** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements.

JUL 1, 2008 and ending JUN 30, 2009 A For the 2008 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable: Please use IRS label or Address change FOCUS PROJECT, INC. print or Name change Doing Business As OMB WATCH 52-1302617 type. Initial return E Telephone number Room/suite Number and street (or P.O. box if mail is not delivered to street address) 202-234-8494 Specific 1742 CONNECTICUT AVENUE, N.W. Termin-ation Instruc-Amended 3,244,508. G Gross receipts \$ City or town, state or country, and ZIP + 4 Applica-tion pending WASHINGTON, DC H(a) Is this a group return F Name and address of principal officer: GARY D. BASS for affiliates? JYes X No SAME AS C ABOVE H(b) Are all affiliates included? Yes 1 Tax-exempt status: X 501(c) (3) (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ➤ WWW.OMBWATCH.ORG H(c) Group exemption number K Type of organization: X Corporation L Year of formation: 1983 M State of legal domicile: DC Other -Association Part I Summary Briefly describe the organization's mission or most significant activities: TO INCREASE GOVERNMENT Activities & Governance TRANSPARENCY AND ACCOUNTABILITY; TO ENSURE SOUND, EQUITABLE if the organization discontinued its operations or disposed of more than 25% of its assets. 2 16 3 Number of voting members of the governing body (Part VI, line 1a) 15 Number of independent voting members of the governing body (Part VI, line 1b) 4 30 Total number of employees (Part V, line 2a) 5 3 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1,571,878. 2,944,816. Contributions and grants (Part VIII, line 1h) Revenue 279,076. 239,098. Program service revenue (Part VIII, line 2g) 20,616. 29,395. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 648,975. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,489,346. 3,244,508. Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12) 31,000. 422,026. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 1,254,737 1,374,358. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 641,740 659,846. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1,927,477 2,456,230. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 561,869. 788,278. Revenue less expenses, Subtract line 18 from line 12 Net Assets or Fund Balances Beginning of Year End of Year 1,891,668 2,544,048. 20 Total assets (Part X, line 16) 63,184. 74,070. 21 Total liabilities (Part X, line 26) 817,598. 2,480,864. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 3/19/40 Sign Signature of officer Here GARY D. BASS, Type or print name and title Preparer's self-Paid 3/18110 employed 🕨 signature Prenarer's Firm's name (or DROLET & ASSOCIATES, P.L.L.C EIN > yours if Use Only 1901 ★ STREET, NW #250 self-employed), Phone no. ► 202-822-0717 WASHINGTON, DC 20036 X Yes May the IRS discuss this return with the preparer shown above? (see instructions) Form 990 (2008)

Form **990** (2008)

Par	1 990 (2008) FOCUS PROJECT, INC. 52-1302617 Page Matter Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission: TO INCREASE GOVERNMENT TRANSPARENCY AND ACCOUNTABILITY; TO ENSURE	
	SOUND, EQUITABLE REGULATORY AND BUDGETARY PROCESSES AND POLICIES; AND	
	TO PROTECT AND PROMOTE ACTIVE CITIZEN PARTICIPATION IN OUR DEMOCRACY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	No
	If "Yes", describe these new services on Schedule O. Did the green ration goese conducting or make significant changes in how it conducts any program services? Yes X	.
3	Did the organization cease conducting, or make significant changes in now it conducted any program controls	No
	If "Yes", describe these changes on Schedule O.	
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.	
40	(Code:) (Expenses \$ 1,064,732 • including grants of \$ 206,263 •) (Revenue \$	1
4a	(Code:) (Expenses \$ 1,064,732. Including grants of \$ 200,263.) (Revenue \$ ACCESS TO INFORMATION - RESEARCH AND PROVIDE DATA ON POLICIES	,
	PERTAINING TO PUBLIC ACCESS TO GOVERNMENTAL AND INDUSTRY DATA ABOUT	
	ISSUES THAT AFFECT THE PUBLIC INTEREST.	
		-
	0.500	
4b	(Code:) (Expenses \$ 359,102. including grants of \$ 9,500.) (Revenue \$)
	NONPROFIT ADVOCACY - PROMOTE FREE SPEECH RIGHTS AND ENCOURAGE POLICY	
	INVOLVEMENT BY NONPROFIT ORGANIZATIONS THROUGH MEETINGS, TRAININGS AND	
	INFORMATIONAL MATERIALS.	
	·	
		-
4c	(Code:) (Expenses \$ 492,462. including grants of \$ 206,263.) (Revenue \$)
	FISCAL POLICY - CONDUCT MEETINGS AND PROVIDE ANALYSIS TO PROMOTE	
	FEDERAL FISCAL ACCOUNTABILITY, EQUITY, AND IMPROVED GOVERNMENT	
	PERFORMANCE.	
	Ollows and the Cohodule O	
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 259, 478 • including grants of \$) (Revenue \$)	
	CEAUGIOGO A DEFENDA INCIDIDA GIGITO DE CARRON I INCYCHIO V	

4e Total program service expenses ►\$

Par	tav Checklist of Required Schedules			
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. is the organization subject to the section 6033(e) notice and			İ
	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	88		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? 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		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Х	
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	X	ļ
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	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		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		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		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			,,
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	_		
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	ļ
25a				,,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<u> </u>	X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			v
	prior year? If "Yes," complete Schedule L, Part I	25b	ļ	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			U
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			X
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	<u> </u>	<u> </u>

Form 990 (2008) FOCUS PROJECT, INC.
Part IV Checklist of Required Schedules (continued)

F-07-00000		p000000000	Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
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	<u> </u>
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ļ
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			ĺ
	If "Yes," complete Schedule N, Part I	31		X.
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u>X</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
-	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X.

