loss) from special events       96         92       Gross profit or (loss) from sales of inventory       97         93       Other revenue:       96         94       97       97         95       Interest income       97         96       Other revenue:       97         97       Other revenue:       97         98       Net income or (loss) from special events       98         99       Other revenue:       98       98         90       Gross profit or (loss) from sales of inventory       99       99         90       Other revenue:       98       98 <t< td=""><td></td><td></td><td></td><td>+</td><td></td><td></td></t<>				+		
95 Interest on savings and temporary cash investments   96 Dividends and interest from securities   97 Net rental income or (loss) from real estate:   a debt-financed property   b not debt-financed property   98   98   Net rental income or (loss) from personal property   99   90   91   92   93   94   95   95   96   97   98   99   90   90   91   92   93   94   95   95   96   97   98   99   90   90   910   910   92   93   94   94   95   95   96   97   98   99   90   90   910   910   92   93   94   94   95   95   96   97   98   99   90   90   910   910   92   93   94   94   95   95   96   97   98   99   99   99   90 <td< td=""><td></td><td></td><td>· · · · · · · · · · · · · · · · · · ·</td><td></td><td></td><td></td></td<>			· · · · · · · · · · · · · · · · · · ·			
96 Dividends and interest from securities       100 (000)         97 Net rental income or (loss) from real estate:       100 (000)         a debt-financed property       100 (000)         98 Net rental income or (loss) from personal property       100 (000)         98 Net rental income or (loss) from personal property       100 (000)         99 Other investment income       100 (000)         90 Gain or (loss) from sales of assets       100 (000)         91 Net income or (loss) from sales of inventory       101 Net income or (loss) from sales of inventory         101 Net income or (loss) from sales of inventory       101 Other revenue:         102 Gross profit or (loss) from sales of inventory       101 Other revenue:         103 Other revenue:       100 (000)         104 Subtotal (add columns (B), (D), and (E))       0.       25, 092.	95 Interest on savings and temporary cash investment	is		14	25 09	2
97 Net rental income or (loss) from real estate:   a debt-financed property   b not debt-financed property   98 Net rental income or (loss) from personal property   99 Other investment income   100 Gain or (loss) from sales of assets   other than inventory   101 Net income or (loss) from special events   102 Gross profit or (loss) from sales of inventory   103 Other revenue:   a   b   c   c   d   e   104 Subtotal (add columns (B), (D), and (E))   0.   0.   0.   0.   25, 092.					<u> </u>	<u> </u>
a debt-financed property   b not debt-financed property   98 Net rental income or (loss) from personal property   99 Other investment income   100 Gain or (loss) from sales of assets   other than inventory   101 Net income or (loss) from special events   102 Gross profit or (loss) from sales of inventory   103 Other revenue:   a   b   c   d   e   104 Subtotal (add columns (B), (D), and (E))     0.   25, 092.		1.2				
b not debt-financed property   98   98   99   Other investment income   100   Gain or (loss) from sales of assets   other than inventory   101   Net income or (loss) from special events   102   Gross profit or (loss) from sales of inventory   103   Other revenue:   a   b   c   d   e            104   Subtotal (add columns (B), (D), and (E))        0.   25, 092.						
98       Net rental income or (loss) from personal property         99       Other investment income         100       Gain or (loss) from sales of assets         other than inventory       0         101       Net income or (loss) from special events         102       Gross profit or (loss) from sales of inventory         103       Other revenue:         a	<b>b</b> not debt-financed property			†		
100       Gain or (loss) from sales of assets other than inventory	98 Net rental income or (loss) from personal prop	perty			·····	
100       Gain or (loss) from sales of assets other than inventory	99 Other investment income			1		
101 Net income or (loss) from special events	100 Gain or (loss) from sales of assets					
102       Gross profit or (loss) from sales of inventory         103       Other revenue:         a	other than inventory					
103 Other revenue:       a         a	101 Net income or (loss) from special events					
a						
b c  c c c	103 Other revenue:					
c	a					
d						
e						
105 Tatel (add line 104 askings (D) (D)	0					
105 Tatel (add line 104 askings (D) (D)	e					
	104 Subtotal (add columns (B), (D), and (E))		0.		25,092	2. 0
105 Total (add line 104, columns (B), (D), and (E))         25,092           Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.         25,092	Note: Line 105 plus line 1e. Part I should equal the	amount on line 10				▶ <u>25,092.</u>
Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)	Part VIII Belationship of Activities to	the Accompting	, Part I. Chmont of Examp	1 D		
Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly to the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income is reported in column (E) of Part VII contributed importantly in the activity for which income	Line No Explain how each activity for which income	is reported in achieve	Siment of Exemp	n Purpo	oses (See the instru	ictions.)
Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).	exempt purposes (other than by providing the	unds for such nurnes	(E) OF Part VII Contributed	i important	tly to the accomplishme	ent of the organization's
						<u> </u>
				·		
Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)	Part IX Information Regarding Taxa	able Subsidiario	es and Disregard	ed Enti	ties (See the instruc	rtions)
Name address and FIN of corporation (B) (C) (D) (E)	(A) (B)		(C)			
partnership, or disregarded entity ownership interest Nature of activities Total income End-of-year assets	partnership, or disregarded entity ownership	interest	Nature of activities		Total income	
%		%				
N/A %	N/A	%				
%		%				
%						
Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)		sfers Associate	ed with Personal	Benefit	t Contracts (See	the instructions.)
(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	(a) Did the organization, during the year, receive any fi	unds, directly or indire	ectly, to pay premiums on	a personal	benefit contract?	
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	(b) Uid the organization, during the year, pay premium	s, directly or indirectly	, on a personal benefit co	ntract?		
Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).	Note: IT Yes to (b), The Form 8870 and Form 47	20 (see instructions,	).			

