${\color{blue} COMMITTEE\ ON\ NATURAL\ RESOURCES} \\ {\color{blue} 113^{th}\ Congress\ Disclosure\ Form} \\ As\ required\ by\ and\ provided\ for\ in\ House\ Rule\ XI,\ clause\ 2(g)\ and }$ the Rules of the Committee on Natural Resources

5/23/13 Legislative Hearing on H.R. 745, To reauthorize the Water Desalination Act of 1996.

| For Ind | ividuals: |
|---------|---|
| 1. Nam | ne: |
| 2. Add | ress: |
| 3. Ema | ail Address: |
| 4. Phor | ne Number: |
| | * * * * |
| For Wit | tnesses Representing Organizations: |
| 1. | Name: |
| | Clyde Wayne Crews Jr. (Wayne) |
| 2. | Name of Organization(s) You are Representing at the Hearing: Competitive Enterprise Institute |
| | Business Address: [Information redacted for privacy] |
| 4. | Business Email Address: [Information redacted for privacy] |
| | Business Phone Number: [Information redacted for privacy] |

For all Witnesses

Name/Organization_____

Title/Date of Hearing_

Committee on Natural Resources legislative hearing on H.R. 745 (Napolitano), "Reauthorization of Water Desalination Act"

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.

Graduate Studies in economics, George Mason University MBA, College of William and Mary B.S., Lander College, Greenwood, S.C.

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.

[covered in bio attached at end]

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.

[covered in bio attached at end]

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.

No

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 by me personally; see "j" below regarding CEI

- f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.
- g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Witnesses Representing Organizations

| Name/Organization_ | | |
|-----------------------|----------|--|
| Title/Date of Hearing | <u> </u> | |

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

I am vp for policy and director of tech policy studies at CEI

i. 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 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).

No

- j. 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).
- 1. CEI v. National Aeronautic & Space Administration, Civil Action No. 10-883 (RWR) (D.D.C.) (lawsuit filed, May 27, 2010).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

- 2. CEI, FreedomWorks, and Science and Environmental Policy Project v. EPA, D.C. Circuit Court of Appeals Docket No. 10-1318 (petition for review filed, 10/8/2010; pending for certiorari currently pending with U.S. Supreme Court).
- Subject matter of lawsuit: Validity of EPA's Endangerment Ruling and related issues. Statute under which lawsuit was filed: Clean Air Act, 42 U.S.C. § 7401 et seq.
- 3. State National Bank of Big Spring et al. v. Geithner; the 60 Plus Association, Inc.; and the CEI, et al. v. Timothy Geithner, in his official capacity as Treasury Secretary; U.S. Department of the Treasury; Richard Cordray, in his official capacity as Director of the Consumer Financial Protection Bureau; Consumer Financial Protection Bureau; and Benjamin Bernanke, in his official capacity as Chairman of the Board of Governors of the Federal Reserve System; Martin Gruenberg, in his official capacity as Acting Chairman of the FDIC; Thomas Curry, in his official capacity as Comptroller of the Currency; Mary Schapiro, in her official capacity as Chairman of the Securities and Exchange Commission; Gary Gensler, in his official capacity as Chairman of the Commodities Futures Trading Commission; Debbie Matz, in her official capacity as Chairman of the National Credit Union Administration Board; and S. Roy Woodall in his official capacity as Member of the Financial Stability Oversight Council, Civil Action No. 12-1032 (ESH) (D.D.C.) (lawsuit filed, June 21, 2012).

Subject matter of lawsuit: Dodd-Frank Act's failure to comply with Constitutional separation of powers; and invalid appointment of director of Consumer Financial Protection Bureau contrary to Article II, Section 2, clauses 2 & 3 of the Constitution. Statutory and constitutional provisions under which lawsuit was filed: 28 U.S.C. §§ 1331 and 2201; U.S. Constitution, Articles II and III.

4. CEI v. EPA, Civil Action No. 12-1497 (ESH) (D.D.C.) (lawsuit filed 9/11/2012).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552

5. CEI v. EPA, Civil Action No. 12-1617 (JEB) (D.D.C.) (lawsuit filed 9/28/2012).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

6. CEI v. EPA, Civil Action No. 13-434 (RJL) (D.D.C.) (lawsuit filed 4/4/2013).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

7. CEI v. EPA, Civil Action No. 13-627 (KBJ) (D.D.C.) (lawsuit filed 5/2/2013).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

8. CEI v. U.S. Department of the Treasury, Civil Action No. 12-1838 (RMC) (D.D.C.) (lawsuit filed, 11/28/2012).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

9. CEI and American Tradition Institute v. EPA, Civil Action No. 13-406 (KBJ) (D.D.C.) (lawsuit filed, 3/28/2013, dismissed, 4/24/2013).

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

10. CEI v. National Oceanic & Atmospheric Administration, Civil Action No. 12-1466 (CKK) (D.D.C.) (lawsuit filed, 9/5/2012, dismissed, 10/9/2012)

Subject matter of lawsuit: Agency's refusal to comply with Freedom of Information Act request. Statute under which lawsuit was filed: 5 U.S.C. § 552.

11. Information Quality Act Request to EPA for Correction Regarding Impacts of Biofuel Mandates on Global Hunger and Mortality, RFC 12001 (petition filed Oct. 13, 2011) (available at http://cei.org/coalition-letters/epa-filing-actionaid-usa-cei-targets-ethanol-fuel-programs).

Subject matter of petition: Agency's failure to comply with Information Quality Act. Statute under which petition was filed: Section 515(a) of the Treasury and General Government Appropriations Act for Fiscal Year 2001, P.L. 106-554; 44 U.S.C. § 3516 (notes).

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

None

l. 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)).

Wayne Crews Bio and Selected Writings

Wayne Crews is vice president for policy and director of technology studies at the Competitive Enterprise Institute and a former Cato Institute scholar. A one-time Libertarian candidate for South Carolina state senate, he is widely published, a contributor to Forbes.com, and author of the annual *Ten Thousand Commandments*, which the *Wall Street Journal* called "the best measure of the overall regulatory burden." Wayne also compiles the *Tip of the Costberg* report on the expansion of government.

A frequent speaker on a range of policy issues, Wayne has appeared at venues ranging from the DVD Awards Showcase in Hollywood to the National Academies and the Future of Music Policy Summit. He has testified before congressional committees on various policy issues as well as spoken at European Commission-sponsored conferences and at the Spanish Ministry of Justice.

While not a lawyer, Wayne is cited in dozens of law reviews, journals and books. A dad of four, he <u>can still do a</u> handstand on a skateboard and enjoys custom motorcycles, the beach and the Crews family farm.

Wayne is co-editor of the books *Who Rules the Net?: Internet Governance and Jurisdiction*, and Copy Fights: The Future of Intellectual Property In the Information Age. He is co-author of *What's Yours Is Mine: Open Access and the Rise of Infrastructure Socialism*, and a contributing author to other books.

He has made various TV appearances on Fox, CNN, ABC, CNBC and the Lehrer NewsHour, and his reform ideas have been profiled and editorialized in such publications as the *Washington Post*, *Forbes.com* and *Investor's Business Daily*.

Wayne created CEI's *c:\spin* tech newsletter series, and co-created CEI's *OnPoint* policy series and the Cato Institute's *TechKnowledge* newsletter in 2001 (the first issue of which presented "The Libertarian Vision for Telecom and High-Technology" with Adam Thierer, which helped inspire the *Declaration of Internet Freedom* of 2012). He coined the term "Splinternet" in *Forbes* in 2001 to underscore alternatives to government over-regulation of the online communications and experiences.

Here are (out of date) links to some of Wayne's CEI articles, studies, congressional testimonies and citations.

Books & Chapters

The Revolution Spins toward More Regulation, in The Republican Revolution: Ten Years Later (2005).

Who Rules the Net?, edited by Adam Thierer and Clyde Wayne Crews Jr. (2003).

What's Yours Is Mine: Open Access and the Rise of Infrastructure Socialism, by Adam Thierer and Clyde Wayne Crews Jr. (2003).

The Half-Life of Policy Rationales: How New Technology Affects Old Policy Issues, contributor (2002)

Copy Fights: The Future of Intellectual Property Rights in the Information Age, coeditor (2002)

Intellectual Property, Chapter 40 of the Cato Handbook for Congress, 108th Congress.

Congressional Testimony and Other Filings

Testimony before the Subcommittee on Water and Power, U.S. House of Representatives, Legislative Hearing on the Reauthorization of Water Desalination Act of 2011, April 17, 2012.

Testimony in Roundable, Senate Committee on Small Business and Entrepreneurship: "Developing and Strengthening High-Growth Entrepreneurship." Feb. 2, 2012.

Testimony to the Federal Communications Commission on The Future of Media and Information Needs of Communities In a Digital Age (GN Docket No. 10-25), Competitive Enterprise Institute. May 7, 2010.

Testimony Before the Committee on Science and Technology, U.S. House of Representatives, The Future of Manufacturing: What is the Role of the Federal Government in Supporting Innovation by U.S. Manufacturers? March 17, 2010.

Comment to the FCC on Preserving the Open Internet and Broadband Industry Practices, January 14, 2010.

Testimony before the Senate Commerce Committee on the Privacy Implications of Online Advertising, July 9, 2008.

Testimony to FCC on Open Internet Practices [Net Neutrality], 2007

The Antitrust Modernization Commission: Proposed Issues for Reform, Comment by the Competitive Enterprise Institute, Submitted to the Antitrust Modernization Commission, September 30, 2004.

"Spam and its Effects on Small Business," Congressional Testimony before the Subcommittee on Regulatory Reform and Oversight of the Committee on Small, October 30, 2003.

"Unsolicited Commercial Electronic Mail Regulation," Congressional Testimony before the House Judiciary Committee, May 10, 2001.

Rethinking Electricity Deregulation: Does Open Access Have It Wired -- Or Tangled? Testimony of Clyde Wayne Crews Jr., Before the Subcommittee on Water and Power Resources, Committee on Resources, U.S. House of Representatives, 1334 Longworth House Office Building July 24, 1999.

The Regulatory Right-to-Know Act: Making Regulatory Disclosure Work: Testimony Before the Subcommittee on National Economic Growth, Natural Resources & Regulatory Affairs, Committee on Government Reform, U.S. House of Representatives, March 24, 1999.

Comment On the Agreement Between Internet Corporation for Assigned Names and Numbers and Network Solutions, by Clyde Wayne Crews Jr., Director of Competition and Regulation Policy, November 28, 1999.

Comments on the Draft Report to Congress on the Costs and Benefits of Federal Regulations, to the Office of Information and Regulatory Affairs, Office of Management and Budget, Submitted by Wayne Crews, September 1, 1997.

Testimony of Clyde Wayne Crews Jr. Before the Subcommittee on Water and Power Resources, Committee on Resources, U.S. House of Representatives. Privatization of the Power Marketing Administrations. May 18, 1995.

Comments of the Competitive Enterprise Institute In the matter of: Recovery of Stranded Costs by Public Utilities and Transmitting Utilities. (Docket No. RM94-7-001.) Delivered by Wayne Crews, August 4, 1995.

Journal/Policy Articles

Libertarianism and Government

Ten Thousand Commandments: An Annual Snapshot of the Regulatory State

- Web page
- Annual Editions

The Other National Debt Crisis: How and Why Congress Must Quantify Federal Regulation, October 2011.

Still Stimulating Like It's 1999: Time to Rethink Bipartisan Collusion on Economic Stimulus Packages. February 2008.

This Liberal Congress Went to Market? a Bipartisan Policy Agenda for the 110th Congress, 2007, 2009, 2011, 2013. (Contributor and editor)

Antitrust: Sherman's March Across the Globe, EU Reporter, September 13-17, 2004, p. 3.

"A Defense of Media Monopoly," Communications Lawyer, vol. 23, no. 3, Fall 2003.

Promise and Peril of a Regulatory Budget, Policy Sciences [Journal], Issue Analysis

Jump, Jive an' Reform Regulation

Antitrust Policy as Corporate Welfare, CEI Antitrust Reform Project, ISSN# 1085-9049, July 1997.

Privacy, Civil Liberties and Cybersecurity

Giving Chase in Cyberspace, Does Vigilantism Against Hackers and File-sharers Make Sense?" *On Point*, No. 109, October 24, 2006

Preventing Identity Theft and Data Security Breaches: The Problem With Regulation, Issue Analysis, May 9, 2006

Communications without Commissions: Issue Analysis, October 18, 2005

Cybersecurity Finger-pointing: Regulation vs. Markets for Software Liability, Information Security, and Insurance, by Clyde Wayne Crews, Jr. Issue Analysis, May 31, 2005

Cybersecurity and Authentication: The Marketplace Role in Rethinking Anonymity — Before Regulators Intervene, Issue Analysis, November 8, 2004, [Journal version]

"Birth of the Digital New Deal: An Inventory of High-Tech Pork-Barrel Spending," by Adam D. Thierer, Clyde Wayne Crews Jr. and Thomas Pearson, Policy Analysis no. 457, October 28, 2002.

"Human Bar Code: Monitoring Biometric Technologies in a Free Society," Policy Analysis no. 452, September 17, 2002.

"The Digital Dirty Dozen: The Most Destructive High-Tech Legislative Measures of the 107th Congress," by Clyde Wayne Crews Jr. and Adam D. Thierer, Policy Analysis no. 423, February 4, 2002.

"Why Canning "Spam" Is a Bad Idea," Policy Analysis no. 408, July 26, 2001.

"The Antitrust Terrible 10: Why the Most Reviled "Anti-competitive" Business Practices Can Benefit Consumers in the New Economy," Policy Analysis no. 405, June 28, 2001.

"Electric Avenues: Why "Open Access" Can't Compete," Policy Analysis no. 301, April 13, 1998.

Competitive Power Journal

Electricity Journal [2 articles]

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2010

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reportion requires

Open to Public

| Α | For | the 2010 calen | dar year, or tax year beginning Oct 1 , 2010, and endin | | | 1000 | mspecuoi | |
|---------------------------|---------------------|---|---|------------|-----------------------------------|-------------|----------------------|-------|
| В | Check | k if applicable: | C Name of organization COMPETITIVE ENTERPRISE INSTITUTE | g Sep | | | 2011 | |
| | | Address change | Doing Business As | | l . | | ication Number | |
| | | Name change | Mumber and street to D.O. b. 17 | | | 13517 | | |
| | | nitial return | 1899 L ST, NW - 12TH FLOOR | urte | E Telepho | | | |
| | | Ferminated | Pit I | | (20) | 2) 33 | 1-1010 | |
| | - | Amended return | WACHTNOMON | | | | | |
| | | Application pending | 50 20030 | | G Gross re | ceipts \$ | 5,350,063 | 3. |
| | | supercation pending | | | a group return | | ites? Yes | X No |
| $\overline{}$ | Tax | -exempt status | y research | | affiliates incl attach a list. | | Yes Yes | No |
| 'n | | | X 501(c)(3) 501(c) () → (insert no.) 4947(a)(1) or 527 | | oranger a real | | occountry | |
| ĸ | | | | | exemption nu | mber - | | |
| | art I | m of organization: | | n: 1984 | M s | tate of leg | al domicile: DC | |
| 150 | | Summar | | | | | | |
| | 1 | DEDT CAME | be the organization's mission or most significant activities: PUBLIC PC | LICY I | RESEAR | CH_AN | ND EDUCAT | CION |
| Activities & Governance | | DEDICATE | D TO THE PRINCIPLES OF FREE ENTERPRISE AND LI | MITED | GOVERN | MENT | | |
| ž | | | | | | | | |
| ğ | 2 | Cheek this ha | | | | | | |
| ĕ | 3 | Number of vo | x In the organization discontinued its operations or disposed of mor | e than 25 | 5% of its į | net asse | ets. | |
| 9 6 | 4 | Number of inc | ting members of the governing body (Part VI, line 1a) | | | 3 | | 9 |
| ě | 5 | Total number | of individuals employed in calendar year 2010 (Part V, line 16) | | | | | 7 |
| 춫 | 6 | Total number | of volunteers (estimate if necessary) | | | 6 | | 32 |
| ĕ | 7a | rotal unrelate | u business revenue from Part VIII. column (C) line 12 | | | 7a | | 0 |
| | b | Net unrelated | business taxable income from Form 990-T, line 34. | | | 7 b | | 0. |
| | | | | D. | ior Year | 7.0 | Current V | |
| | 8 | Contributions | and grants (Part VIII, line 1h) | | ,179,9 | 06 | Current Ye | |
| Revenue | 9 | Program servi | ce revenue (Part VIII, line 2g) | | ,113,3 | 00. | 5,224, | 185. |
| š | 10 | investment in | come (Part VIII, column (A), lines 3, 4, and 7d) | | 10,8 | 30. | 1.4 | 572. |
| Œ | 11 | Other revenue | (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 56,4 | | | 905. |
| _ | 12 | revenue | add lines 8 through 11 (must equal Part VIII, column (A), line 12). | 4. | ,247,2 | | 5,349, | |
| | 13 | Grants and sir | milar amounts paid (Part IX, column (A), lines 1-3) | | 44,8 | | 0,010, | 001.1 |
| | 14 | Benefits paid | to or for members (Part IX, column (A), line 4) | | | | | |
| 10 | 15 | Salaries, other | compensation, employee benefits (Part IX, column (A), lines 5-10) | 2. | 285,9 | 34. | 2,662, | 246 |
| Expenses | 16a | Professional fi | undraising fees (Part IX, column (A), line 11e) | | 25,5 | | | 353. |
| ē | ь | Total fundraisi | ng expenses (Part IX, column (D), line 25)► 559,323. | | 20,0 | | 21, | 333. |
| ũ | 17 | Other expense | s (Part IX, column (A), lines 11a-11d, 11f-24f) | - | 000.0 | | | |
| | 18 | Total expense | s. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 976,59 | | 2,174, | |
| | 19 | Revenue loss | expenses Subtract line 19 from Eq. 10 | | 332,9 | | 4,863, | |
| bő | | ryeveride less | expenses. Subtract line 18 from line 12 | | -85,7 | | | 765. |
| a s | 20 | Total assets (6 | Part V line 16) | | of Current | | End of Ye | |
| Net Assets Fund Balanc | 21 | Total liabilities | Part X, line 16) | 2, | 063,90 | | 2,560, | |
| 野 | | | | | 88,98 | 31. | 170, | 683. |
| _ | rt II | Cianature | fund balances. Subtract line 21 from line 20. | 1, | 974,92 | 25. | 2,389, | 911. |
| | | Signature | | | | | | |
| comp | r pensi lete. Di | ties of perjury, I dec eclaration of prepare | lare that I have examined this return, including accompanying schedules and statements, and to the ir (other than officiar) is based on all information of which preparer has any knowledge. | best of my | knowledge a | nd belief, | it is true, correct, | and |
| | | | | | | | | |
| Sig | n | Signature | of officer | Dete | | | | |
| Hei | | | | Date | | | | |
| | | Type or p | rint name and title. | | | | | |
| | | Print/Type pre | manufa nama | | | Lee | | |
| Pai | 4 | 1 | - | | heck | ir PTI | IN . | |
| | o pare | | . BURKHARDT, CPANEW C. Buchardt, CAA 4/17/1 | 3 9 | elf-employed | | | |
| Use | On | lv. | Hendershot, Burkhardt & Reed, CPAs | | | | | |
| | | Firm's address | The stop desired ballo | F | irm's EIN | | | |
| | the " | DP # " ' | Manassas VA 20109 | P | thone no. (| 703) | 361-159 | 2 |
| мау | the II | no discuss this | return with the preparer shown above? (see instructions) | | | 5 | X Yes | No |

| Part III Control Competitive E | NTERPRISE INSTITUTE | 52-135178 | 5 Page |
|---|--|--|--------------------------------------|
| Part III Statement of Program | Service Accomplishments | | |
| Check if Schedule O contain | s a response to any question in this Part III | | |
| one by describe the organization's n | nission: | | |
| COMPETITIVE ENTERPRISE | INSTITUTE IN A NON-PROFIT PUBLIC | C_POLICY ORGANIZATION | DEDICATED |
| TO THE PRINCIPLES OF F | REE ENTERPRISE AND LIMITED GOVER | RNMENT, (see schedu) | le 0.) |
| | | | |
| | | | |
| 2 Did the organization undertake any | significant program services during the year which w | vere not listed on the prior | |
| Form 990 or 990-EZ? | | | Yes X No |
| ii res, describe these new services | s on Schedule O. | | 103 21 110 |
| 3 Did the organization cease conducti | ng, or make significant changes in how it conducts, | any program services? | Yes X No |
| If 'Yes,' describe these changes on: | Schedule O. | | |
| 4 Describe the exempt purpose achiev and 501(c)(4) organizations and sec expenses, and revenue, if any, for e | vernents for each of the organization's three largest tion 4947(a)(1) trusts are required to report the amo each program service reported. | program services by expenses. Sount of grants and allocations to d | ection 501(c)(3) thers, the total |
| a (Code:) (Expenses \$_ | 3,897,259. including grants of \$ | 0.)(Revenue \$ | 0. |
| ENVIRONMENTAL POLICY: | | | |
| SEEKS TO ANALYZE AND P | ROMOTE PROPERTY-BASED APPROACHES | TO | |
| ENVIRONMENTAL PROTECTI | ON AS WELL AS EXPLORING METHODS | OF PRESERVING | |
| BOTH INDIVIDUAL LIBERT | Y AND THE ENVIRONMENT. | | |
| | | | |
| HEALTH AND SAFETY: | | | |
| SEEKS TO ANALYZE THE O | FTEN UNRECOGNIZED TOLL OF OVER-R | EGULATION ESPECIALLY | |
| IN TERMS OF REDUCED HE | ALTH AND SAFETY. | | |
| | | | |
| LEGAL AND CONSTITUTION | AL STUDIES: (SEE SCHEDULE O.) | | |
| | | | |
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| b (Code:) (Expenses \$ | including grants of \$ | \ (Revenue \$ | |
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| - 10-1 | | | |
| c (Code:) (Expenses \$_ | including grants of \$ |) (Revenue \$ | |
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| d Other program assists (f) | | | |
| | | | |
| Id Other program services. (Describe in (Expenses \$ | | (Revenue \$ | |

Part IV Checklist of Required Schedules

| | | | Yes | No |
|-------|--|------|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?f 'Yes,' complete | . 1 | U | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) | 2 | X | |
| 3 | | 3 | | х |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II. | 4 | x | |
| 5 | | 5 | K | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? "Yes," complete Schedule D, Part I | 6 | | v |
| 7 | | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets?f 'Yes,' complete Schedule D, Part III | 8 | | x |
| 9 | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? Yes, complete Schedule D, Part IV | 9 | | |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments@Yes,' complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable. | ., | | î |
| | a Did the organization report an amount for land, buildings and equipment in Part X, line 10% 'Yes,' complete Schedule D, Part VI | 11 a | x | |
| | b Did the organization report an amount for investments- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. | 11 ь | | х |
| | c Did the organization report an amount for investments- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. | 11 c | | х |
| | d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. | 11 d | | х |
| | e Did the organization report an amount for other liabilities in Part X, line 253f 'Yes,' complete Schedule D, Part X | 11e | | × |
| | f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)3f 'Yes,' complete Schedule D, Part X | 11 f | | х |
| | a Did the organization obtain separate, independent audited financial statements for the tax year of 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12a | х | |
| | b Was the organization included in consolidated, independent audited financial statements for the tax year# 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | х |
| | Is the organization a school described in section 170(b)(1)(A)(ii)?// 'Yes,' complete Schedule E | 13 | | Х |
| | a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States 7/1 'Yes,' complete Schedule F, Parts I and IV | 14b | | х |
| | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV | 15 | | х |
| 16 | individuals located outside the United States?/f 'Yes,' complete Schedule F, Parts III and IV. | 16 | | х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). | 17 | х | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. | 18 | | х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9alf 'Yes,' Complete Schedule G, Part III. | 19 | | х |
| | aDid the organization operate one or more hospitals?If 'Yes,' complete Schedule H | 20 | | Х |
| BAA | olf "Yes" to line 20a, did the organization attach its audited financial statements to this return Rote. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) | 20 ь | | |
| DOM:N | TELEGRAD TOTAL TOT | _ | | |

Form 990 (2010) COMPETITIVE ENTERPRISE INSTITUTE

Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-----|--|------------|-----|------|
| 21 | United States on Part IX, column (A), line 1?/f 'Yes,' complete Schedule I, Parts I and II | 21 | | х |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. | 22 | | х |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? "Yes," complete | | х | - 21 |
| 24 | a 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, and that was issued after December 31, 2002% 'Yes,' answer lines 24b through 24d and complete Schedule K. If No, go to line 25. | | ^ | |
| - | b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a 24b | - | X |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | | |
| | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24c 24d | | |
| | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | х |
| 1 | b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ# '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 | | х |
| 27 | | 27 | | x |
| | 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): | Ī | | |
| | A current or former officer, director, trustee, or key employee? Yes, complete Schedule L, Part IV | 28a | | х |
| ı | A family member of a current or former officer, director, trustee, or key employee?/ 'Yes,' complete Schedule L, Part IV | 28ь | | x |
| | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner?/f 'Yes,' complete Schedule L, Part IV | 28c | | x |
| 29 | The state of the s | 29 | | Х |
| | 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 | and cease operations in res, complete Schedule N, Part I | 31 | | Х |
| | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? '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)? | 35 | ^ | Х |
| | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?/f 'Yes,' complete Schedule R, Part V, line 2 | | | |
| 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 | | х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes?If 'Yes,' complete Schedule R, Part VI | 37 | | x |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? | 38 | х | |
| 3ΔΔ | | | | |