Form **990** (2008)

Form	990 (2008) FOCUS PROJECT, INC.	52-1	302617	Р	age 5
Par					
(a.t.)	O COLONIO NO SECULIA DE COLONIO NO SECULIA D			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	1a	8		
h	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable	1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
·	(gambling) winnings to prize winners?		1c	Х	
29	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Zu	filed for the calendar year ending with or within the year covered by this return	2a	30		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax return		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				
22	Did the organization have unrelated business gross income of \$1,000 or more during the year covere		3a	.,,,,,,,,,,	X
			1		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
48	financial account in a foreign country (such as a bank account, securities account, or other financial	account\?	4a		X
1.					
D	If "Yes," enter the name of the foreign country:	Ponk and	—		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign I	Dalik aliO			
	Financial Accounts.			120000000	X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa				+*
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity				1
	Tax Shelter Transaction?				X
	Did the organization solicit any contributions that were not tax deductible?		<u>6a</u>		<u>^</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contribut				
	were not tax deductible?		6b	1000000	
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more			-	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w				_V
	to file Form 8282?		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	personal			
	benefit contract?				X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra				X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			X	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	C as required?	7h	X	2000000
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	ganization, have			/
	excess business holdings at any time during the year?		8		J
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a	ļ	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter: N/A				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter: N/A				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		7		
~	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	· · · · · · · · · · · · · · · · · · ·	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b			
			/		

Form 990 (2008) FOCUS PROJECT, INC. 52-1302617 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management							
		£700000000	Yes	No				
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,							
	processes, or changes in Schedule O. See instructions.							
1a	Enter the number of voting members of the governing body	<u>6</u>						
b	Enter the number of voting members that are independent 1b 1	5						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2		X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors or trustees, or key employees to a management company or other person?	3		X				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4_	X	<u></u>				
5	Did the organization become aware during the year of a material diversion of the organization's assets?			<u>X</u>				
6 Does the organization have members or stockholders?								
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the							
	governing body?	7a		_X_				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Χ				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
	by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	X					
9a	Does the organization have local chapters, branches, or affiliates?			X				
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with those of the organization?	9b						
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must							
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х					
11	is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. 11		X				
Sec	tion B. Policies							
			Yes	No				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	_				
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise							
	to conflicts?	12b	Х					
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1						
	in Schedule O how this is done	12¢	Х					
13	Does the organization have a written whistleblower policy?	13	Х					
14	Does the organization have a written document retention and destruction policy?		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:							
а	The organization's CEO, Executive Director, or top management official?		Х					
	Other officers or key employees of the organization?	15b	Х					
-	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		Х				
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation							
_	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► NONE							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	le for						
	public inspection. Indicate how you make these available. Check all that apply.							
	X Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	incial					
13	statements available to the public.							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	zation:	-					
20	THE ORGANIZATION - 202-234-8494							
	1742 CONNECTICUT AVENUE, N.W., WASHINGTON, DC 20009							

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0· in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not co	ompensate an	y of	ficer	, dir	ecto	or, tre	uste	e, or key employee.		
(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average		Position (check all that apply)		Reportable	Reportable	Estimated			
	hours	(C	neck	(all	that	app	ily) I	compensation from	compensation from related	amount of other
	per week	ector						the	organizations	compensation
	Wook	or of	e			afed		organization	(W·2/1099·MISC)	from the
		eatsn	nstitutional trustee		88	Stradu		(W-2/1099-MISC)		organization
		tage 4	tional		yold	l tco				and related organizations
		ndividual trustee or director	nstitu	Officer	Кеу етрюуее	Highest compensated employee	Į,			organizations
GARY D. BASS		_	-	_			 - -			
EXECUTIVE DIRECTOR	40.00	X		Х				97,650.	0.	21,686.
PAUL MARCHAND	10.00			**		1		3.7,444		
CHAIR	5.00	x		X				0.	0.	0.
ELLEN MILLER	3.00			-		1				
VICE-CHAIR AND SECRETARY	5.00	Х		X				0.	0.	0.
ROBERT LAWRENCE										
TREASURER	5.00	X		X				0.	0.	0.
JULIO C. ABREU										
BOARD MEMBER	2.00	X					l	0.	0.	0.
NANCY AMIDEI										
BOARD MEMBER	2.00	X		<u> </u>	<u> </u>			0.	0.	0.
ANNA AURILIO										
BOARD MEMBER	2.00	X			ļ		<u> </u>	0.	0.	0.
PAMELA GILBERT				ŀ					_	
BOARD MEMBER	2.00	Х		<u> </u>		_		0.	0.	0.
EDWIN S. JAYNE		ŀ								
BOARD MEMBER	2.00	X			<u> </u>	_	_	0.	0.	0.
BEN JEALOUS									_	_
BOARD MEMBER	2.00	X	ļ	<u> </u>	_	ļ	<u> </u>	0.	0.	0.
SYLVIA E. JOHNSON										
BOARD MEMBER	2.00	X	<u> </u>		<u> </u>	ļ	<u> </u>	0.	0.	0.
BILL KAMELA		l							_	_
BOARD MEMBER	2.00	X		_	<u> </u>	-	ļ	0.	0.	0.
MARY M. LASSEN	0 00	١							_	0.
BOARD MEMBER	2.00	X		-	ļ	-	┼	0.	0.	U •
MARK ROSENMAN	0.00	.,						_	0.	0.
BOARD MEMBER	2.00	X	+-	┼	+		┼	0.	U •	0.
MARGARET SEMINARIO	2 00	٦,						0.	0.	0.
BOARD MEMBER	2.00	X	\vdash	+-	+	-	\vdash	V •	· · · · · · · · · · · · · · · · · · ·	<u></u>
JAMES D. WEILL	2.00	x						0.	0.	0.
BOARD MEMBER	2.00	<u>^</u>	+	-	\vdash	+	\vdash		0.	<u> </u>
		1	1	1	<u> </u>	_1	_		1	