Form 990 (2007)

723163 12-27-07

rm 990 (2007)         CENTER FOR AMERICAN PRO           art XI         Information Regarding Transfers To and From (	OGRESS ACTIC	<b>N</b> FUND $30-019$	2708 F	Page 9
	N/A	er complete only if the organiz		
			Yes	No
6 Did the reporting organization <b>make</b> any transfers to a controlled entity	as defined in section 5	12(b)(13) of the Code? If "Yes,	u	
complete the schedule below for each controlled entity.				
(A) Name, address, of each	(B) Employer	(C)	(D)	
controlled entity	Identification Number	Description of transfer	Amount transfe	-
	MUNDEI			
				• • • • • • • •
Totals				
			Yes	No
Did the reporting organization receive any transfers from a controlled er	ntity as defined in sect	ion 512(b)(13) of the Code? If "	Yes,"	
complete the schedule below for each controlled entity.				
(A) Name, address, of each	(B) Employer	(C)	(D)	_
controlled entity	Identification Number	Description of transfer	Amount transfer	
	NUMBER			
			·	
			<b></b>	
•	alay a tarih gang dalah			
Totals	SHOLL PRESENT	Stand Barris Conception		
			Yes	No
Did the organization have a binding written contract in effect on August : _annuities described in question 107 above?	17, 2006, covering the	interest, rents, royalties, and		
Under penalties of perjury, I declare that thave examined this return, including accompany	ing schedules and statements	and to the best of my knowledge and b	oliof it is true or a	<u> </u>
Under penalties of perjury, I declare that thave examined this return, including accompany and complete. Declaration of preparer other than officer) is based on all information of whi	ch preparer has any knowledg	ie.	ener, it is true, con	rect,
se Signature of officer	J	1 11/17/2007	8	
Signature of officer		Date		
SARAH ROGENWIRTELL, EVP MANAGE	<u>MENT/TREASU</u>	RER		
Type or print harn end elle				
Preparer's signature			or PTIN (See Gen.	inst, X)
arer's Firm's name (or LAPSONIALLEN THE	111100	nployed		
self-employed), 2900 SOUTH OUTROV CT CT	ITE 150			
address, and	TTE TOA			
ZIP+4 ARLINGTON, VA 22206		Phone no. ► 703-9	000 E10	0

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** PUBLIC	DISCLOSURE	СОРҮ
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# Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of organization

# Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

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# Employer identification number 30 - 0192708

OMB No. 1545-0047

CENTER	FOR	AMERICAN	PROGRESS	ACTION	FUND
Organization type (check one):					

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 4) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.)