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

| b Enter the number of Forms W-2G included in line Ia. Enter -0- if not applicable. 1b | 1 | a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. | 1.1 | E a c | Yes | No |
|--|------|--|---|-------|-----------|-------|
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Strate. 2 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Strate. 2 In the strate of the calendary year ending with or within the year covered by the seturn. 3 In the strate of | | b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | 100 | |
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2 | | | | | | 1 |
| 2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax State | | (gambling) winnings to prize winners? | s and reportable gaming | 10 | v | 100 |
| bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, If the sum of lines Is and 2a is greater than 250, you may be required tex-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a filmancial account in a foreign country (such as a barik account, securities account, or other financial account)? 4b If Yes, either the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization from the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5b Was the organization that was seen as party to a prohibited tax shelter transaction? 5b X 5c If Yes, it on line San 5D, did the organization file Form 8886-T? 5c Line See, the organization have annual gross receipts that are normally greater than \$100.000, and did the organization solical any conflictations that were not tax deductible? 5c Line See Total Conflicts and the organization file form 8867-T? 5c Line See, did the organization include with every solicitation an express statement that such contributions or gifts were not lax deductible contributions under section 170(c). 5c Line to organizations that may receive deductible contributions under section 170(c). 5c Line to organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5c Line to organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to t | 2 | a Enter the number of employees reported on Form W.3. Transmittal of Wasser J.T., O | 20 | | ै | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required tes-file, see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a | | b If at least one is reported on line 2a, did the organization file all required federal employment | t toy returne? | 26 | v. | 100 |
| 3a D the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes' has if filed a Form 990-Tr for this year? If Wo, Provoke an explanation in Schedule O. 3b If Yes' has if filed a Form 990-Tr for this year? If Wo, Provoke an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5b If Yes', enter the name of the foreign country: 5ee instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to prohibited tax shelter transaction at any time during the tax year? 5a D Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X 5c If Yes', on line Sao FD, dut the organization file Form 8866-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5c Dest the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 5c Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 5c Did the organization on the payor? 5d If Yes', did the organization notify the donor of the value of the goods or services provided? 5c Did the organization payment in excess of \$75 made party as a contribution and partly for goods and services provided? 5d If Yes', indicate the number of Forms 8282 filed during the year. 5d If Yes', indicate the number of Forms 8282 filed during the year. 5d If Yes', indicate the number of Forms 8282 fil | | Note. If the sum of lines 1a and 2a is greater than 250, you may be required too file (see inc. | tructions) | 20 | Α. | |
| b If Yes' has if filed a Form 990-T for this year? If Wo, *provide an explanation in Schedule O.** 4 At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 b X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c if Yes, *to line 5 ao r 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c if Yes, *to line 5 ao r 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c if Yes, *to line 5 ao r 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 c 5 | 3 | a Did the organization have unrelated business gross income of \$1,000 or more during the year | r? | 2. | 1000 | v |
| 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)? 4b If Yes, enter the name of the foreign country; but have a bank account, securities account, or other financial account)? 5re instructions for 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 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X 6b 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? 6c Does the organization that we are not tax deductible? 7 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? 7 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? 7 Did the organization excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 Did the organization excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 Did the organization excess of \$75 made partly as a contribution in was required to file from \$282? 10 If the organization excess of \$75 made partly as a contribution in was required to file from \$282? 11 Yes, 'did the organization excess of \$75 made partly as a contribution in was required to file from \$282? 12 Did the organization excess of \$75 made partly as a contribution in was required to file from \$282? 13 If the organization in function of the payor? 14 Did the organization in | | bilf 'Yes' has it filed a Form 990-T for this year? If 'Wo,' provide an explanation in Schedule O | | | _ | X |
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| See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X of If Yes, 'to line 5 a or 50, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 a Did the organization that may receive deductible contributions under section 170(c). 8 Did the organization that may receive deductible contributions under section 170(c). 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file or m 8282? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Did the organization received a contribution of qualified intellectual property, did the organization file a form 1082 per premiums, directly or indirectly, on a personal benefit contract? 10 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form 1082 as required? 11 Did the organization maximizing donor advised funds and section 509(a)(3) supporting organization file a form 1084 as a part to the distributions under section 4966? 12 Sponsoring organizations maintaining donor advised funds, a post of the facilities. 13 Did the organization make a distribution of under section 4966? 14 Section 501(c)(27) organizations. Enter: 15 In Initiation fees and capital contributions included on Part VIII, line 12 | | b If 'Yes,' enter the name of the foreign country: ► | maricial accounty: | 48 | G. 11 11. | ^ |
| \$ a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?. \$ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? \$ c If 'Yes,' to line 5a or 5b, did the organization file Form 8896-T? \$ 5 b Des 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? \$ b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? \$ 0 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? \$ b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? \$ c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Porm \$282? \$ d If 'Yes,' indicate the number of Forms \$282 filed during the year. \$ c Did the organization exceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? \$ c Did the organization received a contribution of qualified intellectual property, did the organization file Form \$899 \$ as required? \$ if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1096-C? \$ Sponsoring organizations maintaining donor advised funds and section \$505(x)(3) supporting organization file a Form 1096-C? \$ Sponsoring organizations maintaining donor advised funds and section \$406(x) or paymental form \$400 organization file a Form \$400 organization make any taxable distributions under section 4966? \$ Did the organization make any taxable distributions under section 4966? \$ Did the organization make any taxable distributions included on Part VIII, line 12 \$ Sectio | | | inancial Accounts | | | 100 |
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| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 X glif the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 79 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(aX3) supporting organizations file a supporting organizations maintaining donor advised funds and section 509(aX3) supporting organizations file a supporting organizations maintaining donor advised funds and section 509(aX3) supporting organizations file a Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 Sponsoring organizations make a distribution to a donor, donor advisor, or related person? 9 Sponsoring organizations.Enter: a Initiation fees and capital contributions included on Part VIII, line 12. 10 Section 501(cX7) organizations.Enter: a Gross income from members or shareholders. b 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). 11 Section 501(cX72) qualified honprofit health insurance issuers. a Is the organization in locensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Did the organization receives on hand. | | | | 7c | | х |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? glif the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? hif the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizationsDid the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizationDid the supporting organizations maintaining donor advised funds are supporting organization, have excess business boldings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a | ' | Trives, Indicate the number of Forms 8282 filed during the year | 7d | 1 | | 134 |
| glif the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Sponsoring organization make any taxable distributions under section 4966? B Did the organization make a distribution to a donor, donor advisor, or related person? 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.) 12 Section 4947(a)(1) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13 C Enter the amount of reserves on hand. 14 Did the organization receive any payments for indoor tanning services during the tax year? | | EDIC the organization receive any funds, directly or indirectly, to pay premiums on a personal I | benefit contract? | 7e | | х |
| h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations) id the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Build the organization make any taxable distribution sunder section 4966? Build the organization make and istribution to a donor, donor advisor, or related person? Build the organization make any taxable distribution of a donor, donor advisor, or related person? Build the organization make any taxable distribution of a donor, donor advisor, or related person? Build the organization make any taxable distribution of a donor, donor advisor, or related person? Build the organization make any taxable distribution of a donor, donor advisor, or related person? Build the organization make any taxable distributions under section 4966? Build the organizations.Enter: Build the organization fees and capital contributions included on Part VIII, line 12 Build the organization of the sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Build the organization incensed to issue qualified health plans in more than one state? Build the organization incensed to issue qualified health plans in more than one state? Build the organization in silicensed to issue qualified health plans in more than one state? Build the organization in silicensed to issue qualified health plans in more than one state? Build the organization in silicensed to issue qualified health plans in more than one state? Build the organization in silicensed to issue qualified health plans in more than one state? Build the organization in silicensed to issue qualified health plans in more than one state? Build the organization in silicense | | Did the organization, during the year, pay premiums, directly or indirectly, on a personal beni | efit contract? | 71 | | Х |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations in the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 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 b | | as required; | | 7g | | |
| supporting organization, or a orbor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 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? 9b X Section 501(c)(X) 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. 10b 11 Section 501(c)(X) 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) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand. 13b c Enter the amount of reserves on hand. | ١ | of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C? | organization file a | 7h | | |
| 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 b X 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. 10 b 11 Section 501(c)(2) 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.) 12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. c Enter the amount of reserves on hand. 13 b 14 a Did the organization receive any payments for indoor tanning services during the tax year? 14 a Did the organization receive any payments for indoor tanning services during the tax year? | 8 | SUDDUCTION ORGANIZATION, OF A CONOC SOVISED fund maintained by a energotion propriestion, by | g organizationsDid the ave excess business | 8 | JF.74 | v |
| b Did the organization make a distribution to a donor, donor advisor, or related person? 9b X 10 Section 501(c)(7) organizations.Enter: 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: 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.) 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 13 Section 501(c)(29) qualified nonprofit health insurance Issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand. 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X | 9 | Sponsoring organizations maintaining donor advised funds. | | - 3 | 3.7 | - |
| 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 | | Did the organization make any taxable distributions under section 4966? | | 9a | | x |
| 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 | ŀ | Did the organization make a distribution to a donor, donor advisor, or related person? | | | | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10 | Section 501(c)(7) organizations. Enter: | | | 177.2 | - |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 2 | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | 28 | |
| 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders | ŀ | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | 33 | |
| 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 b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | | | | | | |
| 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) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 15 If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 16 If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. 17 Is Section 501(c)(29) qualified nonprofit health insurance issuers. 18 Is the organization licensed to issue qualified health plans in more than one state? 19 Note, See the instructions for additional information the organization must report on Schedule O. 19 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 18 Is the organization is licensed to issue qualified health plans. 19 Is It is a supplied to the states in the states in the organization is licensed to issue qualified health plans. 19 Is It is a supplied to the states in the organization is licensed to issue qualified health plans. 19 Is It is a supplied to the states in the organization is licensed to issue qualified health plans. 19 Is It is a supplied to the organization is licensed to issue qualified health plans. 19 Is It is a supplied to the organization in the organization is licensed to issue qualified health plans. 10 Is It is a supplied to the organization in the organization in the organization is licensed to issue qualified health plans. 10 Is It is a supplied to the organization in the organization in the organization in the organization is licensed to issue qualified health plans. 11 Is It is a supplied to the organization in the organ | | Gross income from members or shareholders | 11a | | 24 | |
| 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 | t | Gross income from other sources (Do not net amounts due or paid to other sources | | | | |
| b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12 a | | | 12a | | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. c Enter the amount of reserves on hand. 13b c Enter the amount of reserves on hand. 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X | b | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | | 12.0 | Sec. 2. | Ş S |
| a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. c Enter the amount of reserves on hand. 13b c Enter the amount of reserves on hand. 14a Did the organization receive any payments for indoor tanning services during the tax year? | 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | 750 | |
| Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | | 13a | | |
| b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | Note. See the instructions for additional information the organization must report on Schedule | 0. | 100 | | di se |
| c Enter the amount of reserves on hand. 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X | b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | | |
| 14a Did the organization receive any payments for indoor tanning services during the tax year? | c | Fatan the court of | | | | |
| b If 'Yes,' has it filed a Form 720 to report these payments?If 'No,' provide an explanation in Schedule Q | 14 a | | | 14a | | x |
| | b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sci | nedule O | _ | | ** |

Form 990 (2010) COMPETITIVE ENTERPRISE INSTITUTE Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI... Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year...... 1a 9 **b** Enter the number of voting members included in line 1a, above, who are independent..... 7 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 х 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 Did the organization make any significant changes to its governing documents 4 Χ since the prior Form 990 was filed?.... Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 х Does the organization have members or stockholders?.... 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a х **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons?..... 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Х **b** Each committee with authority to act on behalf of the governing body?..... Х 8ь Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates?..... 10 a х 10 b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?..... 11 a х b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Х b 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# 'Yes,' describe in Schedule O how this is done 12 c Х 13 Does the organization have a written whistleblower policy?..... 13 Х Does the organization have a written document retention and destruction policy?.... 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official..... 15 a Х b Other officers of key employees of the organization. 15 b Х If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.... 16a bilf 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.... 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed. 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. X Upon request Another's website 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. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: COMPETITIVE ENTERPRISE INSTITUTE 1899 L ST, NW, 12TH FLOOR WASHINGTON DC 20036 (202) 331-1010

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

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

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 or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who
 received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
 organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if neither the organization | n nor any | relate | ed o | rgan | izat | tion co | mpe | ensated any current o | fficer, director, or tru | stee. |
|--|--|--------------------------------------|-----------|--------|-----------------|-------------------------|--------|---|--|---|
| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
| Name and title | Average hours per week (describe hours for related organiza- tions in Schedule O) | Po sidwict of frustee or director | | _ | id Key employee | app Highest companieded | *** | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated antount of other compensation from the organization and related organizations |
| (1) FRED L. SMITH JR. | | | | | | | | | | |
| PRESIDENT | 40.00 | X | | Х | Х | X | | 208,230. | 0. | 11,710. |
| C2) MICHAEL GREVE BOARD MEMBER | 1.00 | x | | | | | | 2,450. | 0. | 0. |
| (3) WILLIAM DUNN | | | | | | | | 2,7301 | 0, | 0. |
| BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | 0. |
| _(4) DR. LEONARD LIGGIO | | | | | | | | · · | 0. | 0. |
| BOARD MEMBER | 1.00 | х | | | | | | 0. | 0. | 0. |
| (5) DR. THOMAS GALE MOORE | | | | | | | | 0. | 0. | 0. |
| BOARD MEMBER | 1.00 | х | | | | | | 0. | 0. | _ |
| (6) FRANCES B. SMITH | | | | | | | | 0. | 0. | 0. |
| BOARD MEMBER | 1.00 | x | | | | | | 18,000. | 0. | |
| (7) JAMES CURLEY | | | | | | | | 10,000. | | 0. |
| BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | |
| (8) C. WAYNE CREWS | | | | | | | | · · | | 0. |
| DIRECTOR OF TECH | 40.00 | x | | x | | х | | 147,940. | 0. | 10 122 |
| (9) SAM KAZMAN | | | | - | | | | 147,540. | 0. | 10,137. |
| DIRECTOR OF REG | 40.00 | х | | x | | x | | 108,073. | 0. | 10 115 |
| (10) MYRON EBELL | 10100 | | | | | A | | 100,075. | 0. | 10,115. |
| DIRECTOR OF ENERGY | 40.00 | | | | | | | 102,000. | 0. | 2 440 |
| (11) IAIN MURRAY | | | | | | | | 102,000. | 0. | 2,440. |
| VP/DIRECTOR | 40.00 | | | | х | | | 87,712. | 0. | 15,158. |
| (12) JULIE TAYLOR | 30100 | | | | - | | \neg | 01,112. | · · · | 15,158. |
| VP/DEVELOPMENT | 40.00 | | | | х | | | 50,400. | 0. | |
| (13) JIM VON EHR | 32100 | | | \neg | - | | | 30,400. | 0. | 0. |
| BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | |
| (14) THOMAS HAYNES | 2100 | | | \neg | - | | \neg | | 0. | 0. |
| BOARD MEMBER | 1.00 | x | | | - 1 | | | 0. | 0. | |
| (15) MEGAN MCLAUGHLIN | | | | \neg | | | | 0. | | 0. |
| SR DIR, FINANCE & OPS | 40.00 | | | | х | | | 60,720. | 0. | 5 207 |
| (16) | | | | | | | | 00,720. | 0. | 5,387. |
| (ID | | | \forall | + | | | + | | | |
| BAA | | | | | | | | | | |

BAA

| (A) | | vey | | | | 65, | an | u nignest con | npensated E | mploy | ees (| ont) |
|---|---|-------|-------------|--------------|-------|------------|----------|---|---|----------|--|---|
| (A) | (B) | | | | c) | | | (D) | (E) | 1 | (F) |) |
| Name and title | Average hours per week (describe hours for related organi- zations in Sch O) | | | Officer | - | P smployee | T | Reportable compensation from the organization (W-2/1099-MSC) | Reportable compensation fro related organizatio (W-2/1099-MISC | m ons | Estima amount of compens from to organize and retorganize | f other ation he ation ated |
| | Sch (0) | stee | rustes | | * | perseted | | | | | | |
| | | | | | | | | | | + | | |
| | | | | | | | | | | + | | |
| _(20) | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | |
| (25) | | | | | | | | | | + | | |
| (26) | | | | | | | | | | + | | |
| (27) | | | 1 | | | | | | | + | | |
| (28) | | | | | | | | | | + | | |
| (29) | | | | 1 | | | | | | | | |
| 1 b Sub-total | | | | | | | - | 785,525. | | | 54. | 947. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | - | | | | | |
| d Total (add lines 1b and 1c) 2. Total number of individuals (including but not limited | to thee | e lie | t and | | | | - | 785,525. | |). | 54, | 947. |
| 2 Total number of individuals (including but not limited from the organization ► 4 | to thos | e iis | tea | abo | ve) | wnc | rec | erved more than S | \$100,000 in rep | ortable | compen | sation |
| | | | | | | | | | | | Yes | No |
| Did the organization list any former officer, director o on line 1a? If 'Yes,' complete Schedule J for such inc | r trustee dividual. | e, ke | у е | mpk | oye | e, or | hig | hest compensated | d employee | | 3 | x |
| 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual | ortable an \$150 | com | pen)?/f | sati 'Yes | on a | and mpl | othe | er compensation fr Schedule J for | rom | | | |
| Did any person listed on line 1a receive or accrue co for services rendered to the organization?/f 'Yes,' cor | mpensa | tion | fro | m ại | jy u | nrel | atec | d organization or i | ndividual | | 1 X | 100 |
| Section B. Independent Contractors | nplete : | Sche | rduk | e J | for s | uch | per | son | | | 5 | X |
| Complete this table for your five highest compensate compensation from the organization. | d indep | ende | ent o | cont | ract | ors | that | received more that | an \$100,000 of | | | |
| (A) | | | | | | | T | (B) | | | (C) | |
| Name and business address | | | | | | | + | Description of | f services | Com | pèńsati | on |
| | | | | | | | | | | | | |
| | | | | | | | 1 | | | | | |
| | | | | | | | \pm | | | | | |
| 2 Total number of independent contractors (including b \$100,000 in compensation from the organization► | ut not li | mite | d to | tho | se | iste | d ab | ove) who received | d more than | | | |

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tal under sections 512, 513, or 514 |
|---------------------------|--|--------------------------|---------------|------------------------|--|---|---|
| ۳ اع | a Federated campaigns. | | | | | | |
| ē | b Membership dues | | | | | | |
| 2 | c Fundraising events | | | | | | |
| ₹ | d Related organizations. | | | | | | |
| 8 | e Government grants (contributi | | | | | | |
| AND OTHER SIMILAR AMOUNTS | f All other contributions, gifts, (similar amounts not included | grants, and above 1 f | 5,224,185. | | | | |
| 9 | g Noncash contributions include | | -,,, | | | | |
| | h Total. Add lines 1a-1f. | | > | 5,224,185. | | | |
| 2 | | | Business Code | 0,001,1001 | | | |
| 2 | a | | | | | | |
| 5 1 | b | | | | | | |
| } { | c | | | | | | |
| 8 4 | d | | | | | | |
| <u> </u> | e | | | | | | |
| 3 1 | f All other program service | e revenue | | | | | |
| _ | g Total. Add lines 2a-2f. | | > | | | 237a 701.5 | 5000 0000000 |
| 3 | Investment income (incl | luding dividends, | interest and | | | | |
| | otner similar amounts) | | | 14,485. | 0. | 0. | 14,485. |
| 4 | Income from investmen | | | | | | |
| 5 | Royalties | | | | | | |
| | . C Dt | (i) Real | (ii) Personal | | | | |
| | Gross Rents | 5,225. | | | | | |
| | Less: rental expenses. | | | | | | |
| | Rental income or (loss) | 5,225. | | | | | |
| ۱ ' | d Net rental income or (lo | | | 5,225. | 5,225. | 0. | 0. |
| 72 | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | assets other than inventory . | 488. | 0. | | | | |
| 1 | Less: cost or other basis | | | | | | |
| ١. | and sales expenses | | 401. | | | | |
| 1 3 | Gain or (loss) | 488. | | | is displaying | | |
| 8 8 | Net gain or (loss) Gross income from fund | | | 87. | 87. | 0. | 0. |
| | (not including, \$ of contributions reported | | / | | | | |
| ь | See Part IV, line 18 | | 1 | | | | |
| Ь. | Less: direct expenses | | | | | | |
| | : Net income or (loss) from | | ante b | | | - 1946 District | |
| | | | 911LS | | | | |
| 94 | Gross income from gami See Part IV, line 19 | ing activities. | 15 | | | Base Land | |
| | Less: direct expenses | | | | | | |
| | Net income or (loss) from | | es | | | | |
| | Gross sales of inventory | less returns | | BENEFIT CHE | \$165 8.80 Price 1 | 1240 10141 | energy and the second |
| | and allowances | a | 3,713. | | | | |
| | Less: cost of goods sold | | 0. | | | | |
| C | Net income or (loss) from | | ory | 3,713. | 3,713. | 0. | 0. |
| 1 | Miscellaneous Revenue | 0 | Business Code | throughhead a | 30 mg 10 mg 10 mg | | |
| 1 | MISCELLANEOUS | | 00099 | 38,029. | 38,029. | 0. | 0. |
| | DETMDHDOED PADE | NSES 90 | 00099 | 63,938. | 63,938. | 0. | 0. |
| | REIMBURSED_EXPE | | | | | | |
| b | | | | | | | |
| b c d | All other revenue | | | | | | |
| b c d | | | | 101,967. 5,349,662. | | | |

Part IX Statement of Functional Expenses

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

| Do 6b, | not include amounts reported on lines 7b, 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 | | onportoos. | general expenses | expenses |
| 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 | | | 1 | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 901,082. | 767,873. | 55,391. | 77,818. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | ,010 |
| 7 | Other salaries and wages | 1,358,637. | 1,157,786. | 83,517. | 117,334. |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | 00/01/1 | 11,7554. |
| 9 | Other employee benefits | 247,648. | 211,547. | 12,524. | 23,577. |
| 10 | Payroll taxes | 154,879. | 127,406. | 12,675. | 14,798. |
| | Fees for services (non-employees): | | | | 247.50. |
| | Management | | | | |
| - | Legal | 16,453. | 14,190. | 2,263. | 0. |
| | Accounting | 71,903. | 6,507. | 56,945. | 8,451. |
| (| Lobbying | | | | |
| • | Professional fundraising services. See Part IV, line 17 | 27,353. | | | 27,353. |
| | Investment management fees | | | | |
| 9 | Other | 268,220. | 225,312. | 32,323. | 10,585. |
| 12 | Advertising and promotion | | 240. | 0. | 0. |
| 13 | Office expenses | 31,030. | 24,544. | 1,821. | 4,665. |
| 14 | Information technology | 115,442. | 98,439. | 105. | 16,898. |
| 15 | Royalties | | | | |
| 16 17 | Occupancy | 552,161. | 423,897. | 49,424. | 78,840. |
| 18 | Travel | 77,707. | 46,628. | 1,173. | 29,906. |
| | expenses for any federal, state, or local public officials | | | | |
| | Conferences, conventions, and meetings | 287,968. | 224,445. | 24,569. | 38,954. |
| 20 | | | | | |
| | Payments to affiliates | | | | |
| 22 | | 23,528. | 18,410. | 1,756. | 3,362. |
| | Insurance | 23,546. | 17,945. | 2,241. | 3,360. |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) | | | | |
| | SPECIAL PROJECTS | 230,058. | 230,058. | 0. | 0. |
| | POSTAGE | 36,368. | 8,389. | 549. | 27,430. |
| | BOOKS AND SUBSCRIPTIONS | 45,547. | 36,859. | 2,418. | 6,270. |
| | DIRECT MAIL | 233,531. | 156,791. | 52,177. | 24,563. |
| е | PRINTING | 97,763. | 67,574. | 1,120. | 29,069. |
| | All other expenses | 62,833. | 32,419. | 14,324. | 16,090. |
| | Total functional expenses. Add lines 1 through 241 | 4,863,897. | 3,897,259. | 407,315. | 559,323. |
| 26 | Joint costs. Check here ► if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | 260,884. | 156,791. | 52,177. | 51,916. |
| BAA | | 200,0014 | 200/1011 | Jul 1111 | Form 990 (2010) |

Part X Balance Sheet

| _ | _ | | | | (A) Beginning of year | | (B) End of year |
|----------------------------|----------------|---|-------------------------|---------------|--------------------------|----------------|--------------------|
| | 1 | Cash — non-interest-bearing | | | 111,702. | 1 | 935,197 |
| | 2 | Savings and temporary cash investments | , , | | 1,340,603. | 2 | 983,940 |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | 413,050. | 4 | 487,046 | | |
| | 5 | Receivables from current and former officers, directo and highest compensated employees. Complete Part | | 5 | | | |
| | 6 | Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and control sponsoring organizations of section 501 (c)(9) volunta organizations (see instructions). | | | | | |
| S | 7 | Notes and loans receivable, net | | | | 6 | |
| A S S E T S | 8 | Inventories for sale or use | | | | 7 | |
| T S | 9 | Prepaid expenses and deferred charges | | | 20.024 | 8 | |
| - 1 | 10- | | | | 38,834. | 9 | 56,582. |
| | 104 | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | 253,749. | | | |
| | b | Less: accumulated depreciation | 10b | 155,920. | 113,878. | 10- | 07.000 |
| - 1 | 11 | Investments — publicly traded securities | | | | 11 | 97,829. |
| - | 12 | Investments – other securities. See Part IV. line 11 | | | | 12 | |
| - 1 | 13 | Investments - program-related. See Part IV, line 11. | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 4E 030 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line | 34) | | 45,839. | 15 | 0. |
| П | 17 | Accounts payable and accrued expenses | 04) | | 88,981. | | 2,560,594. |
| | 18 | Grants payable | | | 00,981. | 17 | 170,683. |
| - 1 | 19 | Deferred revenue | | | | 18 | |
| ١l | 20 | Tax-exempt bond liabilities | | | | 19 | |
| À | 21 | Escrow or custodial account liability. Complete Part I | V of Schoo | dule D | | 20 | |
| Ŧ | 22 | Payables to current and former officers, directors, trus highest compensated employees, and disqualified per of Schedule L | stees, key | | | 21 | |
| Š | 23 | Secured mortgages and notes payable to unrelated the | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third | parties | | | 24 | |
| - | 25 | Other liabilities. Complete Part X of Schedule D | | | | 25 | |
| 4 | 26 | Total liabilities. Add lines 17 through 25 | | | 88,981. | 26 | 170,683. |
| Ĭ | | Organizations that follow SFAS 117, check here > | X and co | omplete lines | | - | 170,003. |
| | | 27 through 29 and lines 33 and 34. | | | | Year E | |
| ŝ | 27 | Unrestricted net assets | | | 1,680,901. | 27 | 1,929,911. |
| | 28 | Temporarily restricted net assets | | 294,024. | 28 | 460,000. | |
| | 29 | Permanently restricted net assets | 234,024. | 29 | 400,000. | | |
| 8 | | Organizations that do not follow SFAS 117, check he | re ► | and complete | | 23 | |
| - 1 | | lines 30 through 34. | | , | | | |
| il | | Capital stock or trust principal, or current funds | | | 11. 75. 7 88.52 | 30 | |
| | 30 | | | | | | |
| - 1 | 30 31 | Paid-in or capital surplus, or land, building, or equipm | ent fund | | I | 31 | |
| ٠. | 31 | Paid-in or capital surplus, or land, building, or equipm | ent fund or other fi | ands. | | 31 | |
| 8 | 31 32 33 | Paid-in or capital surplus, or land, building, or equipm Retained earnings, endowment, accumulated income, Total net assets or fund balances. Total liabilities and net assets/fund balances. | or other fu | ınds | 1,974,925. | 31 32 33 | 2,389,911. |

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| | m 990 (2010) COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 | | _ | |
|-----|--|----------------|-----|------|----------------|
| Pa | rt XI Reconciliation of Net Assets | 25-1331103 | | P | age 1 . |
| | Check if Schedule O contains a response to any question in this Part XI | | | | l. |
| | | | | | JX |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | | 5 7 | 49, | cen |
| 2 | rotal expenses (must equal Part IX, column (A), line 25) | 2 | | 63, | |
| 3 | Nevertue less expenses. Subtract line 2 from line 1 | 9 | | 85, | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 74, | |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | 70, | |
| | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | | | | |
| Pai | rmancial Statements and Reporting | | | 89,9 | |
| | Check if Schedule O contains a response to any question in this Part XII. | | | | |
| | | | | Yes | |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | 1 1 | res | NO |
| | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. | | | | |
| 28 | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | L. · | v |
| t | verte trie organization's financial statements audited by an independent account in | | 2 b | х | X |
| | If 'Yes' to line 2a or 2h, does the organization have a committee that | | 20 | ^ | |
| | *** of the first of its finishcial statements and selection of an independent accountant? | | 2c | | х |
| | If the organization changed either its oversight process or selection process during the tax year, explain Schedule O. | 1 | - | 100 | |
| d | If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis | re issued on a | | | |
| | As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133? | in the Single | 3a | | х |

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.

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Form 990 (2010)

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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

2010

Open to Public Inspection

| | PET | ΙT | IVE ENTE | RP | RISE INSTITU | TE | | | | | E 2 1 | 35178 | E | | |
|-------|---------------|----------------------|---|--------------|--|--|----------------------------|---|-----------|--|-----------------------------|--------------------------------------|---|--------------------------------------|-----------------|
| Par | tl | Re | ason for P | ub | olic Charity Statu | is (All organization | s must | comp | ete thi | s nart | 1 See | inetrue | tions | | _ |
| The o | organ | izat | tion is not a p | riv | ate foundation becar | use it is: (For lines 1 th | rough 11 | check | only on | s bar i | , 500 | msuuc | tions. | | _ |
| 1 | | A ch | nurch, conver | itio | n of churches or ass | ociation of churches de | scribed | irsection | 170/hV | TVAVI | | | | | |
| 2 | | A so | chool describe | ed | in section 170(b)(1)(| A)(ii). (Attach Schedule | F.) | -secuoi | | · A~A. | | | | | |
| 3 | | A ho | ospital or a co | gop | erative hospital serv | rice organization descri | had irea | ction 17 | WENTER | wiii | | | | | |
| 4 | \Box | ٩m | edical resear | ch | organization operate | ed in conjunction with a | hoenital | Lelocorib | od izac | ()(III). 1500-170 | Whater the | | | | |
| | | Harr | ie, city, and s | лац | e: | | | | | | | | | | |
| 5 | \Box | An c | organization of | ope | rated for the benefit emplete Part II.) | of a college or univers | ity owne | d or ope | rated by | a gove | rnment | al unit de | scribed se | ction | |
| 6 | \square | A fe | deral, state, | or I | ocal government or | governmental unit desc | ribed in | ection 1 | 70/hV1V | (AVA) | | | | | |
| 7 | <u></u> | n se | ection 170(b) | nat (1)(| (A)(vi). (Complete P | substantial part of its : art II.) | support t | from a g | overnme | ental un | it or fro | m the ge | neral publi | c describ | ed |
| 8 | 닏 | 4 co | mmunity trus | it d | lescribed insection 1 | 70(b)(1)(A)(vi). (Comple | ete Part I | II.) | | | | | | | |
| 9 | _ " | lune | stment incom 30, 1975. S | ee s | and unrelated busine section 509(a)(2). (Co | | s section | 511 tax | from b | more to ousiness | nan 33- ies acqu | ership fe 1/3% of i iired by t | es, and gro ts support he organiz | ss receip from gros ation afte | ots ss er |
| 10 | \square | ∖n o | organization o | rga | anized and operated | exclusively to test for p | public sa | fety. Se | section | 509/aV/ | 1) | | | | |
| 11 | ш, | nore lesc | organization of publicly sup- cribes the type | ega Ioo | anized and operated rted organizations d | exclusively for the ben escribed in section 509 ation and complete line | efit of, to | perform | n the fu | | | irry out ti 09(a)(3). | he purpose Check the | s of one box that | or |
| | _ a | L | Type I | | b Type II | c Type | III — Fun | ctionally | integra | ted | | d \Box | Type III - | Other | |
| е | ∐ B o s | By co the ecti | hecking this t r than founds ion 509(a)(2). | tio | I certify that the or n managers and oth | ganization is not contro er than one or more pu | | | | | or more | disqual in section | | | |
| f | | | | | | ermination from the IRS | | | | | | | | n, | П |
| g | S | inc | e August 17, | 200 | 06, has the organiza | tion accepted any gift | or contri | bution fr | om anv | of the fi | ollowing | nersons | 7 | | |
| | | | | | | | | | | | | | | Yes N | ło |
| | (i |) | A person with | 10 (| directly or indirectly | controls, either alone or | r togethe | er with p | ersons o | describe | d in (ii) | and (iii) | | ies N | 10 |
| | 0 | i) | below, the g | 040 | errning body or trie st | apported organization?. | | | | | | | 11 a (i) | | |
| | | | A 25% contr | olle olle | er or a person descr | ibed in (i) above? | | | | | | | . 11 g (ii) | | |
| h | , D | my mani | ide the fellow | ina | eu ennity or a person | described in (i) or (ii) | above? | | | | | | . 11 g (iii) | | |
| " | | | | ing | | he supported organizati | ion(s). | | | | | | | | |
| | 00 |) Nar | me of supported organization | | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | organi column your g | is the ization in (i) listed in overning iment? | the organ | ou notify nization in in (i) of upport? | organiz colur organiz | s the sation in in (i) ad in the 3.? | (viii) Amour | nt of support | |
| | | | | _ | | | Yes | No | Yes | No | Yes | No | | | |
| (A) | | | | | | | | | | | | | | | |
| (B) | | | | | | | | | | | | | | | _ |
| (C) | | | | | | | | | | | | | | | _ |
| 4-7 | | | | | | | _ | - | - | | | | | | _ |
| (D) | | | | | | | | | | | | | | | |
| (E) | | | | | | | | | | | | | | | |
| | | | | | | | 19.64.8 | 837 | 30 Y 30 | | . 4.2.2 | | | | _ |
| Total | | | | | | | | | | | | 3600 | | | |
| BAA | For Pa | ape | rwork Reduc | tio | n Act Notice, see the | Instructions for Form | 990 or 9 | 990-EZ. | | 5 | Schedule | A (Form | n 990 or 99 | 0-EZ) 20 | 10 |