	990 (2008) FOCUS PR									52-13	02617	7 Page	8
Par	T VII Section A. Officers, Directors, Tru		mplo	yee			ligh	est				/E\	
	(A) Name and title	(B) Average hours	(cl	(C) Position (check all that apply)		(D) Reportable compensation from	(E) Reportable compensation from related	i	(F) Estimated Imount of other				
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	or ar	mpensation from the ganization nd related ganizations	
<u> </u>				-									
1 b	Total						>		97,650.		0. 2	21,686	
2	Total number of individuals (including thos compensation from the organization	e in 1a) who re									<u> </u>	Yes No	0
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s								highest compensated e		3	X	<u></u>
4	For any individual listed on line 1a, is the sand related organizations greater than \$15	0,000? <i>If</i> "Yes	," cc	mpl	ete	Sch	edul	∍ J i	for such individual		4	Х	₩ ζ
5	Did any person listed on line 1a receive or the organization? If "Yes," complete Scheo										5	X	<u>፠</u>
1	ction B. Independent Contractors Complete this table for your five highest countries the organization. NONE	ompensated in	dep	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of comp	ensation	from	
	(A) Name and business	address				-			(B) Description of	services	Comp	(C) ensation	
	Total number of independent contractors (including thos	e in	1) w	ho r	ecei	ived	moi	re than \$100,000 in con	npensation			
	from the organization 🕨	0									_		<u></u>

Form 990 (2008) FOCUS PROJECT 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).

	All other organizations must comp				(D).
Do r 7b, 8	not include amounts reported on lines 6b, 3b, 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	422,026.	422,026.		
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,	100 407	100 461	E 024	0 022
	trustees, and key employees	123,407.	109,461.	5,924.	8,022.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.50 4.04	000 004	E2 0E1	00 100
7	Other salaries and wages	952,434.	809,294.	53,951.	89,189.
8	Pension plan contributions (include section 401(k)	40 500	24 211	2 200	4 000
	and section 403(b) employer contributions)	40,599.	34,211.	2,380.	4,008. 16,733.
9	Other employee benefits	178,483.	151,568.	10,182.	
10	Payroll taxes	79,435.	67,787.	4,432.	7,216.
11	Fees for services (non-employees):	İ			
а	Management		46.700	2 740	686.
b	Legal	50,217.	46,782.	2,749.	1,441.
C	Accounting	32,765.	13,365.	17,959.	1,441.
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	4.0.400	100 000	1 (01	2 620
g	Other	143,198.	138,938.	1,621.	2,639.
12	Advertising and promotion	00000	00 057	1 042	2 022
13	Office expenses	33,032.	29,057.	1,943.	2,032. 1,627.
14	Information technology	20,534.	17,910.	997.	1,027.
15	Royalties	305 445	151 004	10 026	16,325.
16	Occupancy	177,445.	151,094.	10,026.	820.
17	Travel	22,130.	20,164.	1,146.	020.
18	Payments of travel or entertainment expenses			·	
	for any federal, state, or local public officials	0.00	E0 140	1 544	1 675
19	Conferences, conventions, and meetings	55,362.	52,143.	1,544.	1,675.
20	Interest				
21	Payments to affiliates	4 - 601	10.010	0.60	1 406
22	Depreciation, depletion, and amortization	15,281.	13,012.	863.	1,406. 684.
23	Insurance	7,437.	6,333.	420.	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.)			1 504	0 740
a	INTERNET	62,065.	57,638.	1,684.	2,743.
b		27,367.	23,562.	1,448.	2,357.
c		7,867.	6,957.	349.	561. 307.
d		3,597.	3,102.	188.	111.
е	MEDIA	1,549.	1,370.	68.	111.
f		0 456 000	0 175 774	110 074	160,582.
25	Total functional expenses. Add lines 1 through 24f	2,456,230.	2,175,774.	119,874.	100,302.
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 (2008)
00001	10 12-18-08				FUITH 330 (2008)

200000					(A) Beginning of year		(B) End of year
					694,822.	1	735,015.
	1	Cash · non-interest-bearing	034,022.	2	7557015.		
	2	Savings and temporary cash investments	148,806.	3	921,306.		
	3	Pledges and grants receivable, net	25,336.	4	14,347.		
	4	Accounts receivable, net			25,550.	4	14/34/1
	5	Receivables from current and former officers, d		_			
		employees, or other related parties. Complete F				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)) and persons described in section 49				•	
		Part II of Schedule L.				6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			13,678.	8	13,980.
`	9	Prepaid expenses and deferred charges		145 001		9	13,500.
		Land, buildings, and equipment: cost basis	10a	143,301.			
	b	Less: accumulated depreciation. Complete	1	114,407.	45 249	40	31,574.
		Part VI of Schedule D		· · · · · · · · · · · · · · · · · · ·	45,248.		31,314.
	11	Investments · publicly traded securities			963,022.	11	827,260.
	12	Investments · other securities. See Part IV, line			903,022.	12	021,200.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			756.	14	566.
	15	Other assets. See Part IV, line 11			1 001 660	15	2,544,048.
	16	Total assets. Add lines 1 through 15 (must equ			74,070.	16	63,184.
	17	Accounts payable and accrued expenses			74,070.	17	03,104.
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
ie.	21	Escrow account liability. Complete Part IV of Sc				21	
Liabilities	22	Payables to current and former officers, director					
Lia		highest compensated employees, and disqualit of Schedule L		22			
	23	Secured mortgages and notes payable to unrel			23		
	24	Unsecured notes and loans payable			24		
	25	Other liabilities. Complete Part X of Schedule D	74 070	25	63,184.		
	26	Total liabilities. Add lines 17 through 25			74,070.	26	03,104.
		Organizations that follow SFAS 117, check h	ere 🕨	X and complete			
è		lines 27 through 29, and lines 33 and 34.			1,426,835.		1,142,750.
and	27	Unrestricted net assets			390,763.		1,338,114.
Ba	28	Temporarily restricted net assets			330,103.	28	1,330,114.
pu	29					29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, o	neck f	iere 🕨 🔛 and			
S OI		complete lines 30 through 34.				20	
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid in or capital surplus, or land, building, or e				31	
Zet	32	Retained earnings, endowment, accumulated in			1,817,598.	33	2,480,864.
_	33	Total net assets or fund balances			1,891,668.	34	2,544,048
Pai	34 + ¥1	Total liabilities and net assets/fund balances Financial Statements and Reporting			1,001,000.	34	2/311/0100
8 83.51	333A13	Financial Statements and Reporting	.				Yes No
1	٨٥٥٥	ounting method used to prepare the Form 990:		ash X Accrual	Other		
' 2а							2a X
b	b Were the organization's financial statements audited by an independent accountant?						
c							
		w, or compilation of its financial statements and					
3a	Ba As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						1 1 1
		and OMB Circular A-133?	-				3a X
b		es," did the organization undergo the required at					3b

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2008 Open to Public Inspection

Name of the organization

FOCUS PROJECT, INC.