#### **General Rule-**

X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

#### Special Rules-

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

723451 12-27-07

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Schedule B	(Form 990	990-E7	or 990-PE	(2007)
Schedute D	(i Onn 330,	33U-CZ,	0 990-66	(2007)

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Name	01	orgai	IIZa	uon

Page 1 of 5 of Part I

Employer identification number

30-0192708

#### CENTER FOR AMERICAN PROGRESS ACTION FUND

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$1,796,235.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$250,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b)	(c) Aggregate contributions	(d) Type of contribution
3		\$200,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>4</u>		\$105,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$100,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>6</u> 723452 12-27	7-07	\$96,497.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

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(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
7		\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9		\$38,524.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$25,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$22,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12		\$\$ 20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Contributors (See Specific Instructions.)

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Part I

Employer identification number

Page 2 of 5 of Part I

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Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

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Schedule B (Form 990	, 990-EZ, o	r 990-PF) (2007)

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#### Name of organization

Page 3 of 5 of Part I

Employer identification number

30-0192708

## CENTER FOR AMERICAN PROGRESS ACTION FUND

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14		\$19,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
15		\$15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>    17                                </u>		\$12,000.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
18	57	\$10,000. \$Schedule B (Form 9	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) 90, 990-EZ, or 990-PF) (2007)

13 2007.06050 CENTER FOR AMERICAN PROGRES 38090-01

10391114 137216 38090-FDN

		\$10,000.	Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
20		\$10,000.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$10,000.	Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
22		\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
23		\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
24		\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

(a)

No.

19

30-0192708

(c)

Aggregate contributions

Employer identification number

Person

(d)

Type of contribution

X

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Page

#### CENTER FOR AMERICAN PROGRESS ACTION FUND

(b)

Name, address, and ZIP + 4

Part I Contributors (See Specific Instructions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

14

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2007.06050 CENTER FOR AMERICAN PROGRES 38090-01

4 of 5 of Part i

			is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
29		\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
723452 12-27 91114	-07 137216 38090-FDN 2007.06050 CENTER		990, 990-EZ, or 990-PF) (2007) GRES 38090-01

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u>8,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$6,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u>5,000.</u> 	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there

Part I Contributors (See Specific Instructions.)

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Page 5 of 5 of Part I

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FORM 990 PAGE 2

Asset No.	Description	otion	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Exci	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	PROGRAM SERVICES	VI CES Momente			• 000	<b>.</b>							81,960.
	PROGRAM SERVICES MANAGEMENT AND GENERAL	TICES						•	•	ō	•	0	81,960.
7	12 * 990 PAGE 2 TOTAL MANAGEMENT AND GENERAL	TOTAL ND GENERAL			000	16			•	•0		Ö	5,553. 5,553.
	FUNDRAISING * 990 PAGE 3	с. 2 тотът.			<del>_</del> 0000.	16		•					749.
	FUNDRAISING * GRAND TOTAL 990 PAGE	L 990 PAGE					0	••••	•••	0.0	••	o o	749. 88,262.
n de la composition de la comp													
728102 04-27-07					(D) · As	(D) · Asset disposed	posed	ĽI *	C, Section 179	', Salvage, Bonus,	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	talization Ded	uction, GO Zone