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

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

| Se | ction A. Public Support | | | | | | |
|------|---|--|--|----------------------------------|--|---|-------------------|
| beg | endar year (or fiscal year inning in) ► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.') | 3,545,199. | 5,229,933. | 4.401.599 | 4.179.906 | 5 224 195 | 22,580,822. |
| 2 | Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | .,,,,,,,,, | 1,173,300. | 3,224,103. | 22,380,822. |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 3,545,199. | 5,229,933. | 4,401,599. | 4,179,906 | 5.224.185 | 22,580,822. |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | 3,224,100. | |
| 6 | Public support. Subtract line 5 | | | | | | 3,061,812. |
| | from line 4 | | | | | | 19,519,010. |
| Sec | tion B. Total Support | | | | | | 12,019,010. |
| beg | endar year (or fiscal year inning in) ► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 7 | Amounts from line 4 | 3,545,199. | 5,229,933. | 4,401,599. | 4,179,906. | 5,224,185. | 22,580,822. |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. | 77,106. | 27,749. | | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | .,,100. | 21,743. | 42,141. | 19,330. | 19,797. | 186,123. |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 4,618. | 0. | 34,340. | 14,669. | 38,029. | 91,656. |
| 11 | Total support. Add lines 7 through 10 | | 19-75 | | | | 22,858,601. |
| 12 | Gross receipts from related activ | ities, etc (see ins | tructions) | | | | 22,030,001. |
| 13 | organization, check this box and | stop nere | | nd, third, fourth, o | r fifth tax year as | a section 501(c)(| 3) ▶□ |
| | tion C. Computation of Pub | olic Support P | ercentage | | | | |
| 14 | Public support percentage for 20 | 10 (line 6, column | n (f) divided by lin | ne 11, column (f)) | | 14 | 85.39% |
| | Public support percentage from 2 | | | | | | 85.73% |
| 16 a | 33-1/3% support test — 2010. If the and stop here. The organization of | ne organization di qualifies as a pub | id not check the b licly supported or | ox on line 13, an ganization | d the line 14 is 33 | 3-1/3% or more, c | heck this box |
| t | 33-1/3% support test — 2009. If the and stop here. The organization (| ne organization di qualifies as a pub | d not check a boo licly supported or | x on line 13 or 16 ganization | a, and line 15 is 3 | 33-1/3% or more, | check this box |
| | 10%-facts-and-circumstances te- or more, and if the organization of the organization meets the 'facts- | and-circumstano | es' test. The orga | nization qualifies | box an stop here. as a publicly sup | Explain in Part I\ ported organization | / how in ► |
| | 10%-facts-and-circumstances tes or more, and if the organization re organization meets the 'facts-and | -circumstances' | test. The organiza | ation qualifies as | box an stop here. a publicly support | Explain in Part IV | / how the |
| 18 | Private foundation. If the organiz | ation did not ched | k a box on line 1 | 3, 16a, 16b, 17a, | or 17b, check this | s box and see ins | tructions |
| BAA | | | | | | | 90 or 900 EZ 2010 |

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | ction A. Public Support | | ar complete i car | | | | |
|-------|---|-----------------------------|----------------------|---------------------|--|---------------------|---|
| | ndar year (or fiscal yr beginning in)► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | M Total |
| 1 | Gifts, grants, contributions and membership fees received. (Do not include any unusual grants.) | 1, | (-) | (6) 2500 | (a) 2003 | (6) 2010 | (f) Total |
| | Gross receipts from admis- sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 5 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| _ | organization without charge | | | | | | |
| 7: | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. | | | | | | |
| | Add lines 7a and 7b | | | | | | |
| | Public support (Subtract line 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| Calen | dar year (or fiscal yr beginning in)► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 10: | Amounts from line 6 | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 | Total support. (Add ins 9, 10c, 11, and 12.) | | | | | | |
| | First five years. If the Form 990 i | s for the organiza | ation's first, secon | d, third, fourth, o | r fifth tax year as | a section 501(c)(3) | |
| Sec | organization, check this box and tion C. Computation of Pul | | arcentage | | | | |
| | | | | - 13 (D) | | 1 25 | |
| 16 | Public support percentage for 20 | no (iiiie a, columi | Part III See 15 | e is, column (f)) | | 15 | - % |
| Sec | Public support percentage from 2 tion D. Computation of Inve | estment Incor | me Percentage | | | 16 | |
| | | | | | 40) | T T | |
| 10 | Investment income percentage for | ar 2010 (line 100, d | column (1) alvided | by line 13, colun | ın (f)) | 17 | |
| | Investment income percentage fr 33-1/3% support tests – 2010. If is not more than 33-1/3%, check | the organization | did not check the l | hoy on line 14 se | nd line 15 is more | than 22 1/2% and | line 17 |
| b | is not more than 33-1/3%, check 33-1/3% support tests – 2009. If line 18 is not more than 33-1/3%, | the organization of | did not check a bo | v on line 14 or lin | na 10a and lina 1 | 6 is more than 22 t | 1/29/ ond |
| 20 | Private foundation. If the organiz | ation did not che | ck a box on line 1 | 4. 19a. or 19b. ch | mes as a publicly seck this box and | supported organiza | |

| Schedule A (Form 990 or 990-EZ) 2010 COMPETITIVE ENTERPRISE INSTITUTE Part IV Supplemental Information Complete this part to provide the evaluations | 52-1351785 | Page 4 |
|--|--|--------|
| Part IV Supplemental Information. Complete this part to provide the explanations re Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any (See instructions). | equired by Part II, line additional information | 10; |
| Other Income Part II, Line 10 | | |
| Description: MISC | | |
| 2006: 4618. | | |
| 2007:_0 | | |
| 2008: 34340. | | |
| 2009: 14669. | | |
| 2010: 38029. | | |
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2010

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

Section 527 organizations: Complete Part I-A only.

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number COMPETITIVE ENTERPRISE INSTITUTE 52-1351785 Part I-A | Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Part I-B | Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955..... 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No Yes No b If "Yes," describe in Part IV. Part I-C | Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities.... Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (d) Amount paid from filing organization's funds. If none, enter-0-. (c) EIN (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3)(4)(5)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

(6)

Schedule C (Form 990 or 990-EZ) 2010

| Schedule C (Form 990 or 990-EZ) 20 | 010 COMPETITIVE | E ENTERPRISE INST | ITUTE | 52-1351 | .785 Page |
|--|--|--|--|-------------------------------------|--------------------------------|
| Part II-A Complete if section 501 | the organization | n is exempt under see | ction 501(c)(3) and | d filed Form 5768 (el | ection under |
| | 1 // | ongs to an affiliated group. | | | |
| B Check ► if the fill | ng organization des | ongs to an amiliated group. cked box A and 'limited cor | atauti ann i i | | |
| | Limits on Lobb | ring Expenditures | ntrol' provisions apply. | | |
| | n 'expenditures' mea | ans amounts paid or incum | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expendit | tures to influence pu | blic opinion (grass roots lo | bbying) | 113. | |
| b Total lobbying expendit | tures to influence a f | legislative body (direct lobb | wina) | 5 207 | |
| c Total lobbying expendit | ures (add lines 1a a | nd 1b) | | 5 400 | |
| d Other exempt purpose | expenditures | | | 4 959 407 | |
| e Total exempt purpose e | expenditures (add lin | nes 1c and 1d) | | 4,863,897. | |
| | | ount from the following tab | | 4,003,037. | |
| both columns. | nount. Enter the arri | ount from the following tab | ie in | 393,195. | |
| If the amount on line 1e, col | umn (a) or (b) is | The lobbying nontaxable ar | mount is | 393,193. | 2 08 075 775 |
| Not over \$500,000 | | 20% of the amount on line 1e. | mount is | | |
| Over \$500,000 but not over \$1 | | \$100,000 plus 15% of the excess | over \$500,000 | | |
| Over \$1,000,000 but not over \$ | | \$175,000 plus 10% of the excess | | | |
| Over \$1,500,000 but not over \$ | | \$225,000 plus 5% of the excess of | | | |
| Over \$17,000,000 | | \$1,000,000. | ver \$1,300,000. | | |
| g Grassroots nontaxable : | amount (enter 25% | of line 1f) | | 00.000 | |
| h Subtract line 1g from lin | ne 1a. If zero or less | s, enter -0 | | 98,299. | |
| i Subtract line 1f from lin | e 1c. If zero or less | enter -0 | | | |
| I If there is an amount of | her than zoro on oil | her line 1h or line 1i, did th | | | |
| (Son | ne organizations tha | 4-Year Averaging Period U at made a section 501(h) ele is below. See the instruction | nder Section 501(h) ection do not have to | complete all of the five | Yes No |
| | | ying Expenditures During | | | |
| 0.1 | | | | 1 | |
| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) Total |
| 2a Lobbying non-taxable amount | 410,135 | 383,083. | 247 052 | | |
| | 310,13 | 303,003. | 347,053. | 393,195. | 1,533,466. |
| b Lobbying ceiling | | | | | |
| amount (150% of line 2a, column (e)) | | | 하는 남이 없는 이 사람이 없다. | | |
| 37/ | The state of the s | STREET, CARRIED STREET, CO. CO. | | | 2,300,199. |
| c Total lobbying expenditures | 14,473 | 43 374 | 10 640 | | |
| | 44/4/3 | 43,374. | 18,643. | 5,400. | 81,890. |
| amount | 102.534 | 95 771 | 96 767 | 00.00- | |
| d Grassroots nontaxable amount | 102.534 | 95.771 | 86 763 | 00 200 | 202 |

BAA

e Grassroots ceiling amount (150% of line 2d, column (e))

25,621. Schedule C (Form 990 or 990-EZ) 2010

383,367.

575,051.

98,299.

113.

95,771.

18,306.

86,763.

7,202.

102,534.

0.

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 | No | An | ount | |
| During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence foreign, national, state or local. | 333 | 188 | deret. | | |
| through the use of: | | | | | |
| a Volunteers? | | | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | | |
| 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 similar means? | | | | | |
| i Other activities? If "Yes," describe in Part IV | | | | | |
| j Total. Add lines 1c through 1i | 5 10 1 | 2.55 | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | 11/19/25 | 7 H C R | |
| b If 'Yes,' enter the amount of any tax incurred under section 4912 | 0.75 | 100 | | | |
| 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? | | | | 37V. To | |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 | (c)(5) | Or | | | - |
| section 501(c)(6). | (0)(0) | , 01 | | | |
| | | | | Yes | No |
| 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? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 | | | 3 | | |
| section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part III-A, lines 1 | irt III- | A, line | 3 | | |
| Dues, assessments and similar amounts from members | | 1 | | | |
| 2 Section 162(e) nondeductible lobbying and political expenditures(do not include amounts of political expenses for which the section 527(f) tax was paid). | | | | | |
| a Current year | | 2a | | | |
| b Carryover from last year | | 2b | | | |
| c Total | | | | | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | | | |
| | 1 | <u> </u> | | | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexies penditure next year? | ss tical | | | | |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | | |
| Part IV Supplemental Information | | | | | |
| Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a Also, complete this part for any additional information. | nd Part | II-B, li | ine 1i. | | |
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| Schedule C (F | orm 990 or 990-EZ) 2010 COMPETITIVE ENTERPRISE | INSTITUTE | 52-1351785 Pag | je 4 |
|---------------|--|-----------|----------------|------|
| Part IV | Supplemental Information (continued) | | | |
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 Attach to Form 990. ➤ See separate instructions. OMB No. 1545-0047

2010

Open to Public Inspection

COMPETITIVE ENTERPRISE INSTITUTE

| P | rt I Organizatione Maintaining Dense | Address 5 | | 52-1351785 | 5 |
|-----|---|--|--|--|--------------------------------|
| - | the organization answered 'Yes' to | Form 990, Part IV, lin | her Similar Funds ne 6. | s or Accounts. Compl | ete if |
| | | (a) Donor advise | d funds | (b) Funds and other | accounts |
| 1 | Total number at end of year | | | | |
| 2 | ~ggregate contributions to (during year) | | | | |
| 3 | . as - sere greates not to the teaming year from the contract of | | | | |
| 4 | Aggregate value at end of year | | | | |
| 5 | | or advisors in writing that the | a secondaria de la compansión de la comp | or advised Yes | Пма |
| 6 | | s, and donor advisors in wri | ting that grant funds | can be | ∐ No |
| Pa | rt II Conservation Easements. Comple | ete if the organization | enswered 'Vec' to | Form 900 Part IV III | NO |
| 1 | Purpose(s) of conservation easements held by | the organization (check all | that apply | romi 990, Part IV, III | ne /. |
| | Preservation of land for public use (e.g., re | creation or aducation) | | on bishedealterine a contract | |
| | Protection of natural habitat | creation of education) | Preservation of a | an historically important lan | d area |
| | Preservation of open space | | Preservation of a | a certified historic structure | |
| 2 | Complete lines 2a through 2d if the organization last day of the tax year. | n held a qualified conservat | ion contribution in the | e form of a conservation ea | sement on the |
| | Table 1 | | | Held at the End o | f the Tax Year |
| | a Total number of conservation easements | | | 2a | |
| | b Total acreage restricted by conservation easen | nents | | 2b | |
| | Number of conservation easements on a certifi | ed historic structure include | d in (a) | 2c | |
| | d Number of conservation easements included in structure listed in the National Register | | | 24 | |
| 3 | Number of conservation easements modified, to tax year ► | ransferred, released, exting | uished, or terminated | by the organization during | the |
| 4 | Number of states where property subject to cor | servation easement is local | no. | | |
| 5 | Does the organization have a written policy reg and enforcement of the conservation easement | arding the periodic monitori | ng, inspection, handli | ing of violations, | |
| 6 | Staff and volunteer hours devoted to monitoring | g, inspecting, and enforcing | conservation easeme | ents during the year | ∐ No |
| 7 | Amount of ownerces insured in south to | | | | |
| , | Amount of expenses incurred in monitoring, ins ▶ \$ | pecting, and enforcing cons | ervation easements (| during the year | |
| 8 | Does each conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? | line 2(d) above satisfy the r | equirements of section | on Yes | □No |
| 9 | In Part XIV, describe how the organization repoinclude, if applicable, the text of the footnote to conservation easements. | rts conservation easements the organization's financial | in its revenue and ex statements that desc | xpense statement, and bala cribes the organization's ac | ance sheet, and counting for |
| Par | t III Organizations Maintaining Collect Complete if the organization answ | tions of Art, Historical ered 'Yes' to Form 990 | Treasures, or Ot | ther Similar Assets. | |
| 1 a | If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance | SFAS 116 (ASC 958), not to | report in its revenue | statement and balance sh in furtherance of public ser | eet works of vice, provide, |
| b | If the organization elected, as permitted under thistorical treasures, or other similar assets held following amounts relating to these items: | SFAS 116 (ASC 958), to rep for public exhibition, educa | ort in its revenue stat tion, or research in fu | urtherance of public service | , provide the |
| | (i) Revenues included in Form 990, Part VIII, li | ne 1 | | | |
| | (ii) Assets included in Form 990, Part X | | | ► € | |
| | If the organization received or held works of art amounts required to be reported under SEAS 11 | historical treasures, or other | er similar assets for fi | inancial gain, provide the fo | |
| а | Revenues included in Form 990, Part VIII, line 1 | - , , rolating to the | ero stollings | - 0 | |
| b | Assets included in Form 990, Part X | | | | |
| | | | | | |

| Part III Organizations Mainta | aining Colle | ctions of Art. Hist | orical Treasures, o | r Other Similar Ass | 01/85 | antin | Page |
|---|--|-------------------------------------|--|------------------------------|------------------|---------------|---------|
| 3 Using the organization's acquisi items (check all that apply): | tion, accession | , and other records, cl | heck any of the followin | g that are a significant | use of it | e colle | uea) |
| a Public exhibition | | | | | use of it | a cone | Clion |
| b Scholarly research | | d Loan | or exchange programs | | | | |
| c Preservation for future gene | | c [Othe | | | | | |
| Provide a description of the organization | rations | | | | | | |
| Part XIV. | | | | | | | |
| 5 During the year, did the organize assets to be sold to raise funds Part IV Escrow and Custodia | ation solicit or r rather than to t | receive donations of a | rt, historical treasures, of the organization's co | or other similar | □ v | r | ¬ |
| Part IV Escrow and Custodia 9, or reported an amount | II Arrangem | ents. Complete it | Organization ancies | ered 'Yes' to Form ! | 990, Pa | art IV | , line |
| 1a is the organization an agent, tru included on Form 990, Part X? . | | | | her assets not | | | |
| b If 'Yes,' explain the arrangement | t in Part XIV ar | nd complete the follow | ing table: | | Yes | L | No |
| s Beginning halance | | | | | Amount | t | |
| c Beginning balance | | | | 1c | | | |
| d Additions during the year | | | | 1d | | | |
| e Distributions during the year | | | | 1e | | | |
| f Ending balance | | | | 1f | | | |
| 2a Did the organization include an a | amount on Forn | n 990, Part X, line 21? | · | | Yes | | No |
| b if res, explain the arrangement | t in Part XIV. | | | | | | |
| Part V Endowment Funds. Co | omplete if th | e organization ans | swered 'Yes' to For | m 990, Part IV, line | e 10. | | |
| | (a) Current w | ear (h) Prior yea | (a) Turn smars head | | | Four year | s hack |
| 1 a Beginning of year balance | | | | | 1000000 | Sall Lis | - Salar |
| b Contributions | | | | | 12.00 | | |
| c Net investment earnings, gains, and losses | | | | | | | |
| d Grants or scholarships | | | | | - | | |
| e Other expenditures for facilities and programs | | | | | | | |
| f Administrative expenses | | | | | 5 307 | | |
| g End of year balance | | | | | | 510.7 | 2000 |
| 2 Provide the estimated percentage | | vd halanan hald as: | | | | 200 | 941.73. |
| a Board designated or quasi-endov | umont > | nu parance nero as: | | | | | |
| b Permanent endowment ► | Willett | | | | | | |
| c Term endowment ► | | | | | | | |
| 3a Are there endowment funds not i | | on of the organization | that are held and admir | sistemal for the | | | |
| - garmanon by: | | | | | Г | Yes | No |
| (i) unrelated organizations | | | | | 3a(i) | | 110 |
| (II) related organizations | | | | | 3a(ii) | $\overline{}$ | |
| bilf 'Yes' to 3a(ii), are the related of | rganizations lis | ted as required on Sc | hedule R? | | 3b | | |
| 4 Describe in Part XIV the intended | uses of the or | ganization's endowme | ent funds | | 30 | | |
| Part VI Land, Buildings, and E | quipment. | See Form 990. Pa | rt X. line 10 | | | | |
| Description of investment | | Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) B | ook va | lue |
| 1 a Land | | | and (artiful) | GCDT CCIGUOTI | | | |
| b Buildings | | | | | | | |
| c Leasehold improvements | | | 97 161 | 20 140 | | | 012 |
| d Equipment | | | 97,161. | 29,148. | | | 013. |
| e Other | | | 156,588. | 126,772. | | 29, | 816. |
| otal. Add lines 1a through 1a @ahama | (d) government | Farm 000 De 4 V | home district | | | | |
| otal. Add lines 1a through 1e (Column | (u) must equal | rorm 990, Part X, co | lumn (B), line 10(c).) | | | | 829. |
| | | | | Sched | ule D (Fo | rm 990 | 0) 2010 |

| Part VII Investments-Other Securities, Se | ee Form 990, Part X, Iii | ne 12. |
|---|--------------------------|--|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: |
| (1) Financial derivatives | | Cost or end-of-year market value |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| D | | |
| (G) | | |
| (H) | | |
| (I) | | |
| Total. (Column (b) must equal Form 990 Part X, column (B) line 12.). | . • | |
| Part VIII Investments-Program Related. (S | See Form 990, Part X. I | line 13) |
| (a) Description of investment type | (b) Book value | (c) Method of valuation: |
| //> | 1,7 | Cost or end-of-year market value |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Column (b) must equal Form 390, Part X, column (8) line 13.) | | |
| Part IX Other Assets. (See Form 990, Part | | |
| (1) (a |) Description | (b) Book value |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Column (b) must equal Form 990, Part X, colum | on/D) (ino 15) | |
| Part X Other Liabilities. (See Form 990, P | Part X line 25) | ············· |
| (a) Description of liability | (b) Amount | |
| (1) Federal income taxes | (b) Amount | [[하기 경영 시간 시간 경영 하고 있다. 그 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| (2) | | — 경영시에 하기로 내려왔다. 그런 얼굴 경영 사람들은 요즘 |
| (3) | | — [15] 강경 [17] 그 작은 사람들은 사고 말을 보는 것이다. |
| (4) | | ― 걸 보이 이 나라보니는 이번째를 들었다니다고 됐다면 이 집중 |
| (5) | | ㅡ [10] 모양이다. 그렇게 됐게 살길 때 화를 받았다. |
| (6) | | - |
| (7) | | − 10.00000000000000000000000000000000000 |
| (8) | | |
| (9) | | ─ Particle 이번 기본 경험 경험 경험 경험 경험 경험 경험 경험 경험 |
| (10) | | → [경기 사용하는 다 중에 경험하는 것이 있었다. 보험 나는 |
| (11) | | [맛있지않아!! 그 사람들이 얼룩 낡아!! 왕이 보다 |
| otal. (Column (b) must equal Form 990, Part X, column (B) line 25) | • | - 137,500 kg 1,000,000,000,000,000,000,000,000,000,0 |
| FIN 49 (ACC 740) Feetenin to Best Mills | | - Barton : 1915 : 1920년 1일 10일 : 12일 기업 (12일 12일 12일 12일 12일 12일 12일 12일 12일 12일 |

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| Sch | edule D (Form 990) 2010 COMPETITIVE ENTERPRISE INSTITUTE 52 | 2-13517 | 9.5 Page |
|-------|---|---------|------------|
| Pa | rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements | | 85 Page |
| 1 | Total revenue (Form 990, Part VIII,column (A), line 12). | | F 240 660 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | 5,349,662 |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1. | | 4,863,897 |
| 4 | Net unrealized gains (losses) on investments | | 485,765 |
| 5 | Donated services and use of facilities | | -2,696 |
| 6 | Investment expenses | | |
| 7 | Prior period adjustments | | |
| 8 | Other (Describe in Part XIV) | | |
| 9 | Total adjustments (net). Add lines 4 through 8. | | |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | | -2,696. |
| Par | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re | ****** | 483,069. |
| 1 | Total revenue, gains, and other support per audited financial statements | eturn | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 1 | 5,285,534. |
| | Not reproduced action on the state | | |
| t | Donated consists and are of facilities | 4 | |
| | Recoveries of prior year grants | - 1 | |
| | Other (December 1) December 1 | | |
| | Other (Describe in Part XIV) | | |
| 3 | Add lines 2a through 2d | 2e | -56,628. |
| 4 | Subtract line 2e from line 1 | 3 | 5,342,162. |
| 4. | Amounts included on Form 990, Part VIII, line 12, but not on line: | 333 | |
| | Investments expenses not included on Form 990, Part VIII, line 7b | 42.55 | |
| - | Other (Describe in Part XIV.) 4b | 2000 | |
| ٠, | Add lines 4a and 4b | 4c | |
| Dar | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 5,342,162. |
| Par | t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per | Return | |
| , | Total expenses and losses per audited financial statements | 1 | 4,866,403. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | ind. | |
| a | Donated services and use of facilities | 40,000 | |
| b | Prior year adjustments | 1577 | |
| c | Other losses | 353 | |
| d | Other (Describe in Part XIV.) | | |
| е | Add lines 2a through 2d | 2e | 10,006. |
| 3 | Subtract line 2e from line 1 | 3 | 4,856,397. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on lind: | 902 | 1,000,001. |
| а | Investments expenses not included on Form 990, Part VIII, line 7b | 1360 | |
| ь | Other (Describe in Part XIV.) 4b | \$5.5 | |
| | Add mics 4d and 4D | 4c | |
| David | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 4,856,397. |
| | XIV Supplemental Information | | |
| | blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete different information. XII Line 2d OTHER INCOME: REIMBURSED EXPENSES. | | |
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| Schedule D | (Form 990) 2010 | COMPETITIVE E | NTERPRISE | INSTITUTE | 52-1351785 | Page 5 |
|------------|-----------------|------------------|-----------|-----------|------------|---------|
| Part XIV | Supplemental | Information (con | tinued) | | 22 2002.00 | r age 3 |
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No. 1545-0047

2010

Open to Public Inspection

| COMPETITIVE ENTERPRISE I | NSTITUTE | | | | 52-135178 | 5 | | |
|--|--------------------------------|--|------------------------------|--------------------------------------|--|----------------------------------|--|--|
| Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. | | | | | | | | |
| 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply | | | | | | | | |
| a X Mail solicitations e X Solicitation of non-government grants | | | | | | | | |
| b X Internet and email solicitations | 5 | Solicitation of government grants | | | | | | |
| c X Phone solicitations | | | X Special fundraising events | | | | | |
| d X In-person solicitations | d X In-person solicitations | | | | | | | |
| 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? | | | | | | | | |
| b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. | | | | | | | | |
| (i) Name and address of individual | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? | | | (v) Amount paid to | | | |
| or entity (fundraiser) | | | | (iv) Gross receipts from activity | (or retained by) fundraiser listed in column (i) | (vi) Amount paid to | | |
| | | | | | | (or retained by) organization | | |
| | | Yes | No | | | | | |
| 1 CLEARWORD COMMUNICATIONS GROUP | CONGUITATIO | | | | | | | |
| | CONSULTING | | X | 357,952. | 27,353. | 330,599. | | |
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| Fotal | | | | | | | | |
| List all states in which the organiza or licensing. | tion is registere | d or licer | send to on | 357, 952. | 27,353. | 330,599. | | |
| _ | morr is registere | d or licer | ised to so | ncit contributions or has | been notified it is exer | npt from registration | | |
| All 50 States | | | | | | | | |
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Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add column (a) REVENUE through column (c)) (event type) (event type) (total number) 1 Gross receipts 3 Gross income (line 1 minus line 2)..... 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs 7 Food and beverages..... EXPENSES Entertainment.... 10 Direct expense summary. Add lines 4- through 9 in column (d)..... Net income summary, Combine line 3, column (d), and line 10..... Part III Gaming. Complete if the organization answered "Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/Instant (c) Other gaming (d) Total gaming bingo/progressive (add column (a) bingo through column (c)) 1 Gross revenue EXPENSES DIRECT 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 용 Volunteer labor..... Νo 7 Direct expense summary. Add lines 2 through 5 in column (d)...... 8 Net gaming income summary, Combine lines 1, column (d) and line 7..... 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states?..... **b** If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?..... b If 'Yes,' explain: BAA TEEA3702 01/13/11 Schedule G (Form 990 or 990-EZ) 2010

| Sch | medule G (Form 990 or 990 EZ) 2010 COMPETITIVE ENTERPRISE INSTITUTE 52-1351785 | D |
|-----|---|-----------|
| 11 | Does the organization operate gaming activities with nonmembers? | Page 3 |
| 12 | | □ No |
| 13 | Indicate the percentage of garning activity operated in: | |
| | a The organization's facility | |
| 1 | b An outside facility | 8 |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: | - 8 |
| | Name • | |
| | Address ► | |
| | a Does the organization have a contact with a third party from whom the organization receives garning revenue? b If 'Yes,' enter the amount of garning revenue received by the organization \$ and the amount of garning revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party: | □ No |
| | Name • | |
| | Address ► | |
| 16 | Gaming manager information: | |
| | Name • | |
| | Gaming manager compensation ► \$ | |
| | Description of services provided | |
| | ☐ Director/officer ☐ Employee ☐ Independent contractor | |
| | Mandatory distributions | |
| | Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? | No |
| ь | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the | _ |
| Par | organization's own exempt activities during the tax year ► \$ t IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2t columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions). | o, ete |
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SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 Attach to Form 990.
 See separate instructions.

2010

Open to Public Inspection

Name of the organization

COMPETITIVE ENTERPRISE INSTITUTE

Employer identification number

52-1351785

Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain. 1 h Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director, Check all that apply. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study х Form 990 of other organizations х Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization?...... 4ab Participate in, or receive payment from, a supplemental nonqualified retirement plan?.... 4b Х c Participate in, or receive payment from, an equity-based compensation arrangement?..... 4cХ If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5 a х b Any related organization?.... 5b Х If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation confingent on the net earnings of: a The organization?.... 6 a х b Any related organization?.... 6ь Х If 'Yes' to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III...... 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III..... 8 х If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2010

COMPETITIVE ENTERPRISE INSTITUTE Schedule J (Form 990) 2010

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (ii) and from related organizations described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Part II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

Page 2

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

| | (B) Breakdown | (B) Breakdown of W-2 and/or 1099-MISC compensation | 3C compensation | (C) Retirement and | F | APA Total of columns | (C) Commonwell |
|------------------------|--------------------------|--|--|-----------------------------|----------|----------------------|---|
| (A) Name | (0) Base compensation | (ii) Bonus and incertive compensation | (Al) Other reportable compensation | other deferred compensation | benefits | (B)(i)-(b) | reported in prior |
| | 216,30 | 20,000. | .0 | 0. | 11,710. | . 248,010. | 219,117. |
| FRED L. SMITH JR. (II) | | 0. | | | | | 0. |
| 0000000 | 149,50 | 12,000. | 0 | .0 | 10,137. | 171,637. | 0 |
| C. WAYNE CREMS | (ii) | 0. | | | | | 0. |
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| (ii) | 0 | | | | | | |
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Schedule J (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 2010

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990 or 990-EZ.

