10905 01/25/2010 8:46 AM Form

Department of the Treasury Internal Revenue Services

Return of Organization Exempt From Income Tax

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

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

Form 990 (2008)

			The digament may have to use a copy of this retain to eathly state i	roporting roquit	OHIOHIO	Itiəheninii					
A	For the 2008	calendar y	ear, or tax year beginning , and ending								
В	Check if applicable		C Name of organization		D Emp	loyer identification number					
	Address change	use IRS	COMMITTEE OF SEVENTY								
\equiv	•	label or		i	23	-0487205					
Ш	Name change	print or	Doing Business As								
П	Initial return	type. See		Room/suite		ohone number					
\equiv		Specific	8 PENN CENTER, 1628 JFK BLVD		21.	215-557-3600					
=	Termination	Instruc-	City or town, state or country, and ZIP + 4		G Gross red	eipts \$ 1,379,480					
X	Amended return	tions.	PHILADELPHIA PA 19103								
己	Application pendir	F Name	e and address of principal officer:		H(a) is the	s a group return for					
ш	Appresson benuii		CHARY STALBERG	J	affilia						
			PENN CENTER, 1628 JFK BLVD	ĺ	H(b) Are a	il affiliales					
			•								
			ILADELPHIA PA 19103		lf "No	," attach a list. (see instructions)					
	Tax-exempt st		501(c) (3) ◀ (insert no.) 4947(a)(1) or 527								
	Website: ▶ WWW. SEVENTY. ORG										
<u>K</u>	Type of organizat	ion: 🗶 Cor	poration Trust Association Other ► L Yes	er of formation: 20	002	M State of legal domicile: PA					
P	art I	Summai									
			he organization's mission or most significant activities:								
			ttee of Seventy fights for clean and effective								
8	***	e commit	rcree or sevency rights for cream and errective	governile	#54	GTT.					
펄			and a better informed citizenry in Philadelphi	ia and th	e reg	ion					
èП		• • • • • • • • • • • • • • • • • • •	ed on Schedule O)	,							
ŏ	2 Check	this box	If the organization discontinued its operations or disposed of more than 25	5% of its assets	S						
Activities & Governance	3 Numbe	er of voting	members of the governing body (Part VI, line 1a)		3	58					
g			endent voting members of the governing body (Part VI, line 1b)		4	58					
ě	5 Total r	umber of a				6					
뜡						2000					
Ř			rolunteers (estimate if necessary)		. —	2000					
	7a lotaig	ross unrela	ated business revenue from Part VIII, line 12, column (C)		7a						
	b Net un	related bus	siness taxable Income from Form 990-T, line 34		. 7b	0					
1				Prior Year		Current Year					
9 [B Contrib	outions and	grants (Part VIII, line 1h)	1,105		1,185,222					
Revenue	9 Progra	ım serviçe :	144	,250	<u> 193,287</u>						
- ₹	10 Investr	nent incom	revenue (Part VIII, line 2g) ue (Part VIII, column (A), lines 3, 4, and 7d)	1	,601	. <u>971</u>					
~	11 Other	гечелие (Р	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	. 8	,070						
			dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,259		1,379,480					
\neg			r amounts pald (Part IX, column (A), lines 1-3)		, 						
			afarmanhan (Dart W. ankung (A) line 4)								
1			r for members (Part IX, column (A), line 4)		007	620 117					
Expenses	15 Salarie	s, other co	mpensation, employee benefits (Part IX, column (A), lines 5–10)		,927	638,117					
<u>چ</u> ا	16a Profes	sional fund	rapensation, employee benefits (Part IX, column (A), lines 5–10) raising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25)	23	,290						
ğ.	b Total fu	undraising	expenses (Part IX, column (D), line 25) 148,516								
ú	17 Other e	expenses (l	Part IX, column (A), lines 11a-11d, 11f-24f)	283	,636	422,681					
- 1	18 Total e	xpenses. A	dd lines 13-17 (must equal Part IX, column (A), line 25)	985	,853	1,060,798					
			enses. Subtract line 18 from line 12		,964	318,682					
58			The same of the sa	Beginning of		End of Year					
Net Assets or Fund Balances	20 Total a	ssets (Parl	X, line 16)		,945	752,756					
₽.			(M.B. on)		,617	89,748					
털			art X, line 26)		,328	663,008					
				240	, 520	003,000					
88. KK	-	<u>Signatur</u>				·					
		Inder penalti Ind bollet Itt	es of perjury, I declace that i have examined this return, including accompanying schedules an s true correct and complete. Declaration of preparer (other than officer) is based on all inform	d statements, an	d to the be	st of my knowledge					
_		ina polici, ici	s dup to the compete. Decid add of preparet (outer dial) officer) is based of all all alloring	auon or winen pr	eparer mas	ally kilometago.					
Sig	n 🗎										
Her	e 🏴	Signature	e of officer		Date						
	N	2AC	1 StalBURG President & CET)		3	11/2010					
			orint name and title		<u>~</u> _	/ - 					
	- '			AL		Preparer's Identifying number					
Paid	n I	reparer's	Date	Check if self-		(see Instructions)					
	parer's	lgnature	1/25/	10 employe	≠ ▶ ∟	P00765200					
		irm's name (orvours Milligan & Company, LLC		EIN	▶ 23-3010968					
Jot	Cilly '	self-employ	'		Phone						
		ddress, and				215-496-9100					
/lav	the IRS disc	uss this ret	urn with the preparer shown above? (see instructions)	-	, p	Voc No					

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

Fon	n 990 (2008) COMMITTEE O I	F SEVENTY	23-0487205	Page 2
		am Service Accomplishments		
	Briefly describe the organization's m			
•	The Committee of Se elections and a bet (continued on Sched	ter informed citize	ean and effective governry in Philadelphia a	ernment, fair nd the region
	Did the organization undertake any	significant program services during the	vear which were not listed on	· ·
_	the prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new service			
3	Did the organization cease conductle	ng, or make significant changes in how	it conducts, any program	
				Yes X No
	If "Yes," describe these changes on			
4			hree largest program services by expenses.	
		nizations and section 4947(a)(1) trusts ses, and revenue, if any, for each progi	are required to report the amount of grants	ano
	anocations to utilists, the total expen	ses, and tevenide, it any, for each progr	iani service reported.	
4a	(Code:) (Expenses \$	731,946 including grant	s of \$) (Reven	ue \$)
	the Committee of Seducates the citized isseminating and plectronic media and lections, ethics in eform issues to be	venty (a non-partis ns in Philadelphia ublishing informati d seminars about sa n government, and m	an organization) and the region by on via print, feguarding any other government eventy also monitors	
h	undreds of volunte	ers on election day	s in accordance with	***************************************
t	he organization's	tax exempt purpose.		
	<u>_</u>			
4b			s of \$) (Revenu	
	•			
	* *************************************			
				,.,
	• • • • • • • • • • • • • • • • • • • •			
	* • • • • • • • • • • • • • • • • • • •			
4c	(Code:) (Expenses \$	Including grant	s of \$) (Revenu	re \$)
	* *************************************			
				,.,

	• • • • • • • • • • • • • • • • • • • •			
	• • • • • • • • • • • • • • • • • • • •	***************************************		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	• • • • • • • • • • • • • • • • • • • •			
	· ····································		••••••	
4d	Other program services. (Describe In			
	(Expenses \$ Total program service expenses ▶	including grants of \$) (Revenue \$)
		* \$ 731,946 (Must	equal Part IX, Line 25, column (B).)	

2222.0	m 990 (2008) COMMITTEE OF SEVENTY 23-048 / 205		<u> </u>	age :
2000#	WARNESS OF REGISTROOF CONTROL		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			l
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			1
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	1		1
	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,"	1		l
	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	1		
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			l
	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	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return	i i		i
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	_X_	
13	is the organization a school 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		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	
	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		<u>X</u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23	X	
24a				
	\$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		<u> </u>
b	Dld 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		
26a	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		X
þ	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an Individual? If "Yes," complete Schedule L, Part III	27		<u> </u>

	art IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV			X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"	1		
	complete Schedule L, Part IV	28b	X	<u> </u>
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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1		1
	солservation contributions? If "Yes," complete Schedule М	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l
	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			İ
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? 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)

	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	1 1									
	U.S. Information Returns. Enter -0- if not applicable	1a	8								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0								
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rej	ortabl	-								
	gaming (gambling) winnings to prize winners?			1c	X						
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	2a	6								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see										
	instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by									
	this return?	, ,		3a		<u> </u>					
b	* *************************************										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authorit	у								
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial		ſ							
	account)?		**********	4a	***********	X					
b	If "Yes," enter the name of the foreign country:										
	See the Instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	3ank									
	and Financial Accounts.										
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5а		<u> </u>					
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>5b</u>		<u> </u>					
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity										
	Regarding Prohibited Tax Shelter Transaction?			5c							
6a	Did the organization solicit any contributions that were not tax deductible?			<u>6a</u>		<u>x</u>					
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or									
	gifts were not tax deductible?	<i>.</i>	***************************************	6b	***************************************	 } }					
7	Organizations that may receive deductible contributions under section 170(c).										
а	,										
	\$75?			7a	X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		*******	7b	^						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S				Х					
	required to file Form 8282?	7d		7c		<u>~</u>					
	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 property of the second of			7e		X					
	benefit contract?		.,	H		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f 7g		X					
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			/ y	-						
h				7 _h]	x					
8	required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect	ion									
•	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spon										
				8	***************************************	X					
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.										
а	Did the organization make any taxable distributions under section 4966?			9a	************	X					
b	Did the organization make a distribution to a donor, donor advisor, or related person?		.,,	9b		Х					
0	Section 501(c)(7) organizations. Enter:										
а		10a	•								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b									
1	Section 501(c)(12) organizations. Enter:										
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										
	amounts due or received from them.)	11b									
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a	<u> </u>						
b	if "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b									

23-0487205 Form 990 (2008) COMMITTEE OF SEVENTY Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See Instructions. 58 Enter the number of voting members of the governing body Enter the number of voting members that are independent Dld any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a Each committee with authority to act on behalf of the governing body? Does the organization have local chapters, branches, or affiliates? 9a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affillates, and branches to ensure their operations are consistent with those of the organization? 9b Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations X must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's malling address? If "Yes," provide the names and addresses in Schedule O Section B. Policies No Yes 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c describe in Schedule O how this is done

Does the organization have a written whistleblower policy?

Adopted in April 2009 13 13 Does the organization have a written document retention and destruction policy? Adopted in April 2009 14 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: X a , The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 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? X 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed PA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public Inspection. Indicate how you make these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of Interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the

organization: ► Committee of Seventy 8 Penn Center Plaza, Suite 1002

19103

Philadelphia

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

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

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

Check this box if the c	organization did not compe	nsate	e an	y off	cer,	direc	ctor,	trustee, or key employee.		,
(A)	(B)	L.	(C) Position (check all that apply)					(D)	(E)	(F) Estimated
Name and Title	Average hours per week	ndividual trustee		Officer	Key employee	d Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	emount of other compensation from the organization and related organizations
Zachary Stal Pres/CEO	berg* (see So 65	eh X	J)	x				248,733	0	0
Howard L. Me	yers, Esquire 4	x						0	. 0	0
Vice Chair	axman, Esqui: 1	ce X						0	0	0
Dianne L. Se Secretary	1	х						0	0	0
Michael Nado Treasurer	1	x						0	. 0	0
Ellen Mattle VP/Pol. Dir.	60			x		ļ 		115,115	0	0
See Attachme	nt for Comple	∍t∈	·I	is	ti	ng		0	0	0
										· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·										
										<u> </u>
1							_			
										·
· · · · · · · · · · · · · · · · · · ·										

DAA

(A) (Name and title	/ // // ·	(C) Position (check all that					_	_ Itoportable	(E) Reportable	(F) Estimated amount of
: : :	hours per week	Officer Institutional trustee Individual trustee or director		Key employee	Former Highest compensated employee		compensation from , the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	emount or other compensation from the organization and related organizations	
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						<u> </u>				<u> </u>
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			_							
	-									
		\dashv								
		\dashv	-							
1b Total				l		l	<u> </u>	363,848		
							tha	in \$100,000 In reportable c	ompensation from the	
employee on line 1a? For any individual liste the organization and reindividual Did any person listed of services rendered to the services.	If "Yes," complete Schedud on line 1a, is the sum of elated organizations great on line 1a receive or accrute organization? If "Yes,"	ule J f rep ter th ue co	for porta- nan : omp	such ble c \$150 ensa	indi comp ,000	vidua ensa ? If " from	al atior Yes	yee, or highest compensation in and other compensation in and other compensation in and other complete Schedule J for your unrelated organization for such person	rom such	3 X 4 X 5 X
Section B. Independent Co Complete this table for	r your five highest compe	nsate	ed ir	ıdep	ende	ent co	ontra	actors that received more ti	han \$100,000 of	
compensation from the	e organization. (A) Name and business address							Descripti	(B) on of services	(C) Compensation
	·		·							
,	-									
								1		· · · · · · · · · · · · · · · · · · ·
									-	
2 Total number of indepe		ling 1	thos	e In	1) w	no re	ceiv	red more than \$100,000 in		
AA	organization P							-		0 Form 990 (2008)

For	n 990	0 (2008) COMMITTEE OF SEVENTY		25-048/205		Page 9
₽8	irt V	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
মম	1