990

(D) · Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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FORM 990 S	SPECIAL EVE	NTS AND ACTIV	<b>TTIES</b>	ST	ATEMEN'	r 1
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE H	DIRECT EXPENSES	NET II OR (1	NCOME LOSS)
ANNUAL FUNDRAISING DINNER	51,200.	51,200.	······································		<b>.</b>	0.
TO FM 990, PART I, LINE 9	51,200.	51,200.				0.
FORM 990	ОТНІ	ER EXPENSES		ST	TEMEN	с <u>2</u>
	(A)	(B) PROGRAM	(C) MANAGEME	איז	(D)	
DESCRIPTION	TOTAL	SERVICES	AND GENE		NDRAIS	SING
PROFESSIONAL FEES	306,444.	292,956	 . 13	301.		187.
CONTRACT LABOR	11,027.	8,094	— - <b>,</b>	911.		22.
CREATIVE FEES (DHOMOGDA DHW	05 60 6					
FEES/PHOTOGRAPHY PROF. DEVMNT/CONF.	27,624.	27,517	•	0.		107.
FEES/MEM. DUES	1 202	· 1 100		_		
RECRUITMENT	1,203. 174.	1,197		3.		3.
MOVING/STORAGE	1/4.	21	•	153.		0.
EXPENSES	191.	0		101		
SECURITY	3,133.	2,987		191. 129.		0.
INSURANCE	7,304.	6,540		685.		17.
CABLE TELEVISION	722.	655		59.		79.
FURNITURE &			•	57.		8.
EQUIPMENT EXPENSE	19,827.	18,253	• 1.	381.		193.
PHOTOCOPYING			_,			199.
EXPENSES	7,143.	6,474	•	592.		77.
STATIONERY	10,739.	9,747	•	875.		117.
ACKNOWLEDGEMENTS/THA K YOUS	1 0 4 5					
ELEC. PRESS, POLICY	1,917.	1,738	•	159.		20.
& RESEARCH FEES	7,703.	7 400		~ · ·		
INTERNET SERVICE	213.	7,426 213		244.		33.
DOMAIN NAME	21.).	213	•	0.		0.
REGISTRATION	1,662.	1,659		0		2
SOFTWARE LICENSES	2,016.	1,951		0. 57.		3.
WEB HOSTING &	•	=,551	•	57.		8.
SERVICES	46,008.	45,920	•	0.		88.
ADVERTISING	50,210.	50,210		0.		0.
LIST RENTAL	9,455.	9,455		0.		0.
DC PROPERTY TAX	9,697.	8,801		790.		106.
DC SALES AND USE TAX FILING FEES	3,913.	3,551		319.		43.
BANK CHARGES/CREDIT	2,614.	23	• 2,	591.		0.
CARD FEES	5,539.	2,718	• 2,	788.		33.
TOTAL TO FM 990, LN 43	536,478.	508,106	• 27,	228.	1,	144.

17 STATEMENT(S) 1, 2 10121114 137216 38090-FDN 2007.06050 CENTER FOR AMERICAN PROGRES 38090-01

30-0192708

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CENTER	FOR	AMERICAN	PROGRESS	ACTTON	FIIND
	- 011		T KOOKDDD	ACITON	LOND

FORM 990

#### CASH GRANTS AND ALLOCATIONS TO OTHERS

## CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS

CARBON OFFSETS NATIVE ENERGY 823 FERRY ROAD CHARLOTTE, VT 05445

TOTAL INCLUDED ON FORM 990, PART II, LINE 22B

AMOUNT

2,766.

3

2,766.

18 STATEMENT(S) 3 10121114 137216 38090-FDN 2007.06050 CENTER FOR AMERICAN PROGRES 38090-01

30-0192708

STATEMENT

30-0192708

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION OF PROGRAM SERVICE TWO

THE ACTION FUND PUBLISHES THE PROGRESS REPORT, A DAILY NEWSLETTER OFFERING ANALYSIS AND CRITICAL THINKING ON THE NEWS OF THE DAY. THE ACTION FUND ALSO IS THE HOME OF THINKPROGRESS.ORG, A TOP-TRAFFICKED BLOG THAT OFFERS ANALYSIS OF UP TO THE MINUTE ISSUES IN THE PUBLIC DEBATE. THESE RAPID RESPONSE COMMUNICATION VEHICLES PROMOTE PROGRESSIVE POLICIES AND IDEAS, INCLUDING SOCIAL AND ECONOMIC JUSTICE, HEALTHY COMMUNITIES, GLOBAL LEADERSHIP, AND A SECURE AMERICA AND OFFER A SHARP AND WELL-RESEARCHED CRITIQUE DESIGNED TO FIGHT CORRUPTION, INCOMPETENCE, MEDIA FAILURES, AND THE CONSERVATIVE AGENDA.

				GRANTS	EXPENSES	
то го	RM 990,	PART III,	LINE B		511,94	45.
				· ••		
FORM	990	STATEMENT	OF ORGANIZATION PART	EXEMPT PURPOSE	STATEMENT	5

#### EXPLANATION

FORM 990

CENTER FOR AMERICAN PROGRESS ACTION FUND'S PRIMARY EXEMPT PURPOSE CONTAINS TWO MAJOR ELEMENTS. THESE ARE HIGHLIGHTED BELOW WITH THE RELATED PROGRAM SERVICE ACCOMPLISHMENTS:

FORM 990 DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE COMPUTER EQUIPMENT	14,243. 3,990.	2,302. 499.	11,941. 3,491.
TOTAL TO FORM 990, PART IV, LN 57	18,233.	2,801.	15,432.