Open to Public Inspection

| The same and the s | Employer identification number |
|--|--------------------------------|
| | 52-1351785 |
| Pt_VI-A, Line 2 THE PRESIDENT IS RELATED TO A BOARD MEMBER BY M | ARRIAGE. |
| Pt_VI-B, Line 11a A COPY OF THE 990 IS PROVIDED TO THE GOVERNING | BODY UPON COMPLETION. |
| Pt_VI-B, Line 12c OFFICERS, DIRECTORS, AND EMPLOYEES ARE REQUIRED | TO SIGN A CONFLICT |
| OF INTEREST STATEMENT ANNUALLY AND DISCLOSE ANY | CONFLICTS OR |
| POTENTIAL CONFLICTS OF INTEREST. | |
| Pt_VI-B, Line 15 CEI HAS A COMPENSATION COMMITTEE COMPRISED OF BOA | ARD MEMBERS TO DETERMINE |
| THE COMPENSATION OF THE TOP MANAGEMENT OFFICIAL. | |
| DECISIONS OF THIS COMMITTEE ARE BASED ON COMPARATIVE ANAL | YSIS OF COMPENSATION LEVELS |
| AT PEER LEVEL NON-PROFIT ORGANIZATIONS. | |
| Pt_VI-C, Line 19 A COPY OF THE 990 IS AVAILABLE TO THE PUBLIC UPO | ON REQUEST. |
| Pt_XIPRIOR_PERIOD_ADJUSTMENTS_AND_UNREALIZED_LOSS_ON_ | INVESTMENTS. |
| Part III, Line 1 WE BELIEVE THAT CONSUMERS ARE BEST HELPED NOT BY | GOVERNMENT |
| REGULATION, BUT BY BEING ALLOWED TO MAKE THEIR C | <u> </u> |
| CHOICES IN A FREE MARKETPLACE. | |
| | |
| Part III, Line 4a SEEKS TO DEVELOP NEW TOOLS FOR CHALLENGING GOVER | NMENT_REGULATIONS |
| AND TO USE THESE IN ADMINISTRATIVE AND COURT ACT | IONS TO BETTER |
| BALANCE THE PUBLIC POLICY DEBATE AND TO RESTORE | PROPERTY |
| AND CONTRACT RIGHTS. | |
| | |
| REGULATORY AND ECONOMIC LIBERTY: SEEKS TO ANALY | ZE AND PROMOTE |
| FREE-MARKET REGULATORY POLICIES IN AREAS SUCH AS | TECHNOLOGY, |
| TELECOM, ELECTRICITY, FINANCIAL REGULATION AND P | RIVACY. |
| | |
| OTHER_SERVICES_PROVIDED_BY_CEI_INCLUDE_PUBLICATION | ONS, MEDIA OUTREACH, |
| OTHER POLICY ISSUES, AND LOBBYING. | |

| Schedule 0 (Form 990 or 990-EZ) 2010 Name of the organization | Page 2 |
|--|--------------------------------|
| COMPETITIVE ENTERPRISE INSTITUTE | Employer identification number |
| | 52-1351795 |
| | |
| Part VI, Section C Line 17. ALABAMA, ALASKA, ARIZONA, ARKANSAS, CA | LIFORNIA, |
| COLORODO, CONNECTICUT, DISTRICT OF COLUMBIA, FL | ORIDA, |
| GEORGIA, ILLINOIS, KANSAS, KENTUCKY, MAINE, MAR | YLAND, |
| MINNESOTA, MASSACHUSETTS, MICHIGAN, MISSISSIPPI | ,_MONTANA, |
| MISSOURI, NEW HAMSHIRE, NEW JERSEY, NEW MEXICO, | NEW YORK, |
| NORTH CAROLINA, NORTH DAKOTA, OHIO, OKLAHOMA, O | REGON, |
| PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, SOUTH | |
| TENNESSEE, UTAH, VIRGINIA, WASHINGTON, WEST VIR | |
| AMENDED 990 PAGE 1, BOX B. AN AMENDED 990 IS BEING FILED TO | |
| PART VII, SECTION A, OFFICERS, DIRECTORS, TRUST | |
| KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES | |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Attach to Form 990. * See separate instructions.

2010

OMB No. 1545-0047

Open to Public Inspection

(f) Direct controlling Employer identification number 52-1351785 (e) End-of-year assets Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of disregarded entity COMPETITIVE ENTERPRISE INSTITUTE

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Sec 512(b)(13) controlled entity? ŝ Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) žęş O Direct controlling entity (f section 501(c)(3)) (d) Exempt Code section 501(C)(4) (c) Legal domicile (state or foreign country) 1899 L ST NW, 12 FLOOR, WASHINGTON DC 20036 AND SOCIAL WELFARE DC CHARITABLE, EDUCATION, (b) Primary activity O) FREEDOM ACTION, INC. 27-0678072 (a) Name, address, and EIN of related organization ଷ ପ୍ €

Part II

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

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Schedule R (Form 990) 2010

Page 2

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) 52-1351785

| because it had one of more related organizations treated as a partnership during the tax year.) | (d) Predominant Share of total Share of total share of controlling entity income (related months) assets allocations? 20 of Schedule partner? | sections 512-514) Yes No | - | | | | | |
|---|---|--------------------------|---|--|-----|--|-----|--|
| as a parmersnip during the ta | | thons 512-514) | | | | | | |
| organizations realed | (d) Direct controlling entity | | | | | | | |
| orie or more related | Primary activity Legal domicile (state or foreign | unoo | | | | | | |
| DELL'II DECENSO | (a) Name, address, and EIN of related organization | | ω | | (2) | | (3) | |

| The state of the s | | | | | | | |
|--|------------------------------------|--|--|---|-------------------------------|---|-------------------------|
| Part IV identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) | axable as a Col d organizations | rporation or Tr treated as a o | ust (Complete or torporation or t | if the organizarizations if | ation answered 'Ye tax year.) | ss' to Form 990, Pa | ırt I∨, |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | Type of entity (C corp., S corp., or trust) | Share of total income | Legal domicile Direct Type of entity (C corp. S corp. S corp. or frust) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | Percentage ownership |
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| (3) | | | | | | | |

Schedule R (Form 990) 2010

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Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

52-1351785

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

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

| (a) Name, address, and EIN of entity | l l | 01 | (d) Are all partners | (e) Share of end-of-vear | Dispropor | Code V.I Ri amount | (h) |
|---|-----|-------------------------------|--|-----------------------------|-------------------------|---|----------------------|
| | | (state or foreign country) | section 501(c)(3) organizations? | assets | tionate allocations? | in box 20 of Schedule K-1 Form (1065) | managing partner? |
| | | | Yes No | | Yes No | () | Yes No |
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| ВАА | | TEEA5004 12/23/10 | | | | Schedule R (Form 990) 2010 | n 990) 2010 |

| Schedule R | (Form 990) 2010 | COMPETITIVE | ENTERPRISE | INSTITUTE | 52-1351785 | Page 5 |
|------------|------------------|-----------------|------------------|---------------------------|-------------------------|--------|
| Part VII | Supplemental | Information | | | | |
| | (see instruction | part to provide | additional infor | mation for responses to o | questions on Schedule R | |
| | (see instructio | 115). | | | | |
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Form 990

Return of Organization Exempt From Income Tax.

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

OMB No. 1545-0047 2009

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public Inspection For the 2009 calendar year, or tax year beginning Oct 1 2009, and ending Sep ,2010 Check if applicable: C Name of organization D Employer Identification Number COMPETITIVE ENTERPRISE INSTITUTE Address change IRS label 52-1351785 Number and street (or P.O. box if mail is not delivered to street addr) Name change E Telephone number or type. specific Instruc-Initial return 1899 L ST, NW - 12TH FLOOR (202) 331-1010 City, town or country ZIP code + 4 Termination Amended return WASHINGTON DC 20036 **G** Gross receipts \$ 4,247,228 F Name and address of principal officer: Application pending H(a) is this a group return for affiliates? Yes No H(b) Are all affiliates included? FRED L. SMITH, JR. 1899 L ST, NW 12TH FLOOR WASHINGTON DC 20036 Yes If 'No,' attach a list. (see instructions) Tax-exempt status X 501(c) (3) ◄ (insert no.) Website: ► WWW.CEI.ORG H(c) Group exemption number X Corporation Form of organization; Other > L Year of Formation: 1984 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: PUBLIC POLICY RESEARCH AND EDUCATION DEDICATED TO THE PRINCIPLES OF FREE ENTERPRISE AND LIMITED GOVERNMENT Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)..... 6 Total number of employees (Part V, line 2a) 5 | 32 Total number of volunteers (estimate if necessary) 6 0 7a Total gross unrelated business revenue from Part VIII, Icolumn (C), ine 12 7 a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 4,384,114 4,179,906. Revenue Program service revenue (Part VIII, line 2g) 27,177 10,830. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 49,305 56,492. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,460,596 4,247,228. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 114,518 44,846. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,337,885 2,285,934. 16a Professional fundraising fees (Part IX, column (A), line 11e)..... 30,739 25,596. b Total fundraising expenses (Part IX, column (D), line 25) ► Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 2,179,935 1,976,595. 4,663,077 4,332,971. -202,481-85,743.Beginning of Year End of Year 20 Total assets (Part X, line 16).... 2,125,439. 2,063,906. 21 Total liabilities (Part X, line 26) 150,610 88,981. 22 Net assets or fund balances. Subtract line 21 from line 20 1,974,829 1,974,925. Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here M Type or print name and title. Preparer's identifying number (see instructions) Check if self-employed Paid Preparer's signature Preparer's Firm's name (or yours if self-employed), Hendershot, Burkhardt & Reed, Use 7525 Presidential Lane Only EIN address, and ZIP + 4 Manassas 20109 VΑ Phone no. -(703)361-1592 May the IRS discuss this return with the preparer shown above? (see instructions)

No

Yes

| Part III Statement of Program Service Accomplishments | |
|--|-----------------|
| 1 Briefly describe the organization's mission: | |
| COMPETITIVE ENTERPRISE INSTITUTE IN A NON-PROFIT PUBLIC POLICY ORGANIZATION DEDICAT | red_ |
| TO THE PRINCIPLES OF FREE ENTERPRISE AND LIMITED GOVERNMENT. WE BELIEVE THAT | |
| See Form 990, Page 2, Part III, Line 1 (continued) | |
| | |
| 2 Did the organization undertake any significant program services during the year which were not listed on the prior | |
| Form 990 or 990-EZ? | No |
| hunted hunter | NI- |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X If 'Yes,' describe these changes on Schedule O. | No |
| 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. | al |
| 4a (Code:) (Expenses \$3,196,450. including grants of \$44,846.) (Revenue \$ | |
| HEALTH AND SAFETY: SEEKS TO ANALYZE THE OFTEN UNRECOGNIZED TOLL OF OVER-REGULATION ESPECIALLY IN TERMS OF REDUCED HEALTH AND SAFETY. | |
| LEGAL AND CONSTITUTIONAL STUDIES: See Form 990, Page 2, Part III, Line 4a (continued) | |
| 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$ |) |
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| | |
| 4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) |) |
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| | |
| 4d Other program services. (Describe in Schedule O.) | |
| (Expenses \$ including grants of \$) (Revenue \$) | |
| 4e Total program service expenses ► 3,196,450. | |

COMPETITIVE ENTERPRISE INSTITUTE Form 990 (2009) 52-1351785 Page 3 Part IV Checklist of Required Schedules Yes Nο Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 X 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х 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 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Χ Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If 'Yes,' complete Schedule D, Part II*..... 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 9 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 X Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11 ¥ 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 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. • 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'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...... Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 X 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E...... 13 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I........ 14b Х 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...... 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to

| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20 | | individuals located outside the United States? If 'Yes,' complete Schedule F, Part III | 16 | | Х |
|---|----|--|----|---|----------|
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I | 17 | х | |
| complete Schedule G, Part III | 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | | х |
| 20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 19 | | х |
| | 20 | Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 20 | | <u>X</u> |

Part IV Checklist of Required Schedules (continued)

| | | | 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 | Х | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III | . 22 | х | |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> | 23 | х | |
| 24 | a 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, and 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 | | 77 |
| | b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a | | X |
| | 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 | | |
| 1 | d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | 25a | | х |
| | b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I | 25b | | 32 |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | 230 | | X |
| | disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II | 26 | | Х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | 71 |
| ā | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28a | Server State Control | X |
| 1 | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28b | | х |
| | 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 | | X |
| 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 | | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | 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 I | 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 | | 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 | | х_ |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI | 37 | | х |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | х | |

BAA

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

| | | 1.4 | Γ |
|---|-------------|---------------|----------------|
| 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable | 6 | Yes | No |
| b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 0 | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | . 1c | Х | |
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 2 | | |
| 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | . 2b | Х | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) | | | |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | . 3a | | X |
| b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O | . 3b | | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | . 4a | | Х |
| 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 | | Х |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | . 5b | | Х |
| 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 | | |
| 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? | . 6a | | Х |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? | . 6b | | |
| 7 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 | X | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | х |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year | - | | |
| benefit contract? | . <u>7e</u> | | Х |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | X |
| g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | . <u>7g</u> | | |
| 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 | | v |
| 9 Sponsoring organizations maintaining donor advised funds. | | | X |
| a Did the organization make any taxable distributions under section 4966? | 9a | | X |
| b Did the organization make any distribution to a donor, donor advisor, or related person? | | | X |
| 10 Section 501(c)(7) organizations. Enter: | 33 | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| 11 Section 501(c)(12) organizations. Enter: | | | |
| a Gross income from other 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 | | and the second |
| b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | | | |

BAA Form 990 (2009)

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.

| <u>Se</u> | ction A. | Governing | Body and | Manage | <u>ement</u> | | | | | | | | | | |
|-----------|---------------------------|---|--|----------------------------|---------------------|-------------|-----------------------|--------------------------|------------------------|--------------|------------|--|----------|----------------|---|
| | | | | | | | | | | 1 | | | - | Yes | No |
| | | e number of votir | _ | _ | _ | - | | | | | 9 | | | | |
| | | e number of votir | | | • | | | | | | <u> 6</u> | ······································ | _ | | |
| 2 | Did any officer, of | officer, director, l director, trustee o | trustee, or k or key emplo | ey employeyee? | ee have a | a family r | elations | hip or a t | ousiness re | elation | ship with | any other | . 2 | Х | |
| 3 | Did the | organization dele rs, directors or tri | egate control | over mana | agement | duties cu | stomaril | y perforn | ned by or u | under t | the direc | t supervision | . 3 | | х |
| 4 | | organization make | | | | | | | | O (), | | | 4 | | X |
| | | e prior Form 990 | | | - | _ | | | | | | | <u></u> | | |
| 5 | | organization beco | | | | | | | | | | | | | X |
| 6 | | organization have | | | | | | | | | | | | | X |
| 7 | a Does the | e organization having body? | ve members | s. stockhold | ders. or o | other pers | ons who | mav ele | ct one or r | more n | nembers | of the | . 7a | | |
| | b Are any | decisions of the | governing b | odv subject | t to appre | oval by m | embers | stockhol | Iders or of | ther ne | rsons? | | 7b | | X |
| 8 | | | | | | - | | | | - | | | . , , , | | |
| _ | the follo | _ | | - | | _ | | | | | - | • | | | |
| | | erning body? | | | | | | | | | | | | | |
| | | mmittee with auth | | | | | | | | | | | 1 | X | ļ |
| | | any officer, direct tion's mailing add | | | | | | | | | | | | | Х |
| | | Policies (7 | This Secti | on B req | juests ii | nformat | tion ab | out pol | licies not | t requ | iired by | the Interna | al 💮 | | |
| Rev | enue Code | <u>.) </u> | | | | *********** | | | | ~ | | | | , . | |
| | | | | | | | | | | | | | | Yes | No |
| 10: | a Does the | organization hav | ve local chap | oters, bran | ches, or | affiliates? | ? | | | | | | . 10a | | X |
| | b If 'Yes,' o and bran | does the organiza ches to ensure th | ation have w heir operatio | ritten polic ns are con | ies and pasistent w | procedure | es govern of the o | ning the a organizati | activities o | f such | chapter | s, affiliates, | . 10b | | |
| 11 | Has the | organization provi | rided a copy | of this For | rm 990 to | all mem | bers of i | its goverr | ning body l | before | filing the | oform? | . 11 | Х | |
| | | in Schedule O th | - | - | ~ | • | | | | | | | | | |
| | | organization hav | | | | | | | | | | | . 12a | Х | |
| ļ | Are office to conflic | ers, directors or tr | rustees, and | key emple | oyees rec | quired to | disclose | annually | interests | that co | ould give | rise | . 12b | х | |
| (| Does the | organization regi | ularly and cone | onsistently | monitor | and enfo | rce com | pliance v | vith the po | licy? If | 'Yes,' d | escribe in | . 12c | х | |
| | | organization hav | | | | | | | | | | | . 13 | Х | |
| 14 | Does the | organization hav | ve a written o | document i | retention | and dest | truction p | policy? | | | | | . 14 | X | *************************************** |
| 15 | Did the p | rocess for determ comparability dat | nining comp | ensation of | f the follo | wing per | sons inc | clude a re | eview and a | approv | al by inc | lependent | | | |
| | | nization's CEO, E | | | | | | | | | | | . 15a | X | |
| | | cers of key emple | | | | | | | | | | | . 15b | | X |
| | | line 15a or 15b, | | - | | | | | | | | | | | |
| 16 a | Did the o | rganization invest | t in, contribu | ite assets | to, or par | rticipate i | in a joint | t venture | or similar | arrang | jement w | vith a taxable | . 16a | | v |
| L | • | - | | | | | | | | | | | . 104 | | X |
| ٤. | in joint ve status wit | as the organization enture arrangeme th respect to such | ents under a n arrangeme | pplicable fonts? | ederal tax | x law, an | d taken | steps to | garuzanon safeguard | to eva | ganizatio | participation on's exempt | . 16b | | |
| Sec | tion C. | Disclosures | | | | | | | | | | | , | <u>!</u> | P |
| 17 | | tates with which a | a copy of thi | s Form 99 | 0 is requi | ired to be | filed > | See St | tates Form | 990 F | iled In | | | | |
| | Section 6 | 104 requires an o | organization | to make it | ts Forms | 1023 (or | 1024 if a | | | | | c)(3)s only) av | ailable | for pul | olic |
| | h3 | vebsite | Comment of the Commen | r's website | | | appiy. pon requ | uest | | | | | | | |
| 19 | Describe statement | in Schedule O wh ts available to the | hether (and e public. | if so, how) | the orga | ınization ı | makes it | ts govern | ing docum | ents, d | conflict o | f interest polic | y, and | financi | ial |
| 20 | State the | name, physical a | address, and | l telephone | number | of the pe | erson wh | no posses | sses the bo | ooks a | nd recor | ds of the organ | nization | : | |
| Þ | | IVE ENTERPRISE IN | | • | | - | | | | | 20036 | - | 02) 3 | | 010 |
| | | | | | | | | | | | | | | | |

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| Check this box if the organization did no | ot compens | sate a | ny c | urre | nt o | fficer, | dire | ctor, or trustee. | | | | |
|---|---------------|-----------------------------------|-----------------------|---------|--------------|---------------------------------|--------|---|--|--|--|--|
| (A) | (B) | | | | c) | | | (D) | (E) | (F) | | |
| Name and Title | Average hours | 1 | _ | | · | that app | | Reportable compensation from | Reportable compensation from | Estimated amount of other | | |
| | per week | andividual frustee or director | institutional trustee | Officer | Key amployee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the organization and related organizations | | |
| FRED L. SMITH JR. | _ | | | | | | | | | | | |
| PRESIDENT | 40.00 | Х | | Х | Х | X | | 210,222. | 255. | 0. | | |
| MICHAEL GREVE BOARD MEMBER | 1.00 | x | | | | | | 2,450. | 0. | 0. | | |
| WILLIAM DUNN | | | | | | | | 2,100 | i | | | |
| BOARD MEMBER | 1.00 | Х | | | | | | 0. | 0. | 0. | | |
| DR. LEONARD LIGGIO BOARD MEMBER | 1.00 | | | | | | | 0. | 0. | 0. | | |
| DR. THOMAS GALE MOORE | | | | | | | | | <u>-</u> | <u> </u> | | |
| BOARD MEMBER | 1.00 | Х | | | | | | 0. | 0. | 0. | | |
| FRANCES B. SMITH | | | | | | | | | | | | |
| BOARD MEMBER | 1.00 | X | | | | | | 18,000. | 0. | 0. | | |
| JAMES CURLEY BOARD MEMBER | 1.00 | Х | | | | | | 0. | 0. | 0. | | |
| C. WAYNE CREWS DIRECTOR OF TECH | 40.00 | х | | Х | | x | | 145,475. | 0. | 0. | | |
| SAM KAZMAN | | | | | | | 1 | | | | | |
| DIRECTOR OF REG | 40.00 | Χ | | Х | | Х | | 108,790. | 0. | 0. | | |
| MYRON EBELL DIRECTOR OF ENERGY | 40.00 | | Ì | | х | х | | 65,929. | 37,217. | 0. | | |
| MARLO LEWIS, JR. SR. FELLOW | 40.00 | | | | х | Х | | 100,709. | 1,464. | 0. | | |
| IAIN MURRAY VP/DIRECTOR | 40.00 | | | | x | | | 93,730. | 476. | 0. | | |
| WIT DIRECTOR | 40.00 | | | | Δ. | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 470. | • | | |
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| Part VII Section A. Officers, Directors, Trus | tees, l | Кеу | En | npl | оуе | es | , ar | nd Highest Cor | npensated Em | ployees (cont.) |
|---|---|-------------|-----------------------|----------|--------------|---|--|---|--|--|
| (A) | (B) | Ì | | (| c) | | | (D) | (E) | (F) |
| Name and Title | Average | | T | (chec | | | | compensation from | Reportable compensation from | Estimated amount of other |
| | per weel | or director | Institutional trustee | Officer | Key employee | employee | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the |
| | | ector | l iii | 14 | di | st co | . P | , | , | organization and related |
| | | trustee | a 57 | | Syee |) mg | | | | organizations |
| | | æ | stee | | | insat | | | | |
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| | | | _ | | | | _ | | | |
| | | | | | | | | | | ; ! |
| 1b Total | | | | | | 1 | > | 745 205 | 20.410 | |
| Total number of individuals (including but not limited: | | | | | | | | 745,305. | 39,412. | 0. |
| from the organization \blacktriangleright 4 | 10 111056 | 1130 | cu c | ibovi | e) w | /11O | i ece | ived more man \$1 | oo,ooo in reportabi | e compensation |
| | ~~~ | | ********** | ******* | ······ | | | | ************************************** | Yes No |
| 3 Did the organization list any former officer, director or | r trustae | . ko | v or | nnin | VAA | or | hiat | sect componented | amplayee | |
| on line 1a? If 'Yes,' complete Schedule J for such ind | ividual . | | | | | | | | | . 3 X |
| 4 For any individual listed on line 1a, is the sum of reporting organization and related organizations greater that | rtable c | omp | ens | atio | n ar | nd o | ther | compensation fro | m ' | |
| individual | n \$150, | | <i>(II)</i> | res | CO | трі. | ete . | Scneaule J for suc | n | . 4 X |
| | | | | | | | | | | STATES TO COMPANY OF THE PROPERTY OF THE PROPE |
| 5 Did any person listed on line 1a receive or accrue con rendered to the organization? If 'Yes,' complete Sched | dule J fo | or su | ich į | pers | on. | | | ······································ | | . 5 X |
| Section B. Independent Contractors | | | | | | | | | | |
| 1 Complete this table for your five highest compensated compensation from the organization. | inaepe | naei | nt co | ontra | acto | rs tr | nat r | eceived more than | \$100,000 of | |
| (A) | | | | | | | T | (B) | | (0) |
| Name and business address | | | | | | | | Description of | Services | (C) Compensation |
| | | | | **** | | | | Martin de la companya del companya del companya de la companya de | | |
| | | <u> </u> | | | ******** | *************************************** | | | | |
| | | | | | | | \dashv | | | |
| | | | | | | | \dashv | | | |
| | | | | | · | ···· | | | | |
| 2 Total number of independent contractors (including bu | t not lin | niter | l to | thos | ρ lic | sted | aho | ive) who received | more than | |
| \$100.000 in compensation from the organization > (| | | 0 | a 103 | U 113 | Jeou | ui)(| TO THIS IECEIVED | HOLE RIGHT | |

| Ľ | arc | VIII Statement of Rev | <u>renue</u> | | (A) Total revenue | (B) Related or | (C) Unrelated | (D) Revenue |
|--|-----------|--|----------------------|--|----------------------|-------------------------------|---------------------|---|
| | | | | | Total revenue | exempt function revenue | business revenue | excluded from tax under sections 512, 513, or 514 |
| Z S | | 1a Federated campaigns | | | | | | |
| RAN | | b Membership dues | | | | | | |
| S,G | | c Fundraising events | | | | | | |
| GFF | | d Related organizations | | †··· | | | | |
| SS, | | e Government grants (contributions | i) <u>1 e</u> | | _ | | | |
| 55.4 | | f All other contributions, gifts, gran similar amounts not included abo | nts, and | 4 170 000 | | | | |
| E C | | | | | | | | |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMIL APP AMOUNTS | | g Noncash contribus included in Ins h Total. Add lines 1a-1f | o 1α⁻:1, . , , , . γ | - | 4,179,906. | | | 100 |
| E | T | | | Business Code | | | | |
| VEN | 2 | 2a <u></u> | | | | | | |
| 뙲 | } | b | | | | | | |
| Š | | C | | *************************************** | | | | |
| . SE | | d | - | | | | | |
| RAR | | e | | | | | | |
| PROGRAM SERVICE REVENUE | | f All other program service r g Total. Add lines 2a-2f | | | | | | |
| | <u> </u> | 3 Investment income (includi | | | <u> </u> | | | |
| | " | other similar amounts) | my uividends | , interest and | 10,830. | 0. | 0. | 10,830. |
| | 4 | 4 Income from investment of | f tax-exempt | bond proceeds . > | • | | | |
| | 5 | 5 Royalties | | | | | | |
| | ١. | • • • • • | (i) Real | (ii) Personal | | | | |
| | 6 | 5 a Gross Rents | | | | | | |
| | | c Rental income or (loss) | | | | | | 1 |
| | | d Net rental income or (loss) | | | 8,500. | 8,500. | 0. | 0. |
| | 7 | 7a Gross amount from sales of | (i) Securities | (ii) Other | | | 0. | V. |
| 1 | ĺ | assets other than inventory . | | | | | | |
| | | b Less: cost or other basis | | | | | | |
| | | and sales expenses | | | | | | |
| | | c Gain or (loss) | | - | | | | |
| | ĺ | d Net gain or (loss) | | ` <u>````````````````</u> | | | | |
| NUE | 8 | Sa Gross income from fundrais (not including . \$ | | | | | | |
| OTHER REVENU | | of contributions reported or | , | | | | | |
| ER | | See Part IV, line 18 b Less: direct expenses | | | | | | |
| 5 | | c Net income or (loss) from fi | | | | | | |
| | | • • | = | F | | | | |
| ļ | | a Gross income from gaming See Part IV, line 19 | | ATTENDED TO A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSO | | | | |
| | | b Less: direct expenses | | | | | | |
| ĺ | - | c Net income or (loss) from g | gaming activi | ti <u>es</u> | | | | |
| | 10 | a Gross sales of inventory, le | ss returns | 33,323. | | | | |
| | | b Less: cost of goods sold | | | | | | |
| | | c Net income or (loss) from s | | 1 | 33,323. | 33,323. | 0. | 0. |
| ľ | ··· | Miscellaneous Revenue | | Business Code | | | <u> </u> | · · |
| | 11: | a MISCELLANEOUS | | 900099 | 14,669. | 14,669. | 0. | 0. |
| | 1 | b | | | | | | |
| | • | C | | | | | | |
| | | d All other revenue | | > | 14.550 | | | |
| | | e Total. Add lines 11a-11d Total revenue. See instructi | | | 14,669. | EC 400 | ^ | 10.020 |
| - 1 | <u>12</u> | i ordi Levellner Oee RISRINGR | ,,,,,, GIIVI | ,,,,,,,,,,,,, | 4,247,228. | 56,492. | 0.1 | 10,830. |

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do 6h | not include amounts reported on lines , 7b. 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 | 22,346. | 22,346. | general expenses | expenses |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | 22,500. | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | trustees, and key employees | 784,717. | 655,985. | 34,206. | 94,526. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 1,100,782. | 920,210. | 47,983. | 132,589. |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | 218,834. | 11,411. | 31,531. |
| 10 | | | 115,917. | 6,040. | 16,702. |
| | Fees for services (non-employees) | | | | |
| | a Management | | | | · · · · · · · · · · · · · · · · · · · |
| | b Legal | | 53,348. | 947. | 0. |
| | c Accounting | 50,801. | 2,505. | 40,697. | 7,599. |
| | d Lobbying | | | | |
| | e Prof fundraising svcs. See Part IV, In 17 | 25,596. | | | 25,596. |
| | Investment management fees | 242 405 | 4.00.000 | | · · · · · · · · · · · · · · · · · · · |
| | g Other | | 188,982. | 72,109. | 82,034. |
| 12 | , | 590. | 515. | 0. | 75. |
| 13 | Office expenses | 41,083. | 34,463. | 3,351. | 3,269. |
| 14 15 | Information technology | 94,456. | 86,356. | 192. | 7,908. |
| 16 | Occupancy | 550,462. | 402,814. | 00.060 | FO FOO |
| 17 | Travel | 72,508. | 59,301. | 88,068. 34. | 59,580. 13,173. |
| | Payments of travel or entertainment expenses for any federal, state, or local public officials | 72,300. | 33,301. | J | 13,1/3. |
| 19 | Conferences, conventions, and meetings | 299,329. | 228,826. | 34,531. | 35,972. |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 22,295. | 12,532. | 7,915. | 1,848. |
| 23 | Insurance | 17,202. | 13,606. | 1,592. | 2,004. |
| 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 | EQUIPMENT LEASE/RENT | 29,709. | 20,775. | 4,803. | 4,131. |
| | FEE/LICENSE/PERMIT/DUES | 19,922. | 3,741. | 10,724. | 5,457. |
| | BOOKS AND SUBSCRIPTIONS | 49,109. | 31,898. | 2,085. | 15,126. |
| | DIRECT MAIL | 171,667. | 269. | 46. | 171,352. |
| | PRINTING | 121,060. | 79,609. | 1,894. | 39,557. |
| | All other expenses | 38,982. | 21,118. | 4,426. | 13,438. |
| 25 | Total functional expenses. Add lines 1 through 24f | 4,332,971. | 3,196,450. | 373,054. | 763,467. |
| 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 | | | | Form 990 (2009) |

BAA

Form 990 (2009)

Part X Balance Sheet (A) Beginning of year End of year Cash - non-interest-bearing 377.629 1 111,702. 2 Savings and temporary cash investments 957,931 2 1,340,603. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 598,330 413,050. Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.......... 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L ... 6 Notes and loans receivable, net..... 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 16,423 9 38,834 10a Land, buildings, and equipment: cost or other basis. . 10a Complete Part VI of Schedule D 566,155. 129,287 10 c 113,878. 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11..... 45,839 15 45,839. Total assets. Add lines 1 through 15 (must equal line 34) 16 2,125,439 2,063,906. 16 17 Accounts payable and accrued expenses 150,610. 17 88,981. 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability, Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other fiabilities, Complete Part X of Schedule D..... 25 26 Total liabilities. Add lines 17 through 25 150,610 88,981. Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34. ASSETS Unrestricted net assets 27 1,699,755 27 1,680,901. Temporarily restricted net assets 275,074 28 294,024. Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117, check here and complete FUND lines 30 through 34. Capital stock or trust principal, or current funds 30 30 BALANCES Paid-in or capital surplus, or land, building, and equipment fund..... 31 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances. 1,974,829 33 1,974,925. 34 2,125,439. 34 2,063,906. BAA

TEEA0111 01/30/10

Part XI Financial Statements and Reporting Yes No X Accrual 1 Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? ... 2a X b Were the organization's financial statements audited by an independent accountant? 2b X c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 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 consolidated basis, separate basis, or both: Consolidated basis Both consolidated and separate basis 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. 3b

BAA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

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|---|---|---|--|--|-------------------------------|--|------------------------|---|------------------------------|---|---|-----------------|--------------|
| | | | | us (All organizations | | | | |) See | instruct | ions | | |
| The o | or <u>ga</u> niza | ition is not a p | orivate foundation becar | use it is: (For lines 1 thro | ugh 11, | check o | nly one | box.) | | | | | ************ |
| 1 | A | church, conver | ntion of churches or ass | sociation of churches des | cribed in | section | 170(b) | 1)(A)(i). | | | | | |
| 2 | As | school describ | ed in section 170(b)(1)(| (A)(ii). (Attach Schedule I | E.) | | | | | | | | |
| 3 | A | nospital or cod | perative hospital service | e organization described | in section | on 170(b |)(1)(A)(| iii). | | | | | |
| 4 | Ar | nedical resear | rch organization operate | ed in conjunction with a h | ospital o | describe | d in sec | tion 170 | (b)(1)(A) |)(iii). Ente | r the hosp | ital's | |
| | nar | ne, city, and s | state: | | | | | | | | • | | |
| 5 | ☐ An | organization ((b)(1)(A)(iv). | operated for the benefit (Complete Part II.) | of a college or university | owned | or opera | ated by | a govern | mental | unit descr | ibed insec | tion | - |
| 6 | A f | ederal, state, | or local government or | governmental unit descri | bed in se | ection 1 | 70(b)(1) | (A)(v). | | | | | |
| 7 | | section 170(b) | (1)(A)(vi). (Complete F | • | , | | vernmer | ntal unit | or from | the gener | al public o | lescrit | ped |
| 8 | | | | 170(b)(1)(A)(vi). (Comple | | • | | | | | | | |
| 9 | tror inve | n activities relestment incon le 30, 1975. S | lated to its exempt fund ne and unrelated busing ee section 509(a)(2). (C | • | excepti section (| ons, and 511 tax) | from bu | more th isinesse | an 33-1/ s acquir | /3 % of its | commont f | rom a | rnec |
| 10 | | | | exclusively to test for pu | | | | | | | | | |
| 11 | moi | e bubliciv suc | oported organizations o | exclusively for the benef described in section 509(a zation and complete lines | a)(I) or s | section 5 | 509(a)(2 | tions of). See s | , or carr ection 5 | y out the post of | purposes of Check the | of one box t | or that |
| | a [| Туре І | b ∏Type Ⅱ | c Type I | lt – Fun | ctionally | integra | ted | | d 🗍 | Type III- | Other | |
| е | tnar | checking this n foundation n (a)(2). | box, I certify that the or nanagers and other tha | ganization is not controll n one or more publicly su | ed direct upported | tly or inc organiz | lirectly t ations d | y one o escribe | r more o | disqualifie ion 509(a) | d persons)(1) or sec | othei tion | r |
| f | If th | e organization | n received a written det | ermination from the IRS | that is a | Type I, | Type II | or Type | III supp | orting org | anization, | | |
| g | | | | ition accepted any gift or | | | | | | | | | |
| | | | | | | | | | ٠. | | | Yes | No |
| | (i) | a person wh | no directly or indirectly | controls, either alone or t | ogether | with per | sons de | scribed | in (ii) ar | nd (iii) | | | |
| | | | | upported organization?. | | | | | | | 11 g (i) | | L |
| | (ii) | | | ribed in (i) above? | | | | | | | | | |
| _ | (iii) | | | described in (i) or (ii) ab | | | | | | | 11 g (iii) | | <u> </u> |
| <u>h</u> | Prov | ide the follow | ring information about t | he supported organization | ns. | | · | | | ····· | | | |
| | (i) Nami Or | e of Supported ganization | (ii) EiN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | organiza (i) liste gove | ts the tion in col. d in your erning ment? | the organ | ou notify lization in (i) of upport? | organizat | s the ion in col. zed in the S.? | (vii) Amoun | t of Sup | port |
| | | | | | Yes | No | Yes | No | Yes | No | | | |
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| Total | | | | | | | | | | | | | |
| ***** | or Privac | v Act and Papen | work Reduction Act Notice | see the Instructions for Form | 990 or 990 | L.F7 | | | Schedula | A (Form | 990 or 99 | n. Eフ | 2000 |
| | | | | | | | | • | ノマリリレははほし | o zna (a ∪iiiti | シンし ひに ジブ | · " — —] | ムロロブ |

Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 beginning in) 🟲 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')... 5,229,933. 3,683,866 3,545,199. 4,401,599 4,171,768 21,032,365. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-through 3.... 3,683,866. 3,545,199. 5,229,933. 4,401,599. 4,171,768. 21,032,365. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) ... 2,688,780. Public support. Subtract line 5 from line 4 . . . 18,343,585. Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2005 (b) 2006 (c) 2007(d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 3,683,866 3,545,199 5,229,933 4,401,599 4,171,768 21,032,365. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources 59,184 77,106 27,749 42,141 103,929 310,109. Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in 388 4.618 34,340 14,669 54,015. Total support. Add lines 7 through 10 21,396,489. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here..... Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)..... 85.73% Public support percentage from 2008 Schedule A, Part II, line 14 86.88% 15 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

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

| Sa | ction A. Public Support | sched the box on | into a ort are in | | | | |
|--|---|--|---|---|--|-------------------|-----------------------------------|
| | endar year (or fiscal yr beginning in) | (a) 2005 | (F) 2006 | (-) 0007 | T 6-0 2000 | () 0000 T | |
| 1 | | | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 2 | ~ · · · · · · · · · · · · · · · · · · · | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| | Total. Add lines 1 through 5 | | | | | | |
| i | a Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year | | | | | | |
| c | Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line | | | EF | | | |
| | 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| | | | | · | | | |
| Cale | ndar year (or fiscal yr beginning in) 🟲 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a | Amounts from line 6 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a | Amounts from line 6 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a b | Amounts from line 6 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a b | Amounts from line 6 | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 10 a b c 11 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 9 10 a b c 11 12 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and | s for the organiza | tion's first, second | | | | |
| 9 10 a b c 11 12 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and ston C. Computation of Putions | s for the organiza stop here | tion's first, second | d, third, fourth, or | fifth tax year as a | section 501(c)(3) | |
| 9 10 a b c 11 12 13 14 Sect | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the safe of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 | s for the organiza stop here Dlic Support P 19 (line 8, column | tion's first, second | d, third, fourth, or | fifth tax year as a | section 501(c)(3) | |
| 9 10 a b c 11 12 13 14 Sect | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and iton C. Computation of Public support percentage from 20 Public support percentage from 2 | s for the organiza stop here Dlic Support P 19 (line 8, column 008 Schedule A, | tion's first, second ercentage (f) divided by line Part III, line 15 | d, third, fourth, or | fifth tax year as a | section 501(c)(3) | |
| 9 10 a b c 11 12 13 14 Sect 15 16 Sect | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage from 20 public support percentage from 20 ion D. Computation of Investigation. | s for the organiza stop here blic Support P 19 (line 8, column 008 Schedule A, estment Incon | tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage | d, third, fourth, or | fifth tax year as a | section 501(c)(3) | |
| 9 10 a b c 11 12 13 14 Sect 15 16 Sect | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 Public support percentage from 20 Investment income percentage for | s for the organiza stop here Dic Support P (line 8, column 008 Schedule A, estment Incon r 2009 (line 10c, c | tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage | d, third, fourth, or 13, column (f)) | fifth tax year as a | section 501(c)(3) | % 9% |
| 9 10 a b c 11 12 13 14 Sect 15 16 Sect 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 Public support percentage from 21 Investment income percentage for Investment income percentage for | s for the organiza stop here Dlic Support P 9 (line 8, column 008 Schedule A, estment Incon r 2009 (line 10c, com 2008 Schedule | tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 | d, third, fourth, or 13, column (f)) | fifth tax year as a | section 501(c)(3) | |
| 9 10 a b c 11 12 13 14 Sect 15 16 Sect 17 18 19 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 Public support percentage from 20 Investment income percentage for 33-1/3 support tests — 2009. If the more than 33-1/3%, check this box | s for the organiza stop here Dlic Support P 9 (line 8, column 008 Schedule A, estment Incor r 2009 (line 10c, com r 2008 Schedule e organization did x and stop here. | tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 I not check the bo The organization | d, third, fourth, or 13, column (f)) by line 13, column 7 | fifth tax year as a | section 501(c)(3) | % % % % le 17 is not |
| 9 10 a b c 11 12 13 14 Sect 15 16 Sect 17 18 19 a b | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 Public support percentage from 21 Investment income percentage for Investment income percentage for | s for the organization here. 9 (line 8, column on schedule A, estment Incomer 2009 (line 10c, come 2008 Schedule e organization did and stop here. e organization did this box and stop | tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 I not check the bo The organization I not check a box here. The organiz | by line 13, column (f)) to on line 14, and qualifies as a public on line 14 or 19a, ation qualifies as a | fifth tax year as a (f)) line 15 is more thicly supported org and line 16 is more a publicly supported | section 501(c)(3) | % % % % set 17 is not and line 18 |

| Schedule A (Form 990 | 0 or 990-EZ) 200 | 9 COMPE | TITIVE | ENTERP | RISE I | NSTITU' | TE | 52-135178 | 5 | Page 4 |
|--|---|---|---|-----------------------|---------------------|---------------------------------|--|---|--------------------------------------|-----------------------------|
| Part IV Suppler Part II, | mental Inforn line 17a or 17 | n ation. Con 7b; and Pai | nplete th t III, line | is part to 12. Pro | provide vide any | e the ex y other a | planations additional in | required by Par nformation. See | t II, line instructi | 10; ons. |
| Other Income | Part II, L | <u>ine 10</u> | | | | | | · — — — — — — — — | · | |
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

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

OMB No. 1545-0047

Open to Public
Inspection

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: complete Part I-A only.

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

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

| If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), ti | ation answered ites, to Form 990, Part IV, line : |) (Proxy 13 | ax), tnen |
|--|---|-------------|-----------|
|--|---|-------------|-----------|

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

| Name | e of organization | | A CONTRACTOR OF THE CONTRACTOR | Employer identific | ation number | | | | | |
|------|--|--|--|--|--|--|--|--|--|--|
| CO | MPETITIVE ENTERPRIS | SE INSTITUTE | | 52-135178 | 35 | | | | | |
| Pa | rt I-A Complete if the o | organization is exempt under secti | on 501(c) or is a | section 527 organ | ization. | | | | | |
| 1 | Provide a description of the | organization's direct and indirect political c | ampaign activities in I | Part IV. | | | | | | |
| 2 | | | | | | | | | | |
| 3 | Volunteer hours | | | | | | | | | |
| Pa | rt I-B Complete if the o | rganization is exempt under secti | on 501(c)(3). | | | | | | | |
| 1 | Enter the amount of any exc | cise tax incurred by the organization under s | section 4955 | > \$ | | | | | | |
| 2 | Enter the amount of any exc | cise tax incurred by organization managers | under section 4955 | ► \$ | 5 | | | | | |
| 3 | If the organization incurred a | a section 4955 tax, did it file Form 4720 for | this year? | | Yes No | | | | | |
| 4: | Was a correction made? | | | | Yes No | | | | | |
| | f 'Yes,' describe in Part IV. | | | | _ | | | | | |
| Pai | t I-C Complete if the o | rganization is exempt under secti | on 5 <mark>01(c)</mark> , excep | t section 501(c)(3) | | | | | | |
| 1 | Enter the amount directly ex | pended by the filing organization for section | 527 exempt function | i activities ▶ \$ | | | | | | |
| 2 | Enter the amount of the filing function activities | g organization's funds contributed to other o | organizations for secti | on 527 exempt ➤ \$ | | | | | | |
| 3 | Total of exempt function expline 17b | enditures. Add lines 1 and 2. Enter here an | d on Form 1120-POL | , | | | | | | |
| 4 | Did the filing organization file | Form 1120-POL for this year? | | | Yes No | | | | | |
| 5 | Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. | | | | | | | | | |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter-0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0- | | | | | |
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2009

| Part II-A Complete section 50 | if the organization | n is exempt under s | ection 501(c)(3) an | 52-13 d filed Form 5768 (| 51785 Page (election under | | | | | |
|---|---|--|--|--|--|--|--|--|--|--|
| A Check ► if the f | iling organization belo | ongs to an affiliated group | | | | | | | | |
| B Check ► if the f | iling organization che | cked box A and 'limited co | ontrol' provisions apply. | | | | | | | |
| | m 'expenditures' mea | ng Expenditures — ins amounts paid or incu | • | (a) Filing organization's totals | (b) Affiliated group totals | | | | | |
| 1 a Total lobbying expend | itures to influence pul | olic opinion (grass roots lo | obbying) | 7,202. | | | | | | |
| b Total lobbying expend | itures to influence a le | egislative body (direct lobi | oying) | . 11.441 | | | | | | |
| c Total lobbying expend | itures (add lines 1a ai | nd 1b) | ******** | 18,643. | | | | | | |
| d Other exempt purpose | expenditures | · · • • • • • • • • • • • • • • • • • • | | 4.314.328 | | | | | | |
| e Total exempt purpose | expenditures (add lin- | es 1c and 1d) | | 4,332,971. | | | | | | |
| DOTA COLUMNS. | | ount from the following tab | ole in | 366,649. | | | | | | |
| If the amount on line 1e, co | olumn (a) or (b) is: | he lobbying nontaxable : | amount is: | | | | | | | |
| Not over \$500,000 | | 20% of the amount on line 1e. | | | And the second | | | | | |
| Over \$500,000 but not over \$ | 1,000,000 | \$100,000 plus 15% of the excess | s over \$500,000. | | | | | | | |
| Over \$1,000,000 but not over | | \$175,000 plus 10% of the excess | s over \$1,000,000. | | A Constant of the Constant | | | | | |
| Over \$1,500,000 but not over | \$17,000,000 | \$225,000 plus 5% of the excess | over \$1,500,000. | | | | | | | |
| Over \$17,000,000 | | \$1,000,000. | | | | | | | | |
| g Grassroots nontaxable | amount (enter 25% o | f line 1f) | P4-P | 91,662. | | | | | | |
| h Subtract line 1g from li | ne la. If zero or less, | enter -0 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 0 | | | | | | |
| i Subtract line 1f from lin | 0. | | | | | | | | | |
| j If there is an amount of section 4911 tax for this | J If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting | | | | | | | | | |
| 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.) | | | | | | | | | | |
| | Lobby | ing Expenditures During | 4-Year Averaging Peri | od | ************************************** | | | | | |
| Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total | | | | | |
| 2a Lobbying non-taxable amount | 328,550 | . 410,135. | 383,083. | 366,649. | 1,488,417. | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 2,232,626. | | | | | |
| c Total lobbying expenditures | 34,282 | . 14,473. | 43,374. | 18,643. | 110,772. | | | | | |
| d Grassroots nontaxable amount | 82,138 | | 95,771. | 91,662. | 372,105. | | | | | |
| | | A PLANTAGE STATE OF THE PARTY O | STATE OF THE PARTY | Promote Company of the Company of th | | | | | | |

f Grassroots lobbying expenditures BAA

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2009

7,202.

558,158.

25,508.

0.

18,306.

0.

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)).

| 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? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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 similar means? i Other activities? if Yes,' describe in Part IV J Total, Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif Yes,' enter the amount of any tax incurred under section 4912 c if Yes,' enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if tile Form 4720 for this year? Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying and political expenditures from the prior year? 3 Did the organization and similar amounts from members a Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Dues, assessments and similar amounts from members 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess dose the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politi | | 1: | a) | (b) |
|--|--|------------|-----------|--|
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| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 2 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 1 Dues, assessments and similar amounts from members 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2 Description last year 3 Did the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 Description last year l | 1 Were substantially all (90% or more) dues received nondeductible by members? | | | |
| 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a b Carryover from last year 2b c Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) 5 2 Taxable amount of lobbying and political expenditures (see instructions) 5 3 Supplemental Information 6 5 Supplemental Information 7 5 Supplemental Information 8 5 Supplemental Information 8 5 Supplemental Information 9 5 Supplemental Information 10 6 Supplemental Information 10 7 Suppleme | | | | |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a b Carryover from last year 2b c Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) 5 5 Taxable amount of lobbying and political expenditures (see instructions) 5 5 Taxable amount of porvide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. line 1i. | | | | |
| if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.' 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a b Carryover from last year 2b c Total 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Part IV Supplemental Information complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. lso, complete this part for any additional information. | Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) | ·V5) | Or s | ection 501(c)(6) |
| 1 Dues, assessments and similar amounts from members | if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 | is ar | ıswe | red 'Yes.' |
| 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year | , | | | |
| expenses for which the section 527(f) tax was paid). a Current year | 1 Dues, assessments and similar amounts from members | | 7 | |
| b Carryover from last year | expenses for which the section 527(f) tax was paid). | | | |
| c Total | a Current year | | 2a | |
| Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | b Carryover from last year | Г | 2b | |
| Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | c Total | [| 2c | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 2art IV Supplemental Information omplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. lso, complete this part for any additional information. | | | 3 | , |
| expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions). Part IV Supplemental Information complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Iso, complete this part for any additional information. | 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political | | | V- years - service delication (section) |
| Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Iso, complete this part for any additional information. | , | | 4 | |
| omplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Iso, complete this part for any additional information. | | <u></u> | 5 | |
| lso, complete this part for any additional information. | | | | |
| | omplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and P lso, complete this part for any additional information. | art II- | B, line | e 1i. |
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| Schedule C (Form 990 or 990-EZ) 2009 COMPETITIVE ENTERPRISE INSTITUTE Part IV Supplemental Information (continued) | 52-1351785 | Page 4 |
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| Part IV (Supplemental Information (continued) | * | |
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

conservation easements.

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number

COMPETITIVE ENTERPRISE INSTITUTE 52-1351785 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year a Total number of conservation easements 2a 2b c Number of conservation easements on a certified historic structure included in (a) 2c 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year > Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and

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

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

include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for

- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- **b** Assets included in Form 990, Part X

| Schedule D (Form 990) 2009 COMPETITIVE Part III Organizations Maintaining C | | | 52-135 | | Page 2 |
|--|--|---|--|---------------------------------------|---|
| Using the organization's acquisition acces | | | | ···· | |
| items (check all that apply): | | • | iat are a significant use | or its collecti | on |
| a Public exhibition | | or exchange programs | | | |
| b Scholarly research | e [_] Other | *************************************** | | * | *************************************** |
| c Preservation for future generations | | | | | |
| 4 Provide a description of the organization's Part XIV. | | | | | |
| 5 During the year, did the organization solic assets to be sold to raise funds rather tha | t or receive donations of art, n to be maintained as part of | historical treasures, or the organization's colle | other similar | Yes | No |
| Part IV Escrow and Custodial Arran 9, or reported an amount on | gements Complete if or | rganization answe | | | |
| | | | | | -1-11-1 |
| 1a Is the organization an agent, trustee, cust included on Form 990, Part X? | | | er assets not | Yes | No |
| b If 'Yes,' explain the arrangement in Part X | IV and complete the following | g table: | <u> </u> | · · · · · · · · · · · · · · · · · · · | |
| | | | | Amount | ************* |
| c Beginning balance | | | | · · · · · · · · · · · · · · · · · · · | |
| d Additions during the year | | | | | |
| e Distributions during the year | | | | | |
| f Ending balance | ************ | | 1f | | |
| a Did the organization include an amount on | Form 990, Part X, line 21? | | *************************************** | Yes | No |
| b If 'Yes,' explain the arrangement in Part X | IV. | | | | t-mal |
| rt V Endowment Funds Complete | if organization answere | ed 'Yes' to Form 99 | 0. Part IV. line 10 | • | |
| | irrent year (b) Prior year | | | (e) Four ye | ars hack |
| a Reginning of year balance | | | \ | (0)100170 | MALESCAL MICHELLER |
| b Contributions | | | | | |
| | | | | | |
| c Net Investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities | | | | | |
| and programs | ** | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
| Provide the estimated percentage of the year | ar end balance held as: | | | | |
| a Board designated or quasi-endowment | % | | | | |
| b Permanent endowment ► | 95 | | | | |
| c Term endowment ► % | Name - | | | | |
| | | | | | |
| a Are there endowment funds not in the poss organization by: | ession of the organization that | at are held and adminis | stered for the | Yes | No |
| organization by: | | | | | NO |
| (i) unrelated organizations | | | | . 3a(i) | j |
| (i) unrelated organizations | | | | 2-/:3 | |
| (ii) related organizations | | • | | | |
| (ii) related organizationsb If 'Yes' to 3a(ii), are the related organization | ns listed as required on Sche | edule R? | | | |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organizatio Describe in Part XIV the intended uses of t | ns listed as required on Sche he organization's endowment | edule R?t funds. | | | |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organizatio Describe in Part XIV the intended uses of the stand of the | ns listed as required on Sche he organization's endowment s, and Equipment. See | edule R? t funds. Form 990, Part X, | line 10. | . 3b | |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organizatio Describe in Part XIV the intended uses of t | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis | edule R?t funds. Form 990, Part X, (b) Cost or other | line 10, | | 'alue |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organization Describe in Part XIV the intended uses of the second of the seco | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis (investment) | edule R? t funds. Form 990, Part X, | line 10. | . 3b | 'alue |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organizatio Describe in Part XIV the intended uses of t Investments—Land, Buildings Description of investment a Land | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis (investment) | edule R?t funds. Form 990, Part X, (b) Cost or other | line 10, | . 3b | ralue |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organization Describe in Part XIV the intended uses of the intended uses in intended use | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis (investment) | edule R? t funds. Form 990, Part X, (b) Cost or other basis (other) | line 10. (c) Accumulated Depreciation | (d) Book \ | |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organizatio Describe in Part XIV the intended uses of to the intended uses of the intended | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis (investment) | edule R? t funds. Form 990, Part X, (b) Cost or other basis (other) | line 10. (c) Accumulated Depreciation 43,924. | (d) Book V | ,729. |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organization Describe in Part XIV the intended uses of the intended us | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis (investment) | edule R? t funds. Form 990, Part X, (b) Cost or other basis (other) | line 10. (c) Accumulated Depreciation | (d) Book V | |
| (ii) related organizations b If 'Yes' to 3a(ii), are the related organization Describe in Part XIV the intended uses of to the intended uses of the intended | ns listed as required on Sche he organization's endowment s, and Equipment. See (a) Cost or other basis (investment) | edule R?t funds. Form 990, Part X, (b) Cost or other basis (other) 121,653. 558,380. | (c) Accumulated Depreciation 43,924. 522,231. | (d) Book V | ,729. |

| Part VII Investments-Other Securities See F | orm 990, Part X, I | ine 12. | 331/63 Page |
|---|--|---|--|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of va | luation |
| Financial derivatives | | Cost or end-of-year n | narket value |
| Closely-held equity interests | | | |
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| Total (Column (h) must agual Form 000 Day V and (D) line 12) | | | |
| Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) | Form 000 Part V | line 12) | |
| Part VIII Investments—Program Related (See F | | | |
| (a) Description of investment type | (b) Book value | (c) Method of val Cost or end-of-year m | uation arket value |
| | | 333, 37, 31, 37, 37, 37, 37, 37, 37, 37, 37, 37, 37 | arror variae |
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| Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) | | | |
| Part IX Other Assets (See Form 990, Part X, I | ine 15) | | |
| | scription | | (b) Book value |
| DEPOSITS | W-W- | | 45,839. |
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| Total. (Column (b) must equal Form 990, Part X, col.(B), line | e 15) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > | e <i>15</i>) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | e 15) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| Part X Other Liabilities (See Form 990, Part > (a) Description of Liability | (, line 25) | | 45,839. |
| | (, line 25) | | 45,839. |

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

| | edule D (Form 990) 2009 COMPETITIVE ENTERPRISE INSTITUTE | 52-1351 | .785 Page |
|------|---|---------------------|------------------|
| | rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | * |
| 1 | Total revenue (Form 990, Part VIII,column (A), line 12) | | 4,247,228. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | 4,332,971. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | | -85,743. |
| 4 | Net unrealized gains (losses) on investments | | 85,839. |
| 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 | | 85,839. |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | ,,,,,,,, | 96. |
| Pai | TXII Reconciliation of Revenue per Audited Financial Statements With Revenue per | Return | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 4,339,158. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| ε | Net unrealized gains on investments | 9. | |
| ł | Donated services and use of facilities | 1. | |
| • | Recoveries of prior year grants | | |
| C | Other (Describe in Part XIV) | | |
| | Add lines 2a through 2d | 2e | 91,930. |
| | Subtract line 2e from line 1 | | 4,247,228. |
| | Amounts included on Form 990, Part VIII, line 12, but not on line1: | | ¥,227,220. |
| | Investments expenses not included on Form 990, Part VIII, line 7b | | |
| | Other (Describe in Part XIV) | | |
| | Add lines 4a and 4b | | |
| | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 4,247,228. |
| Par | tXIII Reconciliation of Expenses per Audited Financial Statements With Expenses p | er Returr | 4,247,220. |
| | Total expenses and losses per audited financial statements | | 4,339,062. |
| | Amounts included on line 1 but not on Form 990, Part IX, line 25: | ` - - | 4,339,002. |
| | | , | |
| | Donated services and use of facilities | | |
| | Other losses | | |
| | Other (Describe in Part XIV) | | |
| | | _ | |
| | Add lines 2a through 2d | | 6,091. |
| | Subtract line 2e from line 1 | 3 | 4,332,971. |
| | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| | Investments expenses not included on Form 990, Part VIII, line 7b | _ | |
| | Other (Describe in Part XIV) | _ | |
| | Add lines 4a and 4b | | |
| 5 | Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.) | 5 | 4,332,971. |
| arı | XIV Supplemental Information | | |
| ne 4 | lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b. Also complete this paration. | art to provid | e any additional |
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| Schedule D (Form 990) 2009 COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 | Page 5 |
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| Schedule D (Form 990) 2009 COMPETITIVE ENTERPRISE INSTITUTE Part XIV Supplemental Information (continued) | | |
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form990 or Form 990-EZ. ► See separate instructions.

Name of the organization Employer identification number 52-1351785 COMPETITIVE ENTERPRISE INSTITUTE Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations X Solicitation of non-government grants Х Internet and email solicitations Solicitation of government grants Phone solicitations X Special fundraising events In-person solicitations 2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser (i) Name of individual (ii) Activity (iv) Gross receipts (or retained by) (vi) Amount paid to (or retained by) or entity (fundraiser) have custody or control fundraiser listed in from activity of contributions? col.(i) organization Yes CLEARWORD COMMUNICATIONS GROUP CONSULTING 407,000 25,596 381,404. 407,000. 25,596. 381,404. List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. All 50 States

| | | reported more than \$15,000 on F | r the organization Form 990-EZ, line | e 6a. List events with | orm 990, Part IV, gross receipts gre | ater than \$5,000. | |
|--------------|---|--|---|----------------------------|---|--|--|
| | | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total Events (Add coi. (a) through col. (c)) | |
| K E V | | | (event type) | (event type) | (total number) | | |
| REVENUE | 1 | Gross receipts | | | | | |
| Ĕ | 2 | Less: Charitable contributions | | | | | |
| | 3 | Gross income (line 1 minus line 2) | | | | | |
| DIRECT | 4 | Cash prizes | | | | | |
| | 5 | Noncash prizes | | | | | |
| | 6 | Rent/facility costs | | | | | |
| | 7 | Food and beverages | | | | | |
| χρ | 8 | Entertainment | | | | | |
| EXPEZSES | 9 | Other direct expenses | | | | | |
| 5 | 10 | Direct expense summary. Add lines 4- th | | | | | |
| | 11 | Net income summary. Combine lines 3, c | | | | | |
| ra | er in | Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a | ation answered 'Y i. | es to Form 990, Pa | rt IV, line 19, or re | ported more than | |
| | | | (a) Bingo | (b) Pull tabs/Instant | (c) Other gaming | (d) Total gaming | |
| REVENUE | | | (a) Dingo | bingo/progressive bingo | (c) Other gaming | (Add col. (a) through col. (c)) | |
| E N | | | | Dirigo | | coi. (c)) | |
| Ě | 1 | Gross revenue | | | | | |
| E | 2 | Cash prizes | | | | | |
| D-RECT | | | | | | | |
| D-RECT | 3 | Non-cash prizes | | | | | |
| Ť | 4 | Rent/facility costs | | | | | |
| | 5 | Other direct expenses | | | | | |
| | _ | | Yes % | | Yes% | | |
| | 6 | Volunteer labor | No | No | No | | |
| | 7 | Direct expense summary. Add lines 2 thro | ugh 5 in column (d). | | | | |
| | 8 | Net gaming income summary. Combine lir | nes 1, column (d) and | l line 7 | | | |
| ' | | | | | | YES NO | |
| 9 | 9 Enter the state(s) in which the organization operates gaming activities: | | | | | | |
| | | e organization licensed to operate gaming o,' explain: | activities in each of th | nese states? | | 9a | |
| _ | | | | | | | |
| 10a | 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? | | | | | | |
| b | | | | | | | |
| | | | | | ··· ·· · · · · · · · · · · · · · · · · | | |
| 11 | Does | the organization operate gaming activities | with nonmembers? . | | | 11 | |
| 12 | Is the | e organization a grantor, beneficiary or trus | stee of a trust or a me | ember of a partnership or | other entity formed to | 10 | |
| | auiiii | nister charitable gaming? | | | <u> </u> | 12 | |

| Schedule G (Form 990 or 990-EZ) 2009 COMPET | FITIVE ENTERPRISE INSTITUTE | 52-13517 | | | age: |
|---|--|----------------------------|---------------|------------|--------|
| 13 Indicate the negrounders of security and the | annaka di Vivi | 1 1 | | YES | NO |
| 13 Indicate the percentage of garning activity op | | | | | |
| | •••••• | | | | |
| | | | _ - | | |
| 14 Enter the name and address of the person wi | ho prepares the organization's gaming/special even | ts books and records: | | | |
| | | | | | |
| Name: • | | | | | |
| | | | | | |
| Address: <u></u> | | | | | |
| | | | | | |
| | third party from whom the organization receives gan | | 15a | | |
| b If 'Yes,' enter the amount of gaming revenue | received by the organization \$ | and the amount | | | |
| of gaming revenue retained by the third party | \$ | | | | |
| c If 'Yes,' enter name and address of the third p | party: | | | | ans. |
| | | | | | |
| Name: ► | | | | | |
| | | | | | |
| Address: ► | | | | | |
| | | | | | |
| 16 Gaming manager information | | | | | |
| | | | | | |
| Name: ► | | | | | |
| | | | | | |
| Gaming manager compensation ► \$ | | | | | |
| · material control | | | | | |
| Description of services provided: > | | | | | |
| effect black during | are the the the self of the self of the tree and the tree and the tree tree and the tree tree and the tree tree tree | | | | |
| Director/officer Employe | e Independent contractor | | | | |
| | La masportation contractor | | | | |
| 17 Mandatory distributions | | | | | |
| • | | | | | |
| a is the organization required under state law to state daming license? | make charitable distributions from the gaming proc | eeds to retain the | 17a | SEE SE | 100.00 |
| | er state law to be distributed to other exempt organ | | 1,0 | | |
| organization's own exempt activities during the | | manorio or openent tile | | | |
| ВАА | TEEA3703 02/05/10 | Schedule G (Form 99 | 30 or 990 | -F7) / | 2000 |
| | | | - O O D D D O | benefite 6 | ムロロゴ |

SCHEDULE I

Department of the Treasury Internal Revenue Service

Governments and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

2009

OMB No. 1545-0047

ASSISTANCE WIT <u>2</u> Open to Public Inspection (h) Purpose of grant or assistance Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form Employer identification number X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 52-1351785 (g) Description of non-cash assistance 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 criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant 22,346 Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable 501(C)(4) Part | General Information on Grants and Assistance 27-0678072 (a) EIN COMPETITIVE ENTERPRISE INSTITUTE 1 1 1 1 (a) Name and address of organization 1 WASHINGTON DC 20036 1899 L STREET, NW or government FREEDOM ACTION 1 Name of the organization

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

3 Enter total number of other organizations

Enter total number of section 501(c)(3) and government organizations

TEEA3901 02/10/10

Schedule I (Form 990) 2009

COMPETITIVE ENTERPRISE INSTITUTE Schedule 1 (Form 990) 2009 PartIII

Page 2

52-1351785

* 1 į 1 1 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (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. OR ACHIEVING OBJECTIVES, AND THAT THEY ARE FINANCIALLY ABLE TO COMPLETE THE PROJECT. THE ORGANIZATION VERIFIES THAT THE GRANTEE'S PROJECT IS ON-TRACK FOR RESULTS (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 22,500. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Pt_I_Line_2 Pt I Line 2 CASH GRANT

BAA

Schedule I (Form 990) 2009

SCHEDULE J (Form 990)

Compensation Information

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Employer identification number

| COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 | | | |
|---|--|---------------|-----|----------|
| Part I Questions Regarding Compensation | | | | |
| | | $\overline{}$ | Yes | No |
| 1a Check the appropriate box(es) if the organization provided any of the follows. VII, Section A, line 1a. Complete Part III to provide any relevant information. | wing to or for a person listed in Form 990, Part on regarding these items. | | | |
| First-class or charter travel | g allowance or residence for personal use | | | |
| Travel for companions Payme | nts for business use of personal residence | | | |
| Tax indemnification and gross-up payments Health | or social club dues or initiation fees | | | |
| Discretionary spending account Person | al services (e.g., maid, chauffeur, chef) | | | |
| | | | | |
| b If any of the boxes on line 1a are checked, did the organization follow a w reimbursement or provision of all of the expenses described above? If 'No | ritten policy regarding payment or ,' complete Part III to explain | 1 b | | |
| 2 Did the organization require substantiation prior to reimbursing or allowing trustees, and the CEO/Executive Director, regarding the items checked in | expenses incurred by all officers, directors, line 1a? | 2 | | |
| 3 Indicate which, if any, of the following the organization uses to establish the CEO/Executive Director. Check all that apply. | ne compensation of the organization's | | | |
| Compensation committee Written | employment contract | | | |
| Independent compensation consultant Compe | nsation survey or study | | | |
| X Form 990 of other organizations X Approve | al by the board or compensation committee | | | |
| | | | | |
| 4 During the year, did any person listed in Form 990, Part VII, Section A, lin or a related organization: | e 1a with respect to the filing organization | | | |
| a Receive a severance payment or change-of-control payment? | | 4a | | X |
| b Participate in, or receive payment from, a supplemental nonqualified retire | | 4b | | X |
| c Participate in, or receive payment from, an equity-based compensation are | | 4c | | X |
| If 'Yes' to any of lines 4a-c, list the persons and provide the applicable am | | | | |
| | | | | |
| Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5 | .9 . | | | |
| 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organic contingent on the revenues of: | zation pay or accrue any compensation | | | |
| a The organization? | | 5a | | 77 |
| b Any related organization? | | 5b | | <u>X</u> |
| If 'Yes' to line 5a or 5b, describe in Part III. | | 30 | | |
| 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organize | zation pay or accrue any compensation | | | |
| contingent on the net earnings of: | | | | |
| a The organization? | | 6a | | Χ |
| b Any related organization? | | 6b | | Χ |
| If 'Yes' to line 6a or 6b, describe in Part III. | | | | |
| 7 For person listed in Form 990, Part VII, Section A, line 1a, did the organiza described in lines 5 and 6? If 'Yes,' describe in Part III | ation provide any non-fixed payments not | 7 | | Х |

If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

8

X

Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.....

COMPETITIVE ENTERPRISE INSTITUTE Schedule J (Form 990) 2009

Page 2 For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

52-1351785

| Note. The sum of columns (B)(i) (iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a. | 3)(i).(iii) must equal the ap | pplicable column (D) or c | olumn (E) amounts on | Form 990, Part VII, line | Ja. | | (Ang) e |
|--|-------------------------------|--|--|-----------------------------|--|---|---|
| | (B) Breakdown | (B) Breakdown of W-2 and/or 1099-MISC compensation | C compensation | (C) Retirement and | (D) Nonfaxable | (E) Total of only | (F) Company |
| (A) Name | (l) Base compensation | (ii) Bonus and incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (C) (O)-(D) (B)(O)-(D) | reported in prior Form 990 or |
| FRED 1. SMITH IR | 0 210,477. | 0 | 1 1 | | 8,640. | 219,117. | Form 990·EZ |
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| <u> </u> | (ii) | A CONTRACTOR OF THE CONTRACTOR | | | | 1 | |
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| | (E) | | |) | | 1 | |
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Schedule J (Form 990) 2009

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

| | Employer identification number |
|---|---|
| COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 |
| Pt VI-A, Line 2 THE PRESIDENT IS RELATED TO A BOARD MEMBER BY MA | RRIAGE. |
| Pt VI-B, Line 11A A COPY OF THE 990 IS PROVIDED TO THE GOVERNING B | ODY UPON COMPLETION. |
| Pt VI-B, Line 12c OFFICERS, DIRECTORS, AND EMPLOYEES ARE REQUIRED | TO SIGN A CONFLICT |
| OF INTEREST STATEMENT ANNUALLY AND DISCLOSE ANY | CONFLICTS OR |
| POTENTIAL CONFLICTS OF INTEREST. | · · · · · · · · · · · · · · · · · · · |
| Pt VI-B, Line 15 CEI HAS A COMPENSATION COMMITTEE COMPRISED OF BOAR | RD MEMBERS TO DETERMINE |
| THE COMPENSATION OF THE TOP MANAGEMENT OFFICIAL. | · · · · · · · · · · · · · · · · · · · |
| DECISIONS OF THIS COMMITTEE ARE BASED ON COMPARATIVE ANAL | YSIS OF COMPENSATION LEVELS |
| AT PEER LEVEL NON-PROFIT ORGANIZATIONS. | |
| Pt VI-C, Line 19 A COPY OF THE 990 IS AVAILABLE TO THE PUBLIC UPON | N REQUEST. |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

COMPETITIVE ENTERPRISE INSTITUTE

(A) Name, address, and EIN of disregarded entity

OMB No. 1545-00#7

(F)
Direct controlling
entity No. 1 2009 Open to Public Inspection ń. Employer identification number 52-1351785 (E) End-of-year assets **Part** Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. (**D)** Total income Related Organizations and Unrelated Partnerships Legal domicile (state or foreign country) (B) Primary activity

Partity Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| | אוווא וווכ ומע אבמו י) | | | | in the second |
|--|-------------------------|--|--|---|--|
| (A) Name, address, and EIN of related organization | (B) Primary activity | (C) Legal domicile (state or foreign country) | Exempt Code section Public charity status | Public charity status | (F) Direct controlling |
| FREEDOM ACTION, INC. 27-0678072 | CHARITABLE, EDUCATION, | | | ((2)(2) | - South |
| 1899 L ST NW, 12 FLOOR, WASHINGTON DC 20036 AND | AND SOCIAL WELFARE DC | DC | 501(C)(4) | | A[5] |
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Schedule R (Form 990) (2009)

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

Schedule R (Form 990) 2009 COMPETITIVE ENTERPRISE INSTITUTE

Partin Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34. 52-1351785

Page 2

| | Generalion managing partner? | Yes No | _ | - | والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج | | | A) a | - | :. · | | - |
|----------------------------------|---|--|----------|---|--|--|------|------|---|----------------|---|--|
| | Code V-UBI amount in box 20 of Schedule K-1 | <u>i </u> | | | | | | | | | | |
| | (H) Dispropor- tionate Ilocations? | Yes No | | | | | | | | | | |
| ar.) | (G) Share of end-of-year assets | | | | | | | - | | | | |
| (a) The control of the tax year. | (F) Share of total income | | | | | | | | | and the second | | |
| ed as a parmershi | Predominant income (related, unrelated, excluded from tax under | sections 512-514) | | | | | | | | | | |
| אוולמווטווא וופמו | (b) Direct controlling entity | | | | | | | | | | | |
| מופת מומי | Legal domicile (state or foreign | (Kalua) | | | | | | | | | - | |
| 6 | Primary Activity | | | | | *************************************** | | | | | | *************************************** |
| (A) | Name, address, and EIN of related organization | | | | | The state of the s | | | | | | - Prince and a second s |

| ٦ , ا إ | (H) Percentage |
|---|--|
| e as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, anizations treated as a corporation or trust during the tax year.) | Type of entity Share of total income Share of end-of-year Percent (Conn. S. com.) |
| zation answered 'Ye tax year.) | (F) Share of total income |
| te if the organizations the | Legal domicile Direct Type of entity state or foreign controlling entity (C.com. S. com. |
| rust (Complet corporation or | (D) Direct Controlling entity |
| rporation or T treated as a | (C) Legal domicile (state or foreign |
| axable as a Co | (B) Primary Activity |
| Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answ line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) | (A) Name, address, and ElN of related organization |

| Annual Control of the | | acarea as a colporation of the lax year, | 2000000 | いこ かころの かっ | י ומא אנים: י | | A CONTRACTOR OF THE PERSON OF |
|--|-------------------------|---|-------------------------------------|---|--|---------------------------------------|---|
| (A) Name, address, and EiN of related organization | (B) Primary Activity | (C) Legal domicile (state or foreign country) | (D) Direct controlling entity | Type of entity (C corp., S corp., or trust) | Legal domicile Direct Type of entity (C corp., S corp, country) (C) (E) (F) (G) (G) (G) (C corp., S corp, or trust) | (G) Share of end-of-year assets | 8.8 |
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Schedule R (Form 990) (2009)

TEEA5002 02/05/10

BAA

52-1351785

Page 3 Schedule R (Form 990) (2009) (C) Amount involved Yes ļ __ 2 ۵ 19 <u>1</u> <u>ه</u> Ę, = d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) Purchase of assets from other organization(s) Exchange of assets m Sharing of facilities, equipment, mailing lists, or other assets Reimbursement paid to other organization for expenses Reimbursement paid by other organization for expenses q Other transfer of cash or property to other organization(s) 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. j Lease of facilities, equipment, or other assets from other organization(s) Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.) (B)
Transaction type (a-r) **b** Gift, grant, or capital contribution to other organization(s) Sale of assets to other organization(s) During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV: Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity TEEA5003 02/05/10 k Performance of services or membership or fundraising solicitations for other organization(s) (A)
Name of other organization Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. c Gift, grant, or capital contribution from other organization(s) r Other transfer of cash or property from other organization(s) Sharing of paid employees æ BAA 0 <u>8</u> <u>@</u> **(4)** 9 9

52-1351785 Page 4

4

and N

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

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

| (A) Name, address, and EIN of entity | (B) Primary activity | (C) Legal domicile (state or foreign country) | (B) Legal domicile Are all partners section (state or foreign 50(c)(3) country) | (E) Share of end-of-year assets | (F) Disproportionate allocations? | Code V-UBI amount in box 20 of Schedule K-1 | (H) General or managing partner |
|--------------------------------------|--|---|---|---|--|---|---|
| | A CONTRACTOR OF THE CONTRACTOR | | Yes No | | Yes No | Form (1065) | Yes No |
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| | | TEEA5004 02/05/10 | | | | Cobodula B (France | _ 800 |
| | | | | | | Schedule K (Form 990) (2009) | 05) 066 |

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, or 990-PF

OMB No. 1545-0047

2009

| Name of the organization | | | Employer identification number | | | |
|---|--|---|--|--|--|--|
| COMPETITIVE ENTERPRISE INSTI | TUTE | | 52-1351785 | | | |
| Organization type (check one): | | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organizat 4947(a)(1) nonexempt charitable trust no 527 political organization | | rivate foundation | | | |
| Form 990-PF | 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust tre 501(c)(3) taxable private foundation | eated as a private | e foundation | | | |
| Check if your organization is covered by the Gande: Only a section 501(c)(7), (8), or (10) org | eneral Rule or a Special Rule. ganization can check boxes for both the General | I Rule and a Spe | cial Rule. See instructions. | | | |
| General Rule — For an organization filing Form 990, 990-Ez contributor. (Complete Parts I and II.) | Z, or 990-PF that received, during the year, \$5, | 000 or more (in r | noney or property) from any one | | | |
| Special Rules — | | | | | | |
| SUSTABLED/T/UCDIEDICATION and received from | Form 990 or 990-EZ, that met the 33-1/3% supp m any one contributor, during the year, a contrit or (ii) Form 990-EZ, line 1. Complete Parts I and | hutian of the area | gulations under sections ater of (1) \$5,000 or (2) 2% of the | | | |
| addregate contributions of more than \$1.00 | zation filing Form 990 or 990-EZ, that received f 00 for use <i>exclusively</i> for religious, charitable, so . Complete Parts I, II, and III. | rom any one cor cientific, literary, | ntributor, during the year, or educational purposes, or the | | | |
| this box is checked, enter here the total corpurpose. Do not complete any of the parts is | 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 990-EZ, that received from any one contributor, during the year, contributions for use <i>exclusively</i> 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 <i>exclusively</i> 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 | 5,000 or more during the year | | | | | |
| 190-Pr) but it must answer ino on Part IV. line | the General Rule and/or the Special Rules doe e 2 of their Form 990, or check the box on line by g requirements of Schedule B (Form 990, 990-E | H of its Form 990 | ale B (Form 990, 990-EZ, or D-EZ, or on line 2 of its Form | | | |
| BAA For Privacy Act and Paperwork Reduction Form 990, 990EZ, or 990-PF. | on Act Notice, see the Instructions | Schedule B (Fo | orm 990, 990-EZ, or 990-PF) (2009) | | | |

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

CONSUMERS ARE BEST HELPED NOT BY GOVERNMENT REGULATION, BUT BY BEING ALLOWED TO MAKE THEIR OWN CHOICES IN A FREE MARKETPLACE.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4a (continued)

SEEKS TO DEVELOP NEW TOOLS FOR CHALLENGING GOVERNMENT REGULATIONS AND TO USE THESE IN ADMINISTRATIVE AND COURT ACTIONS TO BETTER BALANCE THE PUBLIC POLICY DEBATE AND TO RESTORE PROPERTY AND CONTRACT RIGHTS.

REGULATORY AND ECONOMIC LIBERY:

SEEKS TO ANALYZE AND PROMOTE FREE-MARKET REGULATORY POLICIES IN AREAS SUCH AS TECHNOLOGY, TELECOM, ELECTRICITY, FINANCIAL REGULATION AND PRIVACY.

OTHER SERVICES PROVIDED BY CEI INCLUDE PUBLICATIONS, MEDIA OUTREACH, OTHER POLICY ISSUES, AND LOBBYING.

Form 990, Page 6, Line 17 States Form 990 Filed In

| Alabama |
|----------------------|
| Alaska |
| Arizona |
| Arkansas |
| California |
| Colorado |
| Connecticut |
| District of Columbia |
| Florida |
| Georgia |
| Illinois |
| Kansas |
| Kentucky |
| Maine |
| Maryland |
| Minnesota |
| Massachusetts |
| Michigan |
| Mississippi |
| Montana |
| Missouri |
| New Hampshire |
| New Jersey |
| New Mexico |
| New York |
| North Carolina |
| North Dakota |
| Ohio |
| Oklahoma |
| Oregon |
| Pennsylvania |
| Rhode Island |
| South Carolina |
| |

Continued

| South Dakota | |
|---------------|--|
| Tennessee | |
| Utah | |
| Virginia | |
| Washington | |
| West Virginia | |
| Wisconsin | |

| | are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Additional (Not Automatic) 3-Month Extension of Time. Only file the original | (no conies needed) |
|---|--|--------------------------------|
| | Name of Exempt Organization | Employer identification number |
| Type or | | |
| print | COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 |
| File by the | Number, street, and room or suite number. If a P.O. box, see instructions. | For IRS use only |
| extended due date for | | |
| filing the return. See | 1899 L ST, NW - 12TH FLOOR | |
| instructions. | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |
| | WASHINGTON DC 20036 | |
| Check type | e of return to be filed (File a separate application for each return): | |
| X Form 9 | [FOIII 1041-A | Form 60 |
| Form 9 | 1. 5777 350 1 (300tion 401(a) of 400(a) trust) [Form 4/20 | Form 88 |
| Form 9 | 1 1. om 350 1 (nost other than above) | |
| 31UP: 00 | not complete Part II if you were not already granted an automatic 3-month extension on a previou | sly filed Form 8868. |
| • The bo | oks are in care of COMPETITIVE ENTERPRISE INSTITUTE | |
| | one No. (202) 331–1010 FAX No. (202) 331–0640 | |
| • If the o | rganization does not have an office or place of business in the United States, check this box | |
| If this is | s for a Group Return, enter the organization's four digit Group Exemption Number (GEAN | lf state : |
| whole group | 3, check this box and attach a list with | the names and EINs of a |
| nembers ti | ne extension is for. | |
| 4 I requ | est an additional 3-month extension of time until Aug 15 , 20 11. | |
| 5 For C | alendar year, or other tax year beginning Oct 1, 20 09, and ending Si | ep 30 . 20 10 |
| 0 11 11 115 | tax year is for less than 12 months, check reason: Initial return Final return | Change in accounting |
| 7 State | in detail why you need the extension THE DATA TO PREPARE A COMPLETE AND | |
| | URATE FEDERAL 990 IS STILL BEING COMPILED. | |
| ACC | | |
| ACC | | |
| ACC 8a If this | application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | 1 1 |
| 8a If this nonre | application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any fundable credits. See instructions | 8a \$ |
| 8a If this nonre | application is for Form 990-PF 990-T 4720 or 6069 opter approximately application | |
| 8a If this nonre b If this payment | application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tents made. Include any prior year overnayment allowed as a credit and any amount any amount and any amount and any amount and any amount and any amo | ах |
| 8a If this nonre b If this payme with F | application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tents made. Include any prior year overpayment allowed as a credit and any amount paid previously orm 8868. | ax 8b \$ |
| 8a If this nonre b If this payme with F | application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tents made. Include any prior year overnayment allowed as a credit and any amount any amount and any amount and any amount and any amount and any amo | ax 8b \$ |

| A. Signature X. |
|---|
| No If Yes Ariter delivery address below: I No |
| OGDEN, UT |
| 3. Service Type Certified Mall Express Mall Registered Return Receipt for Merchandl C.O.D. |
| 4. Restricted Delivery? (Extra Fee) ☐ Yes 2☐ ☐☐☐Ь ☐☐7Ь ☐ ☐ ☐ ☐ |
| |

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Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

| Department of Internal Revenu | the Treasury ue Service | ► File a separate application for each return. | | | |
|---|--|--|--------------------|-------------------|----------------|
| f you a | re filing for an A | Automatic 3-Month Extension, complete only Part I and check this box | | ···· | > X |
| If you a | re filing for an A | Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this fo | arm) | | · · · · · |
| Do not com | iplete Part II un | less you have already been granted an automatic 3-month extension on a previously filed | 7117. i Form 88 | 68. | |
| Part I | Automatic 3 | 3-Month Extension of Time. Only submit original (no copies needed). | | | |
| A corporation | n required to fil | le Form 990-T and requesting an automatic 6-month extension – check this box and com | plete Par | t I only | ►∏ |
| All other coi income tax : | rporations (inclu | uding 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request ar | ı extensio | n of time to f | ïle |
| the additional form 990-T. | al (not automati Instead, vou m | enerally, you can electronically file Form 8868 if you want a 3-month automatic extension in this for a corporation required to file Form 990-T). However, you cannot file Form 8868 election 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a constant the fully completed and signed page 2 (Part II) of Form 8868. For more detail refile and click on e-file for Charities & Nonprofits. | lectronica | lly if (1) you v | want |
| | Name of Exempt | Organization | Employer id: | entification numb | er |
| Type or print | | | | | |
| prate | COMPETITI | IVE ENTERPRISE INSTITUTE | 52-135 | 1785 | |
| File by the due date for | Number, street, ar | nd room or suite number. If a P.O. box, see instructions, | 14 499 | £703 | |
| filing your return. See | 1899 L ST | T,NW - 12TH FLOOR | | | |
| instructions. | City, town or post | office, state, and ZIP code, For a foreign address, see instructions. | | | |
| | WASHINGTO | | DC | 20036 | |
| | | iled (file a separate application for each return): | | | |
| X Form 990 | ס | Form 990-T (corporation) Form 4720 | | | |
| Form 990 |)-BL | Form 990-T (section 401(a) or 408(a) trust) Form 5227 | | | |
| Form 990 |)-EZ | Form 990-T (trust other than above) Form 6069 | | | |
| Form 990 |)-PF | Form 1041-A Form 8870 | | | |
| Telephone If the orga If this is for the check this | e No. ► (202) anization does or or a Group Retu s box . ► . | e of COMPETITIVE ENTERPRISE INSTITUTE 331-1010 | is is for th | ne whole arou | . ► [] .ip, |
| | sion will cover. | 2 11/6 | | | |
| | | 3-month (6 months for a corporation required to file Form 990-T) extension of time | | | |
| The exte | ension is for the | 20 11 , to file the exempt organization return for the organization named above. e organization's return for: | | | |
| ▶ □ | calendar year 2 | 20 or | | | |
| | tax year beginn | | | | |
| 2 If this ta | x year is for les | formal fo | inge in ac | counting peri | iod |
| 3a If this ag | oplication is for ndable credits. | Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any See instructions | 3a \$ | | 0. |
| b If this ar | polication is for | Form 990-PF or 990-T, enter any refundable credits and estimated tax payments ryear overpayment allowed as a credit | 3b\$ | | 0. |
| c Balance deposit v See inst | Due. Subtract I with FTD coupoructions | line 3b from line 3a. Include your payment with this form, or, if required, n or, if required, by using EFTPS (Electronic Federal Tax Payment System). | 3c \$. | | 0. |
| | are going to n | nake an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88 | | r | |
| BAA For Priv | acy Act and Pa | perwork Reduction Act Notice, see instructions. | Form | 8868 (Rev. 4 | 1-2009) |



Home | Help | Sign In

Track & Confirm **FAQs** Track & Confirm Search Results Label/Receipt Number: 7008 0500 0000 8139 5299 Track & Confirm Service(s): Certified Mail™ Status: Delivered Enter Label/Receipt Number. Your item was delivered at 11:01 pm on November 07, 2010 in OGDEN, UT 84201. Go> Detailed Results: Delivered, November 07, 2010, 11:01 pm, OGDEN, UT 84201 Arrival at Unit, November 07, 2010, 5:08 pm, OGDEN, UT 84401 **Notification Options** Track & Confirm by email Get current event information or updates for your item sent to you or others by email. 1 Gaz Site Map Customer Service Forms Gov't Services Privacy Policy Careers Terms of Use Business Customer Gateway Copyright© 2010 USPS. All Rights Reserved. No FEAR Act EEO Data FOIA SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse ☐ Agent so that we can return the card to you. ☐ Addressee Attach this card to the back of the mailpiece, Date of Delivery or on the front if space permits. 1. Article Addressed to: ☐ Yes □ No Department of the Treasury Internal Revenue Service Center Ogden UT 84201-0012 Service Type Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. Restricted Delivery? (Extra Fee) 2. Article Number ☐ Yes 7008 0500 0000 8139 5299 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545 0017

2008

Open to Public Inspection

Form 990 (2008)

TEEA0101 04/23/09

Department of the Treasury Internal Revenue Service

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

| | For the | 2008 calen | dar year, | or tax year beginning | Oct 1 | , 2008, | and endir | ıg Sep | | | <u>, 20</u> | | |
|--------------------------------|---------------|------------------------------------|-------------------------|--|---|-----------------|---------------|----------------|-------------------|---------------|----------------------|-----------------------------|-------------|
| В | Check if a | applicable | Dia | C Name of organization | | | | | D Employ | er Ident | uficatio | n Number | |
| | Adda | ress change | Please use IRS label | COMPETITIVE EN | NTERPRISE INST | ITUTE | | | 52-1 | <u> 135</u> 1 | 785 | | |
| | Nam | ne change | or print or type | Number and street (or P | O box if mail is not delivered | d to street add | dr) Room/s | suite | E Telepho | ne num | ber | | |
| | Initia | al return | See specific | 1899 L ST,NW - | - 12TH FLOOR | | | | (202 | 2) 3 | 31-1 | L010 | |
| | Tern | nınatıon | Instruc- tions. | City, town or country | | State | ZIP code + 4 | 1 | , | | | | |
| | H | ended return | | WASHINGTON | | DC | 20036 | | G Gross re | acainte | 4 / 1 | 660,901 | ŀ |
| | = | lication pending | | and address of principal officer | , <u>.</u> | DC | 20030 | H(a) is this a | a group return | | _ | Yes | |
| | ∐ Аррі | ilication pending | | | | ON DO | 20026 | | affiliates incl | | | Yes | ₽ No |
| _ | <u>-</u> | | | MITH, JR. 1899 L ST, NW 12 | | | 20036 | | attach a list | | struction | | □ |
| <u> </u> | | exempt statu | | | rt no) 4947(a) | (1) or | 527 | 4 | | | | | |
| <u>J</u> | | | W.CEI. | | | - 1 | | | exemption nu | | | | |
| K | | f organization | X Corpora | ation Trust Asso | ociation Other > | L Ye | ear of Forma | tion 1984 | 1 M s | tate of | legal do | micile DC | |
| Pē | ાહી 📗 | Summ | | | | | | | | | | | |
| | 1 | | | ganization's mission or | - | | | | | | ND : | EDUCAT | ION _ |
| ø | Ī | DEDICATE | D TO T | HE PRINCIPLES | OF FREE ENTER | PRISE A | ND FI | MITED G | OVERNM | <u>IENT</u> | | | |
| ā | _ | | | | | | | | | | | | |
| E | _ | | | | - - | | | | _ | | | | |
| ò | | heck this bo | | if the organization disc | | s or dispos | sed of mo | re than 25' | % of its as | | _ | | |
| 8 | | | | bers of the governing b | | | | | | 3 | | | |
| es | | | | t voting members of the | e governing body (Parl | t VI, line I | b) | | | 4 | 5 | | |
| Σ | | | | yees (Part V, line 2a) eers (estimate if neces: | cond | | | | | 5 6 | 38 0 | | |
| Activities & Governance | | | | ousiness revenue from f | | mn (C) | | | | 7a | 0 | | 0. |
| | l . | - | | taxable income from F | | III (C) | | | | 7 b | | | |
| | 21 | ici umciateo | Dusiness | taxable income nom i | 0/// 550-1, line 54 | | | 7 - | , | ,,, | | | |
| | ١., | \4b | | 4- (Dant VIII I 11-) | | | | | rior Year | | | Current Y | |
| ē | L | | _ | its (Part VIII, line 1h) | | | | 5 | ,229,9 | 33. | | 4,584 | ,419. |
| Revenue | | - | | ue (Part VIII, line 2g) | 2 4 4 7-1 | | | | 10.3 | 1.60 | | 27 | 177 |
| æ | | | | art VIII, column (A), line | • | 1\ | | | 18,3 | | | | ,177. |
| | | | | II, column (A), lines 5, | | , | 10) | <u> </u> | | 81. | | 4,660 | ,305. |
| | | | | nes 8 through 11 (must | | in (A), line | 12) | 3 | ,257,6 | 002. | | 4,660 | ,901 |
| | | | | ounts paid (Part IX, col | • | | | - | | | | | |
| | | | | members (Part IX, colu | | | | <u> </u> | | | | | |
| ø | 15 S | alaries, othe | er com pe r | satton, employee bene | efits (Part IX, column (| A), lines 5 | -10) | 2 | ,685,2 | 201. | | 2,337 | ,882. |
| Expenses | 16 a P | rofessional | fun <u>dralsi</u> n | ELETA IX, colunt | 3 (A), line 11e) | | | | | | | | |
| ×be | ьт | otal fundrai | sind exper | nses (Part IX, column | (2), line 25) ► | 89 | 0,606. | | | | | | |
| ш | 17 C | ther expens | es PartA | W. Golumn 20, Mines 12 | la 11d. 11f-24f) | | | 2 | ,517,4 | 193. | | 2.323 | ,778. |
| | 18 T | otal expens | es Add in | nes 13-17 (must equal | Part IX. column (A). lu | ne 25) | | | ,202,6 | | | | ,660. |
| | | | | s Bylgtrace line 18 from | | , | | | 54,9 | | | | -759. |
| x 8 | | | Ut | JUCN, UI | | | | Danie. | | | | F1 - (V | |
| Not Assets or Fund Balancos | 20 T | otal assets (| (Part Y Iv | no 16) | | | | | nning of Y | | | End of Y | , 339 . |
| Ass | | otal liabilitie | | | | | | | 568,4 568,4 | | | | ,610. |
| ¥5.5 | ŀ | | | • | | | | - | | | | | |
| | | | | ances Subtract line 21 | from line 20 | | | 1 2 | 2,167,9 | 01. | | 1,993 | ,729 |
| L'C | | Signati | ure Bloc | <u> </u> | | | | | | | | | |
| | | Under penaltie true, correct, a | es of perjury, | I declare that I have examined Declaration of preparer (other | d this return, including accom- er than officer) is based on all | panying scheo | dules and sta | atements, and | to the best o | of my kr | nowledg | e and belief | , it is |
| ٠. | | | | 2 | | | | | | 16- | | | |
| Sig | | // | | | | | | | <u> </u> | | | <u> </u> | |
| He | re | Signature | of officer | 1/11- | 0- 0 | | 0 | Da | te | | | | |
| | | <u></u> | AN | KHZMAN, | General | Coun | sel_ | | | | | | |
| | | Type or pr | rint name ani | d title | | | | | | | | | |
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| Pa | | Preparer's | | | | 1 | 8/2/ | | elf∙ nployed ► | \square | | , | |
| Pre | | signature | > Da | vid a Deva | hardt eth | | 8/13/1 | 0 | | | | | |
| | rer's | Firm's name (| or Hen | dershot, Burkh | | PAs | | | | | | | |
| Us | | yours if self employed), | _ | 5 Presidential | | | | | IN ► | | | | |
| On | ııy | address, and ZIP + 4 | | assas | | 20109 | | | | (70 | 31 3 | 61-15 | 92 |
| Mar | the ID | <u> </u> | | | VA | | | 1 12 | hone no | (/0 | | | |
| ivia) | y uie irki | บ นเจเนจร เกิ | is return v | with the preparer showr | n above / (see instructi | iuris) | | | | | X | Yes | No |

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

| Form 990 (2008) COMPETITIVE ENTERPRISE INSTITUTE | 52-1 | 35178 | 5 | | Page 2 |
|--|---|----------------------|--------------------|-------------------|----------|
| Rattilis Statement of Program Service Accomplishments (see instructions) | | | | | |
| 1 Briefly describe the organization's mission. | | | | | |
| COMPETITIVE ENTERPRISE INSTITUTE IN A NON-PROFIT PUBLIC POLI | CY | | | | : |
| ORGANIZATION DEDICATED TO THE PRINCIPLES OF FREE ENTERPRISE | AND LIMITED | | | | |
| See Form 990, Page 2, Part III, Line 1 (continued) | | | | | |
| | | | | | |
| 2 Did the organization undertake any significant program services during the year which were not li | sted on the prior | • | | | |
| Form 990 or 990-EZ? | 3.03 on the prior | | Yes | x | No |
| | | Ш | 163 | 2 | 110 |
| If 'Yes,' describe these new services on Schedule O | • | \Box | | | |
| 3 Did the organization cease conducting, or make significant changes in how it conducts, any progr | am services? | | Yes | X | No |
| If 'Yes,' describe these changes on Schedule O | | | | | |
| 4 Describe the exempt purpose achievements for each of the organization's three largest program s and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of graexpenses, and revenue, if any, for each program service reported | services by expens ants and allocation | es Sect s to othe | ion 50 ers, the | 1(c)(3 e total | 5) |
| 4a (Code) (Expenses \$3,604,416. including grants of \$ | 0 \ (Payanua | خ | | | 0) |
| | , (Nevenue | ٧ | | | <u> </u> |
| ENVIRONMENTAL POLICY: | | | | | |
| SEEKS TO ANALYZE AND PROMOTE PROPERTY-BASED APPROACHES TO | | | | | |
| ENVIRONMENTAL PROTECTION AS WELL AS EXPLORING METHODS OF PRE | SERVING | | | | |
| BOTH INDIVIDUAL LIBERTY AND THE ENVIRONMENT. | | | | | |
| | | | | | |
| HEALTH AND SAFETY: | | | | | |
| SEEKS TO ANALYZE THE OFTEN UNRECOGNIZED TOLL OF OVER-REGULAT | TON ESPECTA | T.T.V | | | |
| | TOW EDLECTY | | | | |
| IN TERMS OF REDUCED HEALTH AND SAFETY. | | | | - | |
| | | | | - - . | |
| LEGAL AND CONSTITUTIONAL STUDIES: | | | | | |
| See Form 990, Page 2, Part III, Line 4a (continued) | | | | | |
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| 41.70 | | | | | |
| 4b (Code) (Expenses \$ including grants of \$ |) (Revenue | \$ | | |) |
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| 4c (Code) (Expenses \$ including grants of \$ |) (Revenue | \$ | | |) |
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| | | | | | |
| 4d Other program services (Describe in Schedule O) | | | | | |
| (Expenses \$ including grants of \$) (Rei | venue \$ | | |) | |
| 4e Total program service expenses ► \$ 3,604,416. (Must equal Part IX. Line 25.) | | | | ⁄ | |

| _ | n 990 (2008) COMPETITIVE ENTERPRISE INSTITUTE 52-135178 TO IV Checklist of Required Schedules | 5 | F | age 3 |
|--------------|--|-----|-----|--|
| <u> </u> | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | x | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 3 | | х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II | 4 | Х | |
| 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 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I | 6 | | х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II | 7 | | х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | 8 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV | 9 | | x |
| 10 | Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | 10 | | Х |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable | 11 | X_ | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12 | | х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | Х |
| 14 | a Did the organization maintain an office, employees, or agents outside of the U.S.? | 14a | | х |
| ı | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I | 14b | | х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, 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 located outside the United States? If 'Yes,' complete Schedule F, Part III | 16 | | х |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I | 17 | | X |
| 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 | | Х |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 19 | | Х |
| 20 | Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 20 | | Х |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II | 21 | | Х |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III | 22 | | Х |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J | 23 | х | |
| 24 8 | a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25 | 24a | | х |
| t | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| ď | 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? | 240 | | |
| c | d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| 2 5 a | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | 25a | | х |
| ı | 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 | | х |
| 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 | | х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes' complete Schedule I. Part III | 27 | | X |

Page 4

| | | · ** * | Yes | No |
|----|--|--------|-----|----|
| 28 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee: | | | |
| ä | a 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 | | Х |
| l | 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 |
| (| c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV | 28c | | х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | 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 | | x |
| | Contributions. If Tes, Complete Screenie W | -30 | | ^ |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | 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 | | 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 | | Х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI | 37 | | X |

BAA

Form **990** (2008)

Page 5

Part View Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 1 a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1ь c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 38 calendar year ending with or within the year covered by this return 2b 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3 a this return? 3 b b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **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 5 a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5 b Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 5с Prohibited Tax Shelter Transaction? 6a Did the organization solicit any contributions that were not tax deductible? 6a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 a Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b Х c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e benefit contract? 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Х q For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Logical Control 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 X excess business holdings at any time during the year? . 1 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a Х b Did the organization make any distribution to a donor, donor advisor, or related person? 9Ь X ** 10 Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b 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 other members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

12b

Form 990 (2008)

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

BAA

Form 990 (2008) COMPETITIVE ENTERPRISE INSTITUTE

Page (
Part VI)

Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

| Se | ction A. | Governing Body and Management | | | | |
|-----------|--|---|---|------------|---------------------------------------|--|
| | | 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de s, or changes in Schedule O. See instructions | escribe the circumstances, | | Yes | No |
| 1 | a Enter the | number of voting members of the governing body | 1a 7 | | | |
| | b Enter the | e number of voting members that are independent | 1b 5 | | | |
| 2 | Did any officer, d | officer, director, trustee, or key employee have a family relationship or a business rela irector, trustee or key employee? | ationship with any other | 2 | X | |
| 3 | Did the o | organization delegate control over management duties customarily performed by or un s, directors or trustees, or key employees to a management company or other persor | der the direct supervision | 3 | | х |
| 4 | | organization make any significant changes to its organizational documents prior Form 990 was filed? | | 4 | | Х |
| 5 | | 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 | | X |
| 7 | a Does the | organization have members, stockholders, or other persons who may elect one or m g body? | ore members of the | 7a | | × |
| | b Are any | decisions of the governing body subject to approval by members, stockholders, or oth | er persons? | 7b | | Х |
| 8 | Did the o | organization contemporaneously document the meetings held or written actions underlying | aken during the year by | | | |
| | a The gove | erning body? | | 8a | X | |
| | | nmittee with authority to act on behalf of the governing body? | | 86 | X | <u> </u> |
| 9 | a Does the | organization have local chapters, branches, or affiliates? | | 9a | | X |
| | b If 'Yes,' o and bran | does the organization have written policies and procedures governing the activities of iches to ensure their operations are consistent with those of the organization? | such chapters, affiliates, | 9 b | | |
| 10 | describe | opy of the Form 990 provided to the organization's governing body before it was filed? in Schedule O the process, if any, the organization uses to review the Form 990 | - | 10 | х | |
| 11 | organiza | any officer, director or trustee, or key employee listed in Part VII, Section A, who can ton's mailing address? If 'Yes,' provide the names and addresses in Schedule O | not be reached at the | 11 | | х |
| <u>se</u> | ction B. | Policies | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| 12 | n Doos the | organization have a written conflict of interest policy? If 'No,' go to line 13 | | 12a | Yes | No |
| 12 | | | had asside assis | 120 | Δ. | |
| | to conflic | | • | 12b | Х | |
| • | Schedule | organization regularly and consistently monitor and enforce compliance with the police O how this is done. | cy: II Tes, describe III | 12c | | _ |
| | | organization have a written whistleblower policy? | | 13 | X | |
| | | organization have a written document retention and destruction policy? | II I deside | - | 1000 | |
| 15 | persons, | process for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and decipated a CEO. Executive Director, as too personnent official? | pproval by independent ision | 15.0 | | 4 |
| | _ | inization's CEO, Executive Director, or top management official? ficers of key employees of the organization? | | 15a 15b | X | x |
| | | the process in Schedule O. (see instructions) | | 1 | | |
| 16 | a Did the o | organization invest in, contribute assets to, or participate in a joint venture or similar a ring the year? | arrangement with a taxable | 16a | | X |
| | b If 'Yes,' | nas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard | to evaluate its participation | 2 12 T | | |
| | ni jonit v | circulate arrangements ander applicable reactal tax law, and taken steps to satequate | the organization's exempt | -27 | | 1 |
| ~ | status w | th respect to such arrangements? | the organization's exempt | 16b | | |
| _ | status w | th respect to such arrangements? Disclosures | | 16b | | |
| 17 | status w ction C. List the s | th respect to such arrangements? Disclosures states with which a copy of this Form 990 is required to be filed See States Form | 990 Filed In | 16b | · · | |
| 17 | ction C. List the s | th respect to such arrangements? Disclosures States with which a copy of this Form 990 is required to be filed ► See States Form 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available. Check all that apply | 990 Filed In | 16b | · · | ublic |
| 17 18 | status w. ction C. List the s Section (Inspection Own | th respect to such arrangements? Disclosures states with which a copy of this Form 990 is required to be filed ► See States Form 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available Check all that apply website Another's website X Upon request | 990 Filed In ad 990-T (501(c)(3)s only) av | 16b | for p | |
| 17 18 | status w. ction C. List the s Section (inspection) Own Describe statemen | th respect to such arrangements? Disclosures states with which a copy of this Form 990 is required to be filed ► See States Form 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available Check all that apply website | 990 Filed In ad 990-T (501(c)(3)s only) avenue. | 16b | for pr | |
| 17 18 | status w. ction C. List the s Section (inspection) Own Describe statemen | th respect to such arrangements? Disclosures States with which a copy of this Form 990 is required to be filed ► See States Form 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available Check all that apply website Another's website X Upon request in Schedule O whether (and if so, how) the organization makes its governing docum | 990 Filed In ad 990-T (501(c)(3)s only) avenue. ents, conflict of interest policy. | 16b | for pr | cıal |
| 17 18 | status w. ction C. List the s Section of inspection Own Describe statement State the | th respect to such arrangements? Disclosures States with which a copy of this Form 990 is required to be filed ► See States Form 5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and in Indicate how you make these available Check all that apply website | 990 Filed In ad 990-T (501(c)(3)s only) avenue. ents, conflict of interest policy. | 16b | for pr | cıal |

Form 990 (2008)

BAA

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

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

- 1 a 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) or 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

| Name and Title | Average hours per week | Pos | ition (| check | -11 6 | | | | | |
|------------------------------------|------------------------------|--|-----------------------|---------|------------------|------------------------------------|--------|--|---|--|
| | per week | | | | | | | Reportable | Reportable compensation from | Estimated amount of other |
| | | adividi el trastes or director | anstitutional trustee | Offi-er | yes exulting fee | High est coinperisated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| FRED L. SMITH JR. | | | | | | | | | | |
| PRESIDENT | 40.00 | X | ↓_ | Х | Х | Х | | 214,109. | 0. | 0. |
| MICHAEL GREVE BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | 0. |
| WILLIAM DUNN | | 1 | | | | | | | | |
| BOARD MEMBER | 1.00 | Х | | | | | | 0. | 0. | 0. |
| DR. LEONARD LIGGIO BOARD MEMBER | 1.00 | Х | | | | | | 0. | 0. | 0. |
| DR. THOMAS GALE MOORE BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | 0. |
| FRANCES B. SMITH | 1 | | t | | | | | | | |
| BOARD MEMBER | 1.00 | x | | | | | | 18,000. | 0. | 0. |
| SAM KAZMAN | | | Π | | | | | | | |
| DIRECTOR OF REG | 40.00 | x | | х | | | | 111,800. | 0. | 0. |
| JODY M. CLARKE | _ | 1 | | | | | | | | |
| DIRECTOR OF DEVELOPMENT | 40.00 | Х | _ | Х | L | | | 99,000. | 0. | 0. |
| C. WAYNE CREWS | - 1 | | | x | | | | 149,000. | 0. | 0. |
| DIRECTOR OF TECH | 40.00 | Х | ╁ | ^ | _ | | | 149,000. | <u> </u> | <u> </u> |
| JAMES CURLEY BOARD MEMBER | 1.00 | х | | | | | | 0. | 0. | 0. |
| | _ | | | | | | | | | |
| | - | | 1 | | | | | | | |
| | _ | | | | | | | | | |
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| | _ | | | | | | | | | |
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| | - | | | | | | | | | |

TEEA0107 04/24/09

| (A) | (B) | | | (0 | - | | | (D) | (E) | (F) |
|---|-----------------------|-----------------------------------|-----------------------|-----------------------|--------------|------------------------------|----------|-------------------------------------|--|--|
| Name and Title | houre | | | check all that apply) | | | | Reportable compensation from | Reportable compensation from | Estimated amount of other |
| | per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099 MISC) | compensation from the organization and related organizations |
| | | _ | | | | | | | | |
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| | | | | | | | | | | |
| 1 b Total | | | | | | | <u> </u> | 591,909. |] 0. | |
| 2 Total number of individuals (including those in 1a) w organization ► 3 | ho rece | ived | mo | re th | nan | \$100 | 0,00 | 0 in reportable co | mpensation from th | |
| Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in For any individual listed on line 1a, is the sum of rethe organization and related organizations greater th | idividual oortable | con | nper | nsatı | on : | and : | othe | r compensation fr | om | Yes No |
| Individual Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch | ompens | atior | n fro | m a | ny ı | ınrei | atec | l organization for | services | 4 X |
| rendered to the organization? If 'Yes,' complete Sch Section B. Independent Contractors | edule J | for s | such | per | rson | | | | | 5 X |
| Complete this table for your five highest compensation from the organization | ed indep | end | ent | cont | trac | ors | that | received more th | an \$100,000 of | |
| (A) Name and business addres | ss | | | | | | | (E Description | of Services | (C) Compensation |
| RST MARKETING 272 CORPORATE PARK DR FO | REST | | | VA | <u> </u> | 245 | 51 | DIRECT MAI | L | 178,873 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2 Total number of independent contractors (including | those in | 1) \ | who | rece | eive | d mo | ore t | han \$100,000 in | | |

| ra | rt viii; Statement of Revenue | | | | |
|---|--|--|--|---|---|
| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| S.0 | 1a Federated campaigns 1a | | | | - |
| ANT | b Membership dues 1 b | _ | | | * * |
| A S | c Fundraising events 1 c | 1 | - | | |
| T.S. | d Related organizations 1 d | - | | | |
| ₽₹ | a Community country (country buttons) | ┪ | | | - |
| SES | e Government grants (contributions) | · ' | - | | |
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f: \$ | <u>.</u> | | | - |
| N N | h Total. Add lines 1a-1f | 4,584,419. | | | |
| 끏 | Business Code | 4,304,413. | | · · · · · · | |
| 2 | Dustriess Code | | | | |
| 3 | 2a | | | | |
| : ا س | <u> </u> | <u> </u> | ! | | |
| ξ | c | | | | |
| SE | d | | | | |
| Σ | e | | | | |
| 8 | f All other program service revenue | | | | |
| Ž. | g Total. Add lines 2a-2f | | | | |
| - | <u> </u> | | | ~ . | |
| | Investment income (including dividends, interest and other similar amounts) | 27 177 | 27,177. | 0. | 0. |
| | | 27,177 | 21,111. | 0. | - 0. |
| | 4 medite from investment of tax exempt bond proceeds | | | | |
| | 5 Royalties | <u> </u> | | | |
| | (i) Real (ii) Personal | _} | | • | - |
| | 6a Gross Rents 14,964. | | - | • | |
| | b Less rental expenses | | | | |
| | c Rental income or (loss) 14,964. | 7. | | | |
| | | 14,964. | 14,964. | 0. | 0. |
| | (A) Committee (A) Other | 1 | | · · · · · · · · · · · · · · · · · · · | |
| | 7 a Gross amount from sales of assets other than inventory | = | | | |
| | ussets other than inventory | - | | _ | - |
| | b Less. cost or other basis | 1- | - | - | |
| | and sales expenses | - . <u>.</u> | - | | |
| | c Gain or (loss) | | | | |
| | d Net gain or (loss) | <u> </u> | | | |
| | 8a Gross income from fundraising events | · - | • | | - |
| EVENUE | (not including \$ | - | -, | | _ |
| Z. | of contributions reported on line 1c) | | | | 1 |
| R | See Part IV, line 18 a | _ | | • | |
| OTHER R | b Less direct expenses b | ┦ - | | | |
| 6 | , | • | | | <u> </u> |
| | | | | | |
| | 9a Gross income from gaming activities | | 1 | - | - |
| | See Part IV, line 19 a | - | | | |
| | b Less direct expenses b | _ | | | |
| | c Net income or (loss) from gaming activities | > | | | |
| | 10a Gross sales of inventory, less returns | | | | |
| | and allowances a 10,094 | | - | | |
| | b Less: cost of goods sold b | | | | |
| | | 10,094. | 10,094. | 0. | 0. |
| | Miscellaneous Revenue Business Code | 1 | 1 2,001. | J | 1 |
| | 11a MISCELLANEOUS 900099 | 24,247. | 24,247. | 0. | 0. |
| | | 24,24/. | 24,247. | U. | 1 0. |
| | b | | | | · · · · · · · · · · · · · · · · · · · |
| | C | | | | |
| | d All other revenue | | | L | <u> </u> |
| | e Total. Add lines 11a-11d | ► 24,247. | <u> </u> | | |
| | 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, | | | | |
| | 10c, and 11e | ► 4,660,901. | 76,482. | 0. | 0. |

Form 990 (2008) COMPETITIVE ENTERPRISE INSTITUTE Part X Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| | not include amounts reported on lines 7b, 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 | | | | |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 591,909. | 472,343. | 44,986. | 74,580 |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) | | | | |
| 1 | Otner salaries and wages | 1,339,845. | 1,069,680. | 101,/98. | 168,36/ |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 240,697. | 188,851. | 18,028. | 33,818 |
| 10 | Payroll taxes | 165,431. | 130,603. | 13,482. | 21,346 |
| | Fees for services (non-employees) | | | | |
| ā | n Management | | | | |
| t | Legal | 36,342. | 4,550. | 31,333. | 459 |
| | Accounting | 34,253. | 4,288. | 29,533. | 432 |
| | Lobbying | | | 5 1 2 2 2 | |
| | Prof fundraising svcs See Part IV, In 17 | | | | |
| | Investment management fees | 405.035 | 200 205 | F1 D44 | 05 400 |
| | Other | 427,037. | 290,385. | 51,244. | 85,408 |
| | Advertising and promotion | 2,678. 223,806. | 2,621. 152,188. | 16. 26,857. | 44,761 |
| 13 14 | Office expenses Information technology | 148,999. | 101,319. | 17,879. | 29,80 |
| 15 | Royalties | 140,000. | 101,313. | 17,073. | 20,00 |
| 16 | Occupancy | 413,457. | 300,666. | 49,408. | 63,383 |
| 17 | Travel | 123,294. | 95,676. | 13,032. | 14,586 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 123,131 | 33,070 | | |
| 19 | Conferences, conventions, and meetings | 13,204. | 8,979. | 1,584. | 2,641 |
| 20 | Interest | | | | |
| | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 25,746. | 19,132. | 2,943. | 3,67 |
| | Insurance | | | | |
| 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.) EQUIPMENT_LEASE/RENT | 26,057. | 6,995. | 10 242 | 820 |
| | FEE/LICENSE/PERMIT/DUES | 11,703. | 0,995. | 18,242. 1,170. | 10,53 |
| | BOOKS AND SUBSCRIPTIONS | 57,046. | 48,420. | 2,083. | 6,54 |
| | I INSURANCE | 25,369 | 18,450. | 3,031. | 3,888 |
| | MEALS/ENTERTAINMENT | 60,475. | 41,123. | 7,257. | 12,09 |
| | All other expenses | 694,312. | 354,275. | 26,604. | 313,43 |
| | Total functional expenses Add lines 1 through 24f | 4,661,660. | 3,310,544. | 460,510. | 890,60 |
| 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 | · | | | |

| | | | | | (A) | | (B) | |
|-------------|-------------|---|---------------|------------------------|-----------------------------|----------|-----------------|-----------|
| | | | | | Beginning of year | <u> </u> | (B) End of y | ear |
| | 1 | Cash - non-interest-bearing | | | 1,891,146. | 1 | 517 | 7,837. |
| | 2 | Savings and temporary cash investments | | | | 2 | | |
| | 3 | Pledges and grants receivable, net | | | | 3 | | |
| | 4 | Accounts receivable, net | | | 754,324. | 4 | 610 | 0,830. |
| | 5 | Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule | s, trust L | ees, key employees, | | 5 | | |
| | 6 | Receivables from other disqualified persons (as define | d unde | er section 4958(f)(1)) | | | | |
| | | and persons described in section 4958(c)(3)(B) Comp | lete P | art II of Schedule L | | 6 | i | |
| ASSETS | 7 | Notes and loans receivable, net | | 7 | | | | |
| Ĕ | 8 | Inventories for sale or use | | | | 8 | | |
| s | 9 | Prepaid expenses and deferred charges | | | 27,608. | 9 | 16 | 6,423. |
| | 10a | Land, buildings, and equipment cost basis | 10 a | 673,147. | | | | |
| | b | Less accumulated depreciation Complete Part VI of | | | | | | |
| j | | Schedule D | מטו | 543,860. | 11,404. | 10c | | 9,281. |
| | 11 | Investments — publicly-traded securities | | | | 11 | 824 | 4,123. |
| | 12 | Investments – other securities See Part IV, line 11 | | | | 12 | | |
| | 13 | Investments – program-related See Part IV, line 11 | | | | 13 | | |
| | 14 | Intangible assets | | | | 14 | | |
| | 15 | Other assets. See Part IV, line 11 . | | | 51,838. | 15 | | 5,839. |
| | 16 | Total assets Add lines 1 through 15 (must equal line | 34) | | 2,736,320. | 16 | | 4,339. |
| | 17 | Accounts payable and accrued expenses | | | 568,419. | 17 | 15 | 0,610. |
| | 18 | Grants payable | | 18 | — | | | |
| ı | 19 | Deferred revenue | | 19 | | | | |
| Ā | 20 | Tax-exempt bond liabilities | | 20 | | | | |
| L A B | 21 | Escrow account liability Complete Part IV of Schedule | | 21 | | | | |
| L-T-ES | 22 | Payables to current and former officers, directors, trus highest compensated employees, and disqualified per | | | | | | |
| Ť | | of Schedule L | | | 22 | | | |
| E S | 23 | Secured mortgages and notes payable to unrelated th | ırd par | τιes | | 23 | | |
| | 24 | Unsecured notes and loans payable | | | | 24 | | |
| | 25 | Other liabilities Complete Part X of Schedule D | | | | 25 | | |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 568,419. | 26 | 15 | 0,610. |
| Ĕ | | Organizations that follow SFAS 117, check here ► | X a | nd complete lines | | | | |
| | | 27 through 29 and lines 33 and 34. | | | | | | |
| ASSETS | 27 | Unrestricted net assets | | | 1,316,718. | 1 | | 5,078. |
| Į | 28 | Temporarily restricted net assets | | | 851,183. | 28 | | 8,651. |
| 0 | 29 | Permanently restricted net assets | | | | 29 | | |
| R | | Organizations that do not follow SFAS 117, check he | re = | and complete | - | | | |
| e nzo | 30 | lines 30 through 34. Capital stock or trust principal, or current funds | | | | 30 | | |
| | 31 | Paid-in or capital surplus, or land, building, and equip | mont i | fund | | 31 | | |
| BALANCES | 32 | Retained earnings, endowment, accumulated income, | | | | 32 | | |
| Ň | 33 | Total net assets or fund balances. | 01 011 | Ci Tuilus | 2,167,901. | 33 | 1 99 | 3,729. |
| Ĕ | 34 | Total liabilities and net assets/fund balances | | | 2,736,320. | 34 | | 4,339. |
| Pa | rîl X | | | | 27.557525 | <u>,</u> | | -, |
| | -10 V | | | | | | | res No |
| 1 | Ac | counting method used to prepare the Form 990 | Cash | X Accrual | Other | | | |
| 2 | a We | ere the organization's financial statements compiled or | review | ed by an independent a | accountant? | | 2a | Х |
| | b We | ere the organization's financial statements audited by a | n indej | pendent accountant? | | | 2b | Х |
| | | Yes' to 2a or 2b, does the organization have a committ view, or compilation of its financial statements and sele | | | | ıdıt, | 2c | |
| 3 | a As | a result of a federal award, was the organization requi | red to | undergo an audit or au | idits as set forth in the S | Single | 3. | v |
| | | dit Act and OMB Circular A-133? Yes,' did the organization undergo the required audit or | المرابعة ا | • 2 | | | 3a 3b | X |
| <u> </u> | | 165, GIU TIE OLGANIZATION UNUELYO TIE TEQUITED AUGIT OF | auuit | · | | | | 990 (2008 |

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

2008

Open to Fulle Inspection

Employer identification number

| | | TITIVE ENT | | | | | | | | | 351785 | | | |
|------|------|--|---------------------------------|-----------------------------------|--|-------------------------------|---|-----------|---|-------------------------|--|----------------------------|-----------------|-----------|
| লৈ | 30 | Reason for | Public Ch | narity Statu | ıs (All organızatıor | ns must o | comple | te this | part.) | (see | ınstruct | ions) | | |
| he c | rgai | nization is not a | private foun | idation becau | se it is: (Please check | only one o | rganızat | ion) | | | | | | |
| 1 | | A church, conv | ention of chu | irches or ass | ociation of churches de | scribed in | section | 170(b)(1 |)(A)(i). | | | | | |
| 2 | | A school descr | ibed in sectio | on 170(b)(1)(| A)(ii). (Attach Schedule | E) | | | | | | | | |
| 3 | П | A hospital or co | operative ho | ospital service | e organization describe | d ın sectio | n 170(b) | (1)(A)(ii |). (Atta | ch Sche | dule H) | | | |
| 4 | П | A medical rese | arch organiz | ation operate | d in conjunction with a | hospital de | escribed | ın secti | on 170(| b)(1)(A)(| (iii) Ente | r the hospi | tal's | |
| | | name, city, and | d state | | | | | | | | | | | |
| 5 | | An organization 170(b)(1)(A)(iv) | n operated for . (Complete | or the benefit Part II) | of a college or universi | ty owned o | or opera | ed by a | govern | mental i | ınıt desci | ribed in sec | tion | |
| 6 | Ц | A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). | | | | | | | | | | | | |
| 7 | | in section 170(| bX1XAXvi). | (Complete P | | | _ | ernment | al unit | or from | the gene | ral public d | escrib | ed |
| 8 | 닏 | _ | | | 170(b)(1)(A)(vi). (Compl | | - | | | | | | | |
| 9 | L | from activities investment inc | related to its ome and unri | exempt functions elated busine | (1) more than 33-1/3 % tions – subject to certa ss taxable income (les complete Part III) | ın exceptic | ns. and | (2) no r | nore tha | an 33-1/3 | 3 % of its | s support fr | om ar | oss |
| 10 | | An organization | n organized a | and operated | exclusively to test for p | oublic safe | ty Sees | ection 5 | 609(a)(4 |). (see i | instructio | ns) | | |
| 11 | | more publicly s | supported or | ganizations d | exclusively for the ben lescribed in section 509 eation and complete lin | $\theta(a)(1)$ or s | ection 5 | 09(a)(2) | tions of See s | or carn ection 5 | y out the 09(a)(3). | purposes of Check the | of one box t | or nat |
| | | a Type I | | b Type II | c Type | III – Fund | tionally | integrate | ed | | d \square | Type III- | Other | |
| е | | By checking th than foundation 509(a)(2) | is box, I certi n managers a | ify that the or and other tha | ganization is not control n one or more publicly | olled direct supported | ly or ind organiza | rectly b | y one o escribed | r more o I in secti | lisqualifie ion 509(a | ed persons a)(1) or sec | other tion | |
| f | | If the organizat | ion received | a written det | ermination from the IR | S that is a | Type I, | Type II o | or Type | III suppo | orting org | ganization, | | |
| g | | Since August 1 | 7, 2006, has | the organiza | tion accepted any gift | or contribu | ition froi | m any of | f the fol | lowing p | ersons? | | | |
| | | (i) a person | who directly | or indirectly | controls, either alone oupported organization? | r together | with per | sons de: | scribed | ın (ıı) ar | nd (III) | 11 0 (1) | Yes | No |
| | | | - 0 | • | cribed in (i) above? | | | | • | | | 11 g (i) 11 g (ii) | | |
| | | • | | • | described in (i) or (ii) | ahaya? | | | | | | | - | |
| h | | • • | | | he organizations the or | | | - | | | | 11 g (iii) | | |
| - 17 | | | | | | I | | | | | 1 | | | |
| | (I) |) Name of Supported Organization | | (ii) EIN | (iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) | organiza (i) liste gove | Is the tion in col d in your erning ment? | the organ | ou notify lization in (i) of upport? | organizat (i) organi | Is the ion in col zed in the S? | (viı) Amour | it of Sup | port |
| | | | | | | Yes | No | Yes | No | Yes | No | | | |
| | | | | | | | | | | | | | | |
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| otal | | | | | | | | | | | | | | |

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

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 COMPETITIVE ENTERPRISE INSTITUTE 52-1351785 Page 2 Partill Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) ► (e) 2008 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 3,683,866. 3,208,102. 3,545,199. 5,229,933 4,584,419 20,251,519. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge 3,683,866. 3,545,199. 5,229,933. 4,584,419 20,251,519. Total. Add lines 1-3 3,208,102. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 2,390,294. shown on line 11, column (f) Public support. Subtract line 5 17,861,225. from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (b) 2005 (f) Total (a) 2004 (c) 2006(d) 2007 (e) 2008 3,208,102 3,683,866 3,545,199 5,229,933 4,584,419 20,251,519. Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 77,106 238,985. 32,805 27,749 42,141 similar sources 59,184 Net income form unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss form the sale of čapital assets (Explain in Part IV) 388 4,618 34.341 39,347. Total support. Add lines 7 20,529,851. through 10 12 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) ▶ organization, check this box and stop here Section C. Computation of Public Support Percentage 87.00% 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 14 15 80.77% 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box **►** X and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support test — 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and circumstances' test, check this box and stop here. Explain in Part IV how the

Schedule A (Form 990 or 990 EZ) 2008 COMPETITIVE ENTERPRISE INSTITUTE

Partill Support Schedule for Organizations Described in Section 509(a)(2)

| Sec | tion A. Public Support | Ked tile box on illi | e 5 OI Fai(I) | | | | |
|----------|--|--|--|--------------------------------------|--|---------------------------------------|---|
| | ndar year (or fiscal yr beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| | Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') | (4) 230 1 | (2) 2000 | (0) 2000 | (4) 2001 | (4) 2000 | (,, , , , , , , , , , , , , , , , , , , |
| | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | facilities furnished by a governmental unit to the organization without charge | | | | | | |
| | Total. Add lines 1-5 Amounts included on lines 1, 2, 3 received from disqualified persons | | | | | | |
| ł | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 | | | | | | |
| • | : Add lines 7a and 7b | | | | | | |
| 8 | Public support (Subtract line | | | | | | 1 |
| | 7c from line 6) | | , | 76 | or oranging and company | | .] |
| Sec | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal yr beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10 a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources | | | | | | |
| t | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on | | | · | | | |
| 12 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 13 14 | Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and | is for the organiza | tion's first, second | d, third, fourth, | or fifth tax year as | a section 501(c) | |
| Sec | tion C. Computation of Pu | | ercentage | | | | |
| | Public support percentage for 20 | | | e 13. column (f) |) | 15 | % |
| 16 | Public support percentage from 2 | • • | • • | | , | 16 | |
| Sec | tion D. Computation of Inv | | | | | | |
| 17 | | | | | umn (f)) | 17 | % |
| 18 | Investment income percentage fi | • | * * | | | 18 | |
| 19 a | 33-1/3 support tests - 2008. If the more than 33-1/3%, check this b | he organization did | d not check the bo | x on line 14, a | nd line 15 is more to sublicly supported or | than 33-1/3%, an | d line 17 is not |
| ì | 33-1/3 support tests — 2007. If the state of the stat | he organization did this box and stop | d not check a box here. The organiz | on line 14 or 19 zation qualifies | 9a, and line 16 is m as a publicly suppo | ore than 33-1/39 rted organization | 6, and line 18 |
| 20 | Private foundation. If the organization | zation did not che | ck a box on line 1 | 4. 19a. or 19b. | check this box and | see instructions | ▶ [|

| Schedule A (Form 990 or 990-EZ) 200 | 8 COMPETITIVE | ENTERPRISE | INSTITUTE | 52-1351785 | Page 4 |
|-------------------------------------|---|------------------------------------|--|--|---------------|
| Part II, line 17a or 17 | nation. Complete the strain or Part III, line | nis part to prov 12. Provide an | ide the explanati y other additiona | on required by Part II, line I information. (see instruct | 10; :ions) |
| Other Income Part II, L: | ne_10 | | | | |
| Description: MISC | | | | | - |
| 2005: 388. | | | | | |
| 2006: 4618. | - | | - - | | |
| 2008: 34341. | | | | | |
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations complete Part I-A only

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

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

| | Part II-A | that have 1401 filed 1 offit 3700 (election a | nder section sor(ii)) | Complete Fait II-D DO | not complete |
|-----------|--|---|---|---|--|
| If the | e organization answered 'Yes,' | to Form 990, Part IV, line 5 (Proxy Tax), th | ien | | |
| | Section 501(c)(4), (5), or (6) or | ganizations Complete Part III | | | |
| | of organization | | | Employer identifica | |
| COL | MPETITIVE ENTERPRIS | E INSTITUTE | | 52-1351785 | · |
| likaj | See the instruction | by all organizations exempt under ns for Schedule C for details. | r section 501(c) a | na section 527 org | anizations. |
| 1 | Provide a description of the o | organization's direct and indirect political ca | mpaign activities in F | art IV | |
| 2 | Political expenditures | • | | ► \$ | · · · · · · · · · · · · · · · · · · · |
| | Volunteer hours | | | | |
| Pā | To be completed See the instruction | by all organizations exempt under ns for Schedule C for details. | r section 501(c)(3 |)). | |
| 1 | Enter the amount of any exci | se tax incurred by the organization under s | ection 4955 | ► \$ | |
| 2 | Enter the amount of any exce | se tax incurred by organization managers t | ınder section 4955 | ► \$ | |
| 3 | If the organization incurred a | section 4955 tax, did it file Form 4720 for t | his year? | | Yes No |
| 4 | a Was a correction made? | | | | ∐ Yes ∐ No |
| | olf 'Yes,' describe in Part IV | | | | |
| , Rai | To be completed to See the instruction | by all organizations exempt under ns for Schedule C for details. | r section 501(c), (| except section 501 | (c)(3). |
| 1 | Enter the amount directly exp | pended by the filing organization for section | 527 exempt function | activities ►\$ | |
| 2 | Enter the amount of the filing function activities | organization's funds contributed to other o | irganizations for section | on 527 exempt ►\$ | |
| 3 | Total of direct and indirect ex Form 1120-POL, line 17b | empt function expenditures Add lines 1 an | d 2 and enter here ar | nd on ►\$ | |
| 4 | Did the filing organization file | Form 1120-POL for this year? | | | Yes No |
| | made Enter the amount paid received and promptly and di | and employer identification number (EIN) of and indicate if the amount was paid from irectly delivered to a separate political orga al space is needed, provide information in f | the filing organization nization, such as a se | 's funds or were politica | I contributions |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's own internal funds If none, enter-0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2008

| Schedule C (Form 990 or 990-EZ) 2008 COMPETITI | VE ENTERPRISE INSTITUTE | 52-135 | 1785 Page 2 |
|--|--|---|--|
| | nizations exempt under section 501(c) e the instructions for Schedule C for de | | 8 (election |
| A Check ► If the filing organization b | elongs to an affiliated group | | |
| B Check ► If the filing organization c | hecked box A and 'limited control' provisions app | ly | |
| Limits on Lobl (The term 'expenditures' n | oying Expenditures — neans amounts paid or incurred.) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expenditures to influence | public opinion (grass roots lobbying) | 18,306. | |
| b Total lobbying expenditures to influence | a legislative body (direct lobbying) | 25,068. | |
| c Total lobbying expenditures (add lines 1a | 43,374. | | |
| d Other exempt purpose expenditures | 4,618,286. | | |
| e Total exempt purpose expenditures (add | 4,661,660. | | |
| f Lobbying nontaxable amount. Enter the aboth columns | amount from the following table in | 383,083. | |
| If the amount on line 1e, column (a) or (b) is | The lobbying nontaxable amount is | to the fact that | |
| Not over \$500,000 | 20% of the amount on line 1e | - " · · · · · · · · · · · · · · · · · · | wante of the contract of the c |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | 9.30 0 0 0 0 | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | |
| Over \$17,000,000 | \$1,000,000 | 11 , 2 , 12 , 10 , 11 | المراجع المراج |
| g Grassroots nontaxable amount (enter 25 | % of line 1f) | 95,771. | |
| h Subtract line 1g from line 1a Enter -0- if | fline g is more than line a | 0. | |
| i Subtract line 1f from line 1c Enter -0- if | line f is more than line c | 0. | |
| j If there is an amount other than zero on section 4911 tax for this year? | either line 1h or line 1i, did the organization file l | Form 4720 reporting | Yes No |

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

| | Lobbying Expenditures During 4-Year Averaging Period | | | | | | | | |
|--|--|---|--|--|-----------|--|--|--|--|
| Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total | | | | |
| 2a Lobbying non-taxable amount | 222,350. | 270,596. | 268,621. | 253,856. | 1,015,423 | | | | |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | the second and second s | The same with the same of the | Brons Tong | the state of the s | 1,523,135 | | | | |
| c Total lobbying expenditures | 19,744. | 22,969. | 25,609. | 22,774. | 91,096 | | | | |
| d Grassroots non-taxable amount | 61,556. | 69,603. | 69,598. | 66,919. | 267,676 | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | Bern (glan ar) | at Araba a series | The Color of the C | The second of th | 401,514 | | | | |
| f Grassroots lobbying expenditures | 0. | 0. | 0. | 0. | 0 | | | | |

BAA

Schedule C (Form 990 or 990-EZ) 2008

52-1351785 Schedule C (Form 990 or 990-EZ) 2008 COMPETITIVE ENTERPRISE INSTITUTE Page 3 Pair 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. (a) (b) Yes No Amount 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? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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? Other activities? If 'Yes,' describe in Part IV ÷. i 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 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? Partill-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. No Yes 1 1 Were substantially all (90% or more) dues received nondeductible by members? 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' ÓR if Part III-A, question 3 is answered 'Yes.' See Schedule C Instructions for details. Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year **b** Carryover from last year 2b 2с 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i Also, complete this part for any additional information

| Schedule C (Form 990 or 990-EZ) 2008 COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 | Page 4 |
|--|------------|----------------|
| Schedule C (Form 990 or 990-EZ) 2008 COMPETITIVE ENTERPRISE INSTITUTE Part Supplemental Information (continued) | | |
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545 0047

Department of the Treasury Internal Revenue Service

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

Employer Identification numbe Name of the organization 52-1351785 COMPETITIVE ENTERPRISE INSTITUTE Complete if Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete the organization answered 'Yes' to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? Dio the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Partie Conservation Easements Complete if the organization answered 'Yes' to Form 990 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year 11.84 Held at the End of the Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2с 2d d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and No enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements 限都侧顶 Organizations Maintaining Collections of Art, Historical Treasures, 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 and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

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

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Schedule **D** (Form 990) 2008

| Schedule D (Form 990) 2008 COMPE | | | | 52-135 | | Page 2 |
|--|---|--|--|--|---------------------|---|
| Partille Organizations Maintai | ning Collections | of Art, Histo | rical Treasures, or | Other Similar Ass | ets (contir | iued) |
| 3 Using the organization's accession that apply). | n and other records, | | • | nificant use of its collec | tion items (ch | neck all |
| a Public exhibition | | d Loan o | r exchange programs | | | |
| b Scholarly research | | e 💹 Other | | | | |
| c Preservation for future genera | | | | | | |
| 4 Provide a description of the organ Part XIV | | • | , | | in | |
| 5 During the year, did the organizat assets to be sold to raise funds ra | ion solicit or receive ather than to be main | donations of art, itained as part of | historical treasures, or the organization's colle | other similar | Yes | No |
| PartiVal Trust, Escrow and Cu Ⅳ, line 9, or reported | stodial Arranger | nents Comple | te if organization | | orm 990, | Part |
| 1a Is the organization an agent, trust included on Form 990, Part X? | tee, custodian, or oth | ier intermediary f | or contributions or othe | r assets not | Yes | No |
| b If 'Yes,' explain the arrangement | in Part XIV and comp | olete the following | table table | | | |
| | | | | | Amount | |
| c Beginning balance | | | | 15 | | |
| d Additions during the year | | | | 1 d | | |
| e Distributions during the year | | | | 1 e | | |
| f Ending balance | | | | 1f | | |
| 2a Did the organization include an ai | mount on Form 990, | Part X, line 21? | | | Yes | No |
| b If 'Yes,' explain the arrangement | | | | | | |
| Part V Endowment Funds Co | mplete if organiz | ation answere | ed 'Yes' to Form 99 | 00, Part IV, line 10. | | |
| | (a) Current year | (b) Prior year | (c) Two years back | | (e) Four ye | ears back |
| 1 a Beginning of year balance | | and the light of the same of t | oliti gannikalikani | ice in section in the section is the section in the section in the section in the section is the section in the section is the section in the section in the section in the section is the section in the | in an ana | |
| b Contributions | | MAN GREATER | | de proportion de la companie de la c | | |
| c Investment earnings or losses | | | will see the man. | | HOLE COM | 72.22.27.17.17. |
| d Grants or scholarships | | S. William Control | the many and had a | | HEADING | |
| Other expenditures for facilities and programs | ····· | विश्वास को | toria din din Tagangan Mangangan | | | orania. Brata Land |
| f Administrative expenses | | | | ne surannaithéatha | | |
| g End of year balance | | im meternette | The British of the Contract of | The statement of the state of | Halfiel Bira | 111111111111111111111111111111111111111 |
| Provide the estimated percentage | of the year end bala | ince held as | | | | |
| a Board designated or quasi-endow | ment ► | <u> </u> | | | | |
| b Permanent endowment ► | * | | | | | |
| c Term endowment | % | | | | | |
| 3a Are there endowment funds not in organization by | n the possession of the | he organization th | nat are held and admini | stered for the | Yes | No |
| (i) unrelated organizations | | | | | 3a(i) | |
| (ii) related organizations | | | | | 3a(ii) | |
| b If 'Yes' to 3a(II), are the related o | rganizations listed as | required on Sch | edule R? | | 3b | |
| 4 Describe in Part XIV the intended | | | | | | |
| Rartivii Investments-Land, B | uildings, and Eq | uipment. See | Form 990, Part X | , line 10. | | |
| Description of investment | | st or other basis nvestment) | (b) Cost or other basis (other) | (c) Depreciation | (d) Book | Value |
| 1 a Land | | | | | | |
| b Buildings | | | | | | |
| c Leasehold improvements | | | 121,653. | 33,955. | 8 | 7,698. |
| d Equipment | | | 551,494. | 509,905. | 4 | 1,589. |
| e Other | | | | | | |
| Total. Add lines 1a-1e (Column (d) sho | uld equal Form 990, | Part X, column (| B), line 10(c)) | <u> </u> | 12 | 9,287. |
| BAA | | | | Sche | dule D (Form | 990) 2008 |

Schedule D (Form 990) 2008 COMPETITIVE ENTERPRISE INSTITUTE

52-1351785

Page 3

| | | 7-T35 | 11/85 Page 4 |
|-------------|---|----------------------|--------------|
| Par | tixlii Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | r |
| 1 | Total revenue (Form 990, Part VIII,column (A), line 12) | | |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | | |
| 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 4-8 | | |
| | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9. | | |
| Par | रिंXllब्बे Reconciliation of Revenue per Audited Financial Statements With Revenue per R | eturn | <u> </u> |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | 11.00 | |
| а | Net unrealized gains on investments | 30.00 | |
| Ŀ | Donated services and use of facilities 2b | 14.24 | |
| c | Recoveries of prior year grants | 13.1 | |
| c | Other (Describe in Part XIV) | | |
| | Add lines 2a through 2d | 2 e | |
| | Subtract line 2e from line 1 | 3 | |
| | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | 1032171 | |
| | Investments expenses not included on Form 990, Part VIII, line 7b | 1 | |
| | Other (Describe in Part XIV) | 111 | |
| | Add lines 4a and 4b | 4c | |
| | Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.) | 5 | |
| | t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per | r Ret | urn |
| | Total expenses and losses per audited financial statements | 1 | |
| | Amounts included on line 1 but not on Form 990, Part IX, line 25 | a des | |
| | Donated services and use of facilities 23 | | 1 |
| | - · · · · · · · · · · · · · · · · · | - (73.7) | |
| | Prior year adjustments 2b | - | |
| | Losses reported on Form 990, Part IX line 25 | - | 1 |
| | Other (Describe in Part XIV) | | 1 |
| • | e Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | 7 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | 1 | |
| ā | Investments expenses not included on Form 990, Part VIII, line 7b | ¥200 - 20 11 - 11 | |
| t | Other (Describe in Part XIV) | Trees. | |
| c | : Add lines 4a and 4b | 40 | : |
| 5 | Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18) | 5 | |
| | TXIV Supplemental Information | | |
| Com line | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, 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 D (Form 990) 2008 COMPETITIVE ENTERPRISE INSTITUTE | 52-1351785 Page 9 |
|---|---|
| Schedule D (Form 990) 2008 COMPETITIVE ENTERPRISE INSTITUTE [Rankwill Supplemental Information (continued) | |
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SCHEDULE J (Form 990)

Compensation Information

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

OMB No 1545-0047

2008

Openio Public

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, line 23.

Name of the organization

COMPETITIVE ENTERPRISE INSTITUTE

Parallel Questions Regarding Compensation

Open to Public in Special Function in Special

52-1351785

| Ranging Questions Regarding Compensation | |
|---|--|
| | Yes No |
| 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items | Part |
| First-class or charter travel Housing allowance or residence for personal use | |
| Travel for companions Payments for business use of personal residence | |
| Tax indemnification and gross-up payments Health or social club dues or initiation fees | |
| Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | Man III |
| | |
| р it line та is checked, did the organization follow a written policy regarding payment or reinfoursement or provision of | WARRAN TO A STATE OF THE STATE |
| of the expenses described above? If 'No,' complete Part III to explain | 1 b |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, director trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | rs, 2 |
| | |
| 3 Indicate which, if any, of the following organization uses to establish the compensation of the organization's | |
| CEO/Executive Director Check all that apply | |
| Compensation committee Written employment contract | |
| Independent compensation consultant Compensation survey or study | 7)Kin 1977 |
| Form 990 of other organizations Approval by the board or compensation committee | e ilitrisii, |
| | titili i ten |
| 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a | |
| a Receive a severance payment or change of control payment? | 4a X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b X |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c X |
| If Yes to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III | History and the state of the st |
| Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. | The state |
| 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: | |
| a The organization? | 5a X |
| b Any related organization? | 5b X |
| If 'Yes' to line 5a or 5b, describe in Part III | |
| 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | |
| a The organization? | 6a X |
| b Any related organization? | 6b X |
| If 'Yes' to line 6a or 6b, describe in Part III | |
| 7 For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III | 7 X |
| 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the incontract exception described in Regs section 53 4958-4(a)(3)? If 'Yes,' describe in Part III | tial 8 X |

Schedule J (Form 990) 2008

Page 2

Schedule J (Form 990) 2008 COMPETITIVE ENTERPRISE INSTITUTE ESTENDING FOR Schedule J 1 if additional space is needed.

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

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

| | (B) Breakdown | (B) Breakdown of W-2 and/or 1099-MISC compensation | C compensation | (C) Deferred | (D) Nontax ible | (E) Total of columns | (F) Compensation |
|-------------|-------------------------|--|---|---|---|---|---|
| (A) Name | () Base compensation | (ii) Bonus and incentive compensation | (iii) Other compensation | compensation | benefit: | (a)·(b)(b) | Form 990 or Form 990 or Form 990-EZ |
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| ย | (ii) | | | | | School | Schadula 1 (Form 990) 2008 |
| | | | TEEA4102 08/1 | 08/11/08 | | 3 | מחום לי כיווים לי ביותר |

SCHEDULE O (Form 990)

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.

| | OMB No 1545-0047 | | | | |
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| | 2008 | | | | |
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| | ider Salon | | | | |

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

| COMPETITIVE ENTERPRISE INSTITU | ΓE | 52-1351785 |
|------------------------------------|--|-----------------------------------|
| Pt_VI-A, Line_2THE_PRESIDENT | I IS RELATED TO A BOARD MEMBER BY M | ARRIAGE. |
| Pt VI-A, Line 10 A DRAFT COPY | OF THE 990 IS PROVIDED TO THE GOVE | RNING |
| BODY FOR REV | IEW. UPON RESOLUTION OF ANY PROBLE | MS_AND/OR |
| QUESTIONS RE | LATED TO THE DRAFT, A FINAL COPY IS | PREPARED |
| VAD SICHED B | A THE EXECUTINE DISECTOR YMD BII'BD | Miwh Whe ibd |
| Pt VI-B, Line 12c OFFICERS, DI | RECTORS, AND EMPLOYEES ARE REQUIRED | TO SIGN A |
| CONFLICT OF | INTEREST STATEMENT ANNUALLY AND DIS | CLOSE |
| AN CONFLICTS | OR POTENTIAL CONFLICTS OF INTEREST | · |
| Pt VI-B, Line 15 CEI HAS A COMPENS | NATION COMMITTEE COMPRISED OF BOARD MEMBERS TO I | DETERMINE THE COMPENSATION OF TOP |
| MANAGEMENT OFF | ICIALS. DECISIONS OF THIS COMMITTEE ARE E | BASED ON COMPARATIVE ANALYSIS |
| OF COMPENSAT | ION LEVELS AND PEER LEVEL NON-PROFI | T ORGANIZATIONS |
| Pt VI-B, Line 15 CEI HAS IN-H | OUSE DELIBERATION TO DETERMINE COMP | ENSATION LEVELS |
| OF OTHER OFF | ICERS AND KEY EMPLOYEES OF THE ORGA | NIZATION. |
| Pt VI-C, Line 19 A COPY OF TH | E 990 IS AVAILABLE TO THE PUBLIC UP | ON |
| WRITTEN REQU | EST. | |
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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission.

GOVERNMENT. WE BELIEVE THAT CONSUMERS ARE BEST HELPED NOT BY GOVERNMENT REGULATION, BUT BY BEING ALLOWED TO MAKE THEIR OWN CHOICES IN A FREE MARKETPLACE.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4a (continued)

SEEKS TO DEVELOP NEW TOOLS FOR CHALLENGING GOVERNMENT REGULATIONS AND TO USE THESE IN ADMINISTRATIVE AND COURT ACTIONS TO BETTER BALANCE THE PUBLIC POLICY DEBATE AND TO RESTORE PROPERTY AND CONTRACT RIGHTS.

REGULATORY AND ECONOMIC LIBERY:

SEEKS TO ANALYZE AND PROMOTE FREE-MARKET REGULATORY POLICIES IN AREAS SUCH AS TECHNOLOGY, TELECOM, ELECTRICITY, FINANCIAL REGULATION AND PRIVACY.

OTHER SERVICES PROVIDED BY CEI INCLUDE PUBLICATIONS, MEDIA OUTREACH, OTHER POLICY ISSUES, AND LOBBYING.

Form 990, Page 6, Line 17 States Form 990 Filed In

| Alabama |
|----------------------|
| Alaska |
| Arizona |
| Arkansas |
| California |
| Colorado |
| Connecticut |
| District of Columbia |
| Florida |
| Georgia |
| Illinois |
| Kansas |
| Kentucky |
| Maine |
| Maryland |
| Minnesota |
| Massachusetts |
| Michigan |
| Mıssissippi |
| Montana |
| Missouri |
| New Hampshire |
| New Jersey |
| New Mexico |
| New York |
| North Carolina |
| North Dakota |
| Ohio |
| Oklahoma |
| Oregon |
| Pennsylvania |
| Rhode Island |

52-1351785

| Form 990, Page 6, Line 17 States Form 990 Filed In | Continued |
|--|-----------|
| South Carolina | |
| South Dakota | |
| Tennessee | |
| Utah | |
| Virginia | |
| Washington | |
| West Virginia | |
| Wisconsın | |