Employer identification number 52-1302617

Reason for Public Charity Status (All organizations must complete this part.) (see instructions) Part I The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. _ Type III • Other **b** Type II c Type III · Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 11g(i) the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports. h (iii) Type of (iv) is the organization (v) Did you notify the (vi) is the organization in col (vii) Amount of (i) Name of supported (II) EIN organization in col. (i) listed in your organization in col. support organization (i) organized in the U.S.? (described on lines 1-9 (i) of your support? governing document? above or IRC section No Yes No (see instructions))

LHA 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 FOCUS PROJECT, INC. 52-13026

Rant 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.)

Sec	etion A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1359751.	1654644.	1591688.	1571878.	2944816.	9122777.
2	Tax revenues levied for the organ-	ļ					
	ization's benefit and either paid to			i			
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge			1501600	1531070	2044016	0100777
4	Total. Add lines 1 - 3	1359751.	1654644.	1591688.	1571878.	2944816.	9122777.
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,						1816060.
	column (f)				-		7306717.
	Public Support. Subtract line 5 from line 4.				l		7300717.
	ction B. Total Support	4.1.0004	#1 000F	(c) 2006	(d) 2007	(e) 2008	(f) Total
	endar year (or fiscal year beginning in)	(a) 2004 1359751.	(b) 2005 1654644.	1591688.	1571878.	2944816.	9122777.
_	Amounts from line 4	1339131.	1034044.	1331000	15710101	23110101	
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	5,556.	11,073.	23,344.	678,370.	20,616.	738,959.
^	and income from similar sources	37330.	11/0/3	20,011	0.0,0.0.		
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						9861736.
12		. etc. (see instructi	ons)			12 1	,276,059.
	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	
. •	organization, check this box and stop						 ▶
Se	ction C. Computation of Publ						
14	Public support percentage for 2008 (line 6, column (f) d	ivided by line 11,	column (f))		14	74.09 %
15	Public support percentage from 2007	7 Schedule A, Part	IV-A, line 26f			15	57.39 %
168	33 1/3% support test - 2008. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or r	more, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	oorted organization	ı			
ŀ	33 1/3% support test - 2007. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	6 or more, check ti	nis box
	and stop here. The organization qua	lifies as a publicly	supported organiz	ation			▶∟
178	10% -facts-and-circumstances tes	it - 2008. If the org	ganization did not o	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstar	nces" test, check t	his box and stop I	h ere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"						
ŀ	10% -facts-and-circumstances tes						
	more, and if the organization meets t	he "facts∙and⋅circu	ımstances" test, c	heck this box and	stop here. Explai	n in Part IV how the	•
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a publ	icly supported org	anization	
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						

							Page 3
Pa	edule A (Form 990 or 990·EZ) 2008 rt III Support Schedule for Oction A. Public Support	rganizations	Described in	Section 509(a)(2) (Complete only	if you checked the bo	
		(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	endar year (or fiscal year beginning in)	(a) 2004	10/ 2000	(0) 2550	, , , , , , , , , , , , , , , , , , ,		
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")				 		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						·
3	Gross receipts from activities that						
	are not an unrelated trade or bus-			}			
	iness under section 513						
A	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to					+	
	the organization without charge						
	Total. Add lines 1 · 5						
	Amounts included on lines 1, 2, and						
78							
	3 received from disqualified persons						
·	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 7c from line 6)						<u> </u>
Se	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9							
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					·	
1	b Unrelated business taxable income						
	(less section 511 taxes) from businesses				1		
	acquired after June 30, 1975						
	c 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.)						8
13	Total support (Add lines 9, 10c, 11, and 12.)						*
14		r the organization	's first, second, th	ird, fourth, or fifth	tax year as a sect	ion 501(c)(3) organi	zation,
	check this box and stop here	-		*****************	*****************		<u></u> ▶∟
Se	ection C. Computation of Pub	ic Support Pe	ercentage				
15	Public support percentage for 2008	line 8, column (f) o	divided by line 13,	column (f))		15	%
		7 Schedule A. Par	t IV-A. line 27a			16	%
16 Sc	ection D. Computation of Inve	stment Incom	ne Percentage	9			·
<u>36</u>	Investment income percentage for 2	OOR (line 10c colu	mn (f) divided by	line 13. column (f))	17	%
		000 (III 6 100, 0010 0007 Cabadida A	Dort IVA line 27	h	,		%
18	Investment income percentage from	ZUUT SCHEOUIE A	, rait iv A, III 62/	con line 14 and li	na 15 je more ther		
19	a 33 1/3% support tests - 2008. If the	organization did	not check the box	COLLINE 14, and III	re in is limite fligi	ization	▶
	more than 33 1/3%, check this box	and stop here. Th	e organization qua	aimes as a publicit	y supported organ	tzativii	
	b 33 1/3% support tests - 2007. If the	organization did	not check a box o	on line 14 or line 1	ya, and line 16 is r	nore than 33 1/3%,	aliu
	line 18 is not more than 33 1/3%, ch	eck this box and s	stop here. The org	ganization qualifie	s as a publicly sup	portea organization	
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	9a, or 19b, check	this box and see	nstructions	90 or 990-EZ) 2008
_						rendensia a sentin y	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

Name of the organizati	Employer identification number	
	FOCUS PROJECT, INC.	52-1302617
Organization type (chec		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundat	ion
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule. (Note. Only a section 501(c le and a Special Rule. See instructions.))(7), (8), or (10) organization can check boxes
General Rule		
· ·	ns filing Form 990, 990·EZ, or 990·PF that received, during the year, $$5,000$ or momplete Parts I and II.	ore (in money or property) from any one
Special Rules		
509(a)(1)/170(b	01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% suppo o)(1)(A)(vi), and received from any one contributor, during the year, a contribution or m 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Pa	of the greater of (1) \$5,000 or (2) 2% of the
aggregate conf	.01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received fro tributions or bequests of more than \$1,000 for use exclusively for religious, charit be prevention of cruelty to children or animals. Complete Parts I, II, and III.	
some contribut \$1,000. (If this etc., purpose.	i01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received fro tions for use exclusively for religious, charitable, etc., purposes, but these contributions is checked, enter here the total contributions that were received during the young to not complete any of the parts unless the General Rule applies to this organizatable, etc., contributions of \$5,000 or more during the year.)	utions did not aggregate to more than ear for an exclusively religious, charitable, ation because it received nonexclusively
they must answer "No"	that are not covered by the General Rule and/or the Special Rules do not file Schon Part IV, line 2 of their Form 990, or check the box in the heading of their Form meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Privacy Act a	and Paperwork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2008

for Form 990. These instructions will be issued separately.

	orm 990, 990-EZ, or 990-PF) (2008)	Emple	Page 1 of 2 of Part I yer identification number
Name of org	anization		
FOCUS	PROJECT, INC.	5	2-1302617
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$ 900,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		s75,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

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

Į.	000 DD 1000 DD 1000D		Page 2 of 2 of Part I
Schedule B (For Name of orga	rm 990, 990-EZ, or 990-PF) (2008) anization	Employ	ver identification number
	PROJECT, INC.	52	2-1302617
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$\$ <u>185,397.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$ <u>85,000.</u>	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below. ► Attach to Form 990 or Form 990-EZ.

Inspection

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.

	•	on answered "Yes," to c)(4), (5), or (6) organizat	Form 990, Part IV, line 5 (Proxy ions: Complete Part III	r rax), then		
	ne of organiz		iona: complete i div iiis		Em	ployer identification number
	-	FOCIE DI	ROJECT, INC.			52-1302617
Pŧ		o be completed by ee the instructions for S	all organizations exemp	ot under section	501(c) and section	527 organizations.
1			ation's direct and indirect politica	al campaign activities	in Part IV.	
2	Political exc	senditures			>	\$
3	Volunteer h	ours				
Pέ	art I-B T	o be completed by	all organizations exemp	ot under section	501(c)(3).	
	8	ee the instructions for S	chedule C for details.			
1	Enter the a	mount of any excise tax	incurred by the organization und	er section 4955		\$
2	Enter the a	mount of any excise tax	incurred by organization manage	ers under section 495	5	\$
3			n 4955 tax, dld it file Form 4720 :			
						L tes No
t Market	olf "Yes," de	scribe in Part IV.	y all organizations exemp	ot under section	501(c) except sect	ion 501(c)(3)
				of under section	out (o), except seen	1011 00 1 (0)(0).
_		ee the instructions for S	chedule G for details. I by the filing organization for sec	tion E27 exempt fund	otion activities	\$
1	Enter the a	mount directly expended	r by the filling organization for set ization's funds contributed to oth	ar arganizations for	section 527	Y
2	Enter the a	mount of the filing organ	zation's lunos contributed to ou	lei organizations for a	Section 527	\$
•	exempt fun	ction activities	function expenditures. Add lines	1 and 2 and enter he	re and on	¥
J	Form 1100	BOL line 17h	unotion expenditures. And intes	Talle E alle eller lie	•	\$
4			1120-POL for this year?			
5	State the n	g organization lie i onii amae addresses and en	nployer identification number (Ell	N) of all section 527 p	political organizations to wh	nich payments were made.
٠	Enter the a	mount paid and indicate	if the amount was paid from the	filing organization's f	funds or were political cont	ributions received and
	promptly a	nd directly delivered to a	separate political organization,	such as a separate se	egregated fund or a politica	il action committee (PAC).
			de information in Part IV.			
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

Schedule C (Form 990 or 990-EZ) 2008 FOCUS PROJECT, INC. 52-1302617 PRO (election under section 501(h)). See the instructions for Schedule C for details.

tocal 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 Mallings to members, legislators, or the public? Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? I Other activities? If "Yes," describe in Part IV J Total lines to 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 d If the filing organization incurred a section 4912 tax, did if the Form 4720 for this year? 2art III-A To be completed by all organizations exampt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. 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? 2 Did the organization make only in-house lobbying expenditures from the prior year? 3 Did the organization make only in-house lobbying expenditures from the prior year? 3 Did the organization gare to carryover lobbying and political expenditures from the prior year? 3 Did the organization make only in-house lobbying expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Decent of 162(e) non-deductible lobbying and political expenditures from the prior year? 5 Corryover from last year 6 Current year 7 Corrent year 8 Current year 9 Cart III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." 'see Schedule C instructions for detail			(6	3)	(t)
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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? Part III-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. Yes No 1 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 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? 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? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 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). 2 Current year 2 Did the organization agree to carryover to the reasonable estimate of nondeductible section 162(e) dues 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 (line 2c total minus 3 and 4)						
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Solicities Sol	o San	tille ining organization incurred a section 4912 tax, did it life form 4720 for this year	. section	501(c)(5). or sect	ion
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2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3						
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expenses for which the section 527(f) tax was paid). a Current year						
a Current year	-					
b Carryover from last year	а			2a	~	
c Total		·				
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? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) 3 4 5	b	Carryover from last year				
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	с 3	TotalAggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) duesIf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess	2b 2c 3		
	с 3	Total	cess political	2b 2c 3		
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	3 4 5	Total 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 ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	cess political	2b 2c 3 4 5	o, complete	o this part
or any additional information.	3 4 5 2a)	Total	cess political	2b 2c 3 4 5	o, complete	this part
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or any additional information.	3 4 5 2a)	Total	cess political	2b 2c 3 4 5	so, complete	this part
or any additional information.	3 4 5 2a)	Total	cess political	2b 2c 3 4 5	o, complete	this part

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2008 Open to Public Inspection

Name of the organization

Employer identification number 52-1302617

84.000		nizations Maintaining Donor Advised	Leunde or Other Similar Funds or	Accounts Complete if the
Pai				Accounts: complete ii tilo
	organi	zation answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
			(a) Zonor advices	
1		at end of year		
2		ntributions to (during year)		
3		ants from (during year)		
4	Aggregate va	lue at end of year	10° 00 101	No. 212
5		ization inform all donors and donor advisors in w		
	are the organ	ization's property, subject to the organization's e	xclusive legal control?	
6	Did the organ	ization inform all grantees, donors, and donor ad	visors in writing that grant funds may be use	e benefit? Yes No
	for charitable	purposes and not for the benefit of the donor or	donor advisor or other impermissible private	
Pai		servation Easements. Complete if the orga		iv, iiite 7.
1		conservation easements held by the organizatio		- ally in-mortant load area
		ration of land for public use (e.g., recreation or ple		
	r1	ion of natural habitat	Preservation of certified h	distoric structure
		ration of open space		
2	·	es 2a-2d if the organization held a qualified conse	ervation contribution in the form of a conserv	ation easement on the last day
	of the tax yea	ır.		Held at the End of the Year
а		of conservation easements		
b		restricted by conservation easements		
C		onservation easements on a certified historic stru		
d		onservation easements included in (c) acquired a		**
3		onservation easements modified, transferred, rele	eased, extinguished, or terminated by the org	ganization during the taxable
	year ►		s to to	
4	Number of st	ates where property subject to conservation eas	ement is located	
5		anization have a written policy regarding the period		Yes No
		of the conservation easements it holds?		Les Lite
6	Statt or volun	teer hours devoted to monitoring, inspecting, an	d emorcing easements during the year	
7	Amount of ex	spenses incurred in monitoring, inspecting, and e	morcing easements during the year > \$	4)/D\/D
8	and section 1	onservation easement reported on line 2(d) above 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, d	escribe how the organization reports conservation	on easements in its revenue and expense sta	atement, and balance sheet, and
	include, if app	plicable, the text of the footnote to the organizati	on's financial statements that describes the	organization's accounting for
	conservation	easements.		
Pa		nizations Maintaining Collections of		er Similar Assets.
	Comp	lete if the organization answered "Yes" to Form 9	990, Part IV, line 8.	
1a	If the organiz	ation elected, as permitted under SFAS 116, not	to report in its revenue statement and balar	nce sheet works of art, historical
		other similar assets held for public exhibition, ed		service, provide, in Part XIV, the text of
		to its financial statements that describes these it		
b	If the organiz	ation elected, as permitted under SFAS 116, to r	eport in its revenue statement and balance	sheet works of art, historical treasures,
	or other simil	ar assets held for public exhibition, education, or	research in furtherance of public service, p	rovide the following amounts relating to
	these items:			
		s included in Form 990, Part VIII, line 1		
		cluded in Form 990, Part X		
2		ation received or held works of art, historical trea		ain, provide
		amounts required to be reported under SFAS 11		
a	Revenues inc	cluded in Form 990, Part VIII, line 1		🟲 💲
b	Assets includ	ded in Form 990, Part X		🕨 \$

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment

(a) Cost or other basis (investment)

(b) Cost or other basis (other)

(c) Depreciation (d) Book value basis (other)

1a Land

b Buildings

c Leasehold improvements

d Equipment

e Other

Total. Add lines 1a·1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

31,574.

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. See	Form 990, Part X, line 12	•		
(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuat nd-of-year mark	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
CERTIFICATES OF DEPOSIT	173,045.	END-OF-YEAR	MARKET	VALUE
MONEY MARKET FUNDS	81,502.	END-OF-YEAR	MARKET	VALUE
US TREASURY/AGENCY SECURITIES	26,806.	END-OF-YEAR	MARKET	VALUE
MUTUAL FUNDS	545,907.	END-OF-YEAR	MARKET	VALUE
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶	827,260.			
Part VIII Investments - Program Related. See	e Form 990, Part X, line 1			
(a) Description of investment type	(b) Book value		ethod of valuated of the officer of	
7.1.1 (0.1/1) 1.1.1 1.1.5 1.000 D. 1.1.7 1.1.1 1.1				
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line 1	15			
	Description			(b) Book value
<u> </u>				
Total. (Column (b) should equal Form 990, Part X, col (B) lin	0.151		—	
Part X Other Liabilities. See Form 990, Part X, III				
(a) Description of liability		(b) Amount		
Federal income taxes				
receial income taxes				
Total. (Column (b) should equal Form 990, Part X, col (B) lin	ne 25.)			
Total (Column (D) should edga coll 1990, cart v' col (D) ill	U & U 1/1 F			

sche	dule D (Form 990) 2008 FOCUS PRODECT, INC.				<u> </u>	CCLCL, lugo.
Pai	TXI Reconciliation of Change in Net Assets from Form 990 to	Financ	cial State	ments		0.044.500
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		3,244,508.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		2,456,230.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		788,278.
4	Net unrealized gains (losses) on investments			4		-125,012.
5	Donated services and use of facilities			5		
6	Investment expenses			6	***	
7	Prior period adjustments			7		
8	Other (Describe in Part XIV)		I	8		
9	Total adjustments (net). Add lines 4-8			9		-125,012.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10		663,266.
Pai	t XII Reconciliation of Revenue per Audited Financial Statemen	nts Wi	th Reveni	ue per F	Return	
1	Total revenue, gains, and other support per audited financial statements				1	3,154,648.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
a	Net unrealized gains on investments	2a	-125	,012.		
b	Donated services and use of facilities	1 1	35	,152.	,	
c	Recoveries of prior year grants	i 1				
ď	Other (Describe in Part XIV)					
					2e	-89,860.
3	Subtract line 2e from line 1				3	3,244,508.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
•	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
a	Other (Describe in Part XIV)					
b	• • • • • • • • • • • • • • • • • • • •	1 1 1			4c	0.
-	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)					3,244,508.
5 DA	rt XIII Reconciliation of Expenses per Audited Financial Statement	ents W	ith Exper	ses pei		
	Total expenses and losses per audited financial statements				1	2,491,382.
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:		********			
2	Donated services and use of facilities	2a	35	,152		
a		1		,		
b	Prior year adjustments Losses reported on Form 990, Part IX, line 25	1				
C	Other (Describe in Part XIV)					
d	Add lines 2a through 2d	-			2e	35,152.
e					3	2,456,230.
3	Subtract line 2e from line 1					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4b				
b	Other (Describe in Part XIV)	L			40	0.
	Add lines 4a and 4b				4c	2,456,230.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		***************************************	*************	1 0 1	2/130/200.
	rt XIV Supplemental Information	l li=== 1	n and 4. Dan	LIV finan	th and f	Dr. Dort V. line 4: Part
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	ı, iines 1	a ano 4; mar	ιν, ines	10 8110 2	LO, Fait V, IIIIO 4, Fait
X; Pa	art XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.					

		E			1	

SCHEDULE I				:			OMB No. 1545-0047	- 1
(Form 990)		Grants and	Grants and Other Assistance to Organizations,	to Organizations			000	
		Governn	Governments, and Individuals in the U.S.	uals in the U.S.			2008	
Department of the Treasury Internal Revenue Service	► Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.Attach to Form 990.	n answered "Yes," on F ➤ Attach to Form 990.	" on Form 990, Pa n 990.	rt IV, lines 21 or 22.		Open to Public Inspection	
ne organization FOCUS	PROJECT, INC	•				<u>Ψ</u>	Employer identification number $52\!-\!1302617$	1
Part: General Information on Grants and Assistance	nd Assistance							
1 Does the organization maintain records to substantiate the amount of th	o substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	e grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		
criteria used to award the grants or assistance?	stance?						X Yes No	٥
2 Describe in Part IV the organization's procedures for monitoring the use	scedures for moni	toring the use of grant	of grant funds in the United States.	States.				1
Crants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	United States. C.	omplete if the orga	nization answered "Y	es* on Form 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 Part IV and Schedule I-1 (Form 990) if additional space is needed	5,000. Check this	s box if no one recipien	t received more th	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if additions	al space is needed 🕨	—
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CENTER FOR ECONOMIC AND POLICY								
RESEARCH - 1611 CONNECTICUT AVENUE NW. STE 400 - WASHINGTON, DC 20009	52-2204029	501(C)(3)	64,368	.0		щ	BAILOUT AND RECOVERY WORK	M
								l
MIC POLICY INSTITU								
끕								
WASHINGTON, DC 20005-4707	52-1368964	501(C)(3)	174,949.	0.		H4	BAILOUT AND RECOVERY WORK	鬞
# #								
WASHINGTON, DC 20002	23-7391766	501(C)(3)	24 493	0			BAILOUT AND RECOVERY WORK	띩
THE PROJECT ON GOVERNMENT								
(, DC 20005-3806	52-1739443	501(C)(3)	086'69	0			BAILOUT AND RECOVERY WORK	ыļ
TAXPAYERS FOR COMMON SENSE								
651 PENNSYLVANIA AVNUE SE.	50_104100	(0)(0)	00 1				שממנו עממנוססשם תואג שווס זו גם	Ā
J				4				il
								1
2 Enter total number of section 501(c)(3) and government organizations	nd government o	rganizations					2	
۳1	8			***************************************			A	- 1
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990	ction Act Notice,	see the instructions	for Form 990.				Schedule I (Form 990) 2008	ထ္ထ

52-1302617

Page 2

Schedule I (Form 990) 2008 FOCUS PROJECT, INC.

Partitle Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed.

(f) Description of non-cash assistance								
(e) Method of valuation (book, FMV, appraisal, other)				additional information.	T ON	FINANCIAL REPORTS TO THE ORGANIZATION		
(d) Amount of non-cash assistance	:			line 2, and any other	ARE REQUIRED TO REPORT ON	ORTS TO THE		
(c) Amount of cash grant				n required in Part I,	RE REQUIRE	NCIAL REPO		
(b) Number of recipients				vide the information	RANTEES A			
(a) Type of grant or assistance				Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	SCHEDULE I, PART I, LINE 2: THE GRANTE	PERIODICALLY AND	Andreas and the state of the st	

Schedule I (Form 990) 2008

SCHEDULE L

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Transactions with Interested Persons

Attach to Form 990 or Form 990-EZ.

➤ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

OMB No. 1545-0047

2008 Open To Public Inspection

Schedule L (Form 990 or 990-EZ) 2008

Employer identification number Name of the organization FOCUS PROJECT, INC. 52-1302617 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes Νo 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990 EZ, Part V, line 38a. (f) Approved by board or (g) Written (a) Name of interested (b) Loan to or from (e) In (c) Original principal (d) Balance due default? agreement? person and purpose the organization? ămount committee? Yes Yes No No Yes No То From Total Grants or Assistance Benefiting Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (c) Amount of grant or type (b) Relationship between interested person and of assistance the organization **Business Transactions Involving Interested Persons.** To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c (e) Sharing of (b) Relationship between interested (a) Name of interested person (c) Amount of (d) Description of organization's transaction person and the organization transaction revenues? Yes No 11,804.TO PROVIDE NANCY AMIDEI BOARD MEMBER WHO Х

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

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

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 Inspection

Name of the organization

FOCUS PROJECT, INC.

Employer identification number 52-1302617

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: REGULATORY AND BUDGETARY PROCESSES AND POLICIES; AND TO PROTECT AND PROMOTE ACTIVE CITIZEN PARTICIPATION IN OUR DEMOCRACY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: REGULATORY - PROVIDE INFORMATION AND ANALYSIS REGARDING CROSS-CUTTING REGULATORY ISSUES, PARTICULARLY AS THEY AFFECT PUBLIC HEALTH, SAFETY, AND ENVIRONMENTAL PROTECTIONS. EXPENSES \$ 259478. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION AMENDED ITS BYLAWS AS OF JUNE 30, 2009.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE AND UPON APPROVAL IS THEN CIRCULATED TO THE BOARD OF DIRECTORS FOR APPROVAL PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: BY THE END OF JANUARY IN EACH CALENDAR YEAR, ALL BOARD MEMBERS AND STAFF WITH EXPENDITURE AUTHORITY WILL SIGN A FORM TO ACKNOWLEDGE RECEIPT OF THE CONFLICTS OF INTEREST POLICY, THAT THEY AGREE TO ABIDE BY ITS TERMS, AND DECLARE AT THAT TIME ANY KNOWN CONFLICTS. IF A PERSON'S DECLARATIONS CHANGE DURING THE YEAR, THEY ARE TO FOLLOW THE PROCEDURE IN THE POLICY FOR ALERTING THE APPROPRIATE PEOPLE. THE RESPONSIBILITY IS ON THE INDIVIDUAL TO ABIDE BY THE POLICY, YET BOARD MEMBERS' COMPLIANCE WILL BE MONITORED BY THE BOARD CHAIR AND THE EXECUTIVE

SCHEDULE 0

(Form 990)

Department of the Treasury internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047 Inspection

Name of the organization

Employer identification number 52-1302617 FOCUS PROJECT, INC. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD DETERMINES THE COMPENSATION FOR THE EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR SETS THE SALARIES FOR KEY EMPLOYEES AFTER PERIODIC REVIEW OF COMPENSATION AT SIMILAR ORGANIZATIONS. FORM 990, PART VI, SECTION C, LINE 18: THE FORM 990 IS AVAILABLE THROUGH THE ORGANIZATION'S WEBSITE. FORM 1023 IS AVAILABLE UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST. FORM 990, SECTION XI, LINE 2C THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT. THERE HAVE BEEN NO CHANGES TO THE PROCEDURES USED BY THE AUDIT COMMITTEE. SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: NANCY AMIDEI (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: BOARD MEMBER WHO IS AN EMPLOYEE AT THE UNIVERSITY OF WASHINGTON. AMOUNT OF TRANSACTION \$ 11804. DESCRIPTION OF TRANSACTION: TO PROVIDE SERVICES FOR THE CIVIC

ENGAGEMENT PROJECT AT THE UNIVERSITY OF WASHINGTON. THE \$11,804 IN

PAYMENTS LISTED ABOVE WERE PAID TO THE UNIVERSITY OF WASHINGTON.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

2008 Open to Public Inspection

Name of the organization FOCUS PROJECT, INC.	Employer identification number 52–1302617
(E) SHARING OF ORGANIZATION REVENUES? = NO	

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

File a separate application for each return. X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Name of Exempt Organization Employer identification number Type or print 52-1302617 FOCUS PROJECT, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1742 CONNECTICUT AVENUE, N.W. return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions WASHINGTON, DC 20009 Check type of return to be filed (file a separate application for each return): Form 990-T (corporation) Form 4720 X | Form 990 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-T (trust other than above) Form 6069 Form 990-EZ Form 8870 Form 990-PF Form 1041-A O'CONNOR AND DESMARIAS • The books are in the care of ▶ 6720 CURRAN STREET - MCLEAN, VA 22101 Telephone No. ► 202-234-8494 FAX No. ⊳ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______. If this is for the whole group, check this box > _____ . If it is for part of the group, check this box > _____ and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until February 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year _____ or ▶ X tax year beginning JUL 1, 2008 , and ending JUN 30, 2009 If this tax year is for less than 12 months, check reason: Final return □ Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions, За If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 886c	(Rev. 4-2009)		<u> </u>	Page	: 2
● If you a	ire filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this	box		■ X	
	complete Part II if you have already been granted an automatic 3-month extension on a previously file				
■ If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
art II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies	needed).		
Type or	Name of Exempt Organization	Emp	oloyer ide	ntification numbe	r
print	FOCUS PROJECT, INC.		52-13	02617	
File by the extended due date for	Number, street, and room or suite no. If a P.O. box, see instructions. 1742 CONNECTICUT AVENUE, N.W.		IRS use o		
filing the return, See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20009	'			
X For	pe of return to be filed (File a separate application for each return): m 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A m 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069		'0
STOP! Do	o not complete Part II if you were not already granted an automatic 3-month extension on a previo	usly fil	ed Form 8	3868.	_
Teleph If the company If this into the company If this into the company If the company I	one No. 202-234-8494 reganization does not have an office or place of business in the United States, check this box of a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of a quest an additional 3-month extension of time until calendar year , or other tax year beginning JUL 1, 2008 , and ending is tax year is for less than 12 months, check reason: Initial return Final return	this is fo	or the who	ble group, check the extension is for.	<u>-</u> _
7 Sta	te in detail why you need the extension E STATEMENT 1				
non	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any refundable credits. See instructions.	8a	\$		_
tax	is application is for Form 990·PF, 990·T, 4720, or 6069, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit and any amount paid viously with Form 8868.	8b	\$		
	ance Due, Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit				
with	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	8c 8c	\$	N/A	_
Under pena	Signature and Verification Alties of perjury, f declare that I have examined this form, including accompanying schedules and statements, and to t	he best	of my know	ledge and belief,	
it is true, co	prrect, and complete and that I am authorized to prepare this form.		ا/لہ ھا ۔		
Sinnature	Title CPA	Dati	: B> ~///	W//A	

Form 8868 (Rev. 4-2009)

FORM 8688

EXPLANATION FOR EXTENSION

STATEMENT

EXPLANATION

WE RESPECTFULLY REQUEST ADDITIONAL TIME TO FILE THIS RETURN. THE INFORMATION REQUIRED TO FILE AN ACCURATE AND COMPLETE RETURN IS NOT YET AVAILABLE.