10121114 137216 38090-FDN

STATEMENT 4

30-0192708

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FORM 990 OTHER ASSETS		STATEMENT	7
DESCRIPTION	BEGINNING OF YEAR	END OF YEAD	R
THE PROGRESS REPORT, NET OF ACCUMULATED AMORTIZATION THINKPROGRESS BLOG, NET OF ACCUMULATED	33,709.	15,96	7.
AMORTIZATION	2,762.	21	3.
TOTAL TO FORM 990, PART IV, LINE 58	36,471.	16,18	0.

FORM 990	OTHER LIABILITIES		STATEMENT	8
DESCRIPTION		BEGINNING OF YEAR	END OF YEAR	
DUE TO CENTER FOR AMERICAN	PROGRESS	308,707.	338,091	•
TOTAL TO FORM 990, PART IV	, LINE 65	308,707.	338,091	•

FORM 990 PART V-A - LIST OF ( TRUSTEES	CURRENT OFFICERS, AND KEY EMPLOYEE	DIRECTORS, S	STATI	ement 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
PETER B. EDELMAN 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR 1.00	0.	0.	0.
JUDITH FEDER 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR 1.00	0.		0.
RON KLAIN 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR 1.00	0.	0.	0.
BRODERICK D. JOHNSON 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR 1.00	0.	0.	0.
TOM E. PEREZ 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR 1.00	0.	0.	0.
JOHN PODESTA 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR, PRES 4.00	IDENT, CEO 16,740.	1,704.	40.
HILARY B. ROSEN 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	DIRECTOR 1.00	0.	0.	0.
SARAH ROSEN WARTELL 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	EVP FOR MANAGE 4.00	MENT/TREASU 17,584.		60.
MELODY BARNES 1333 H STREET, NW, 10TH FLOOR WASHINGTON, DC 20005	EVP FOR POLICY 1.00	880.	97.	3.
TOTALS INCLUDED ON FORM 990, PART	Г V-А	35,204.	3,429.	103.

10121114 137216 38090-FDN

30-0192708

FORM 990

#### PART V-A OFFICER COMPENSATION FROM RELATED ORGANIZATIONS

STATEMENT 10

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT	
JOHN PODESTA	283,261.	28,836.	673.	
NAME OF RELATED ORGANIZATION		EMPLOYER	ID NUMBER	
CENTER FOR AMERICAN PROGRESS		30-0126510		
RELATIONSHIP BETWEEN ORGANIZATIONS				
RELATED ORGANIZATION				
COMPENSATION DESCRIPTION				

COMPENSATION, EMPLOYEE BENEFITS AND ALLOWANCES RECEIVED FOR SERVICES RENDERED TO THE ORGANIZATION

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT	
SARAH ROSEN WARTELL	191,416.	17,722.	653.	
NAME OF RELATED ORGANIZATION		EMPLOYER	ID NUMBER	
CENTER FOR AMERICAN PROGRESS		30-0126510		
RELATIONSHIP BETWEEN ORGANIZATIONS				

RELATED ORGANIZATION

COMPENSATION DESCRIPTION

COMPENSATION, EMPLOYEE BENEFITS AND ALLOWANCES RECEIVED FOR SERVICES RENDERED TO THE ORGANIZATION

10121114 137216 38090-FDN

30-0192708

OFFICER'S NAME	СОМР	ENSATION	BEN	MPLOYEE EFIT PLAN FRIBUTION		
MELODY BARNES		208,120.	<u> </u>	22,853.	71	.0.
NAME OF RELATED ORGANIZATION				EMPLOYER	ID NUM	IBER
CENTER FOR AMERICAN PROGRESS				30-0126510		
RELATIONSHIP BETWEEN ORGANIZATION	5					
RELATED ORGANIZATION						
COMPENSATION DESCRIPTION						
COMPENSATION, EMPLOYEE BENEFITS AN RENDERED TO THE ORGANIZATION	ND ALLOWANCES	RECEIVED	FOR	SERVICES		
						<u></u>
GENERAL	L EXPLANATION			STAT	EMENT	11

FORM AND LINE REFERENCES

FORM/LINE IDENTIFIER

DESCRIPTION/RETURN REFERENCE

FORM 990, PART II, LINE 42

EXPLANATION OF METHOD OF DEPRECIATION

GENERAL EXPLANATION

FURNITURE AND EQUIPMENT ARE DEPRECIATED OVER THEIR ESTIMATED USEFUL LIVES, RANGING FROM THREE TO SEVEN YEARS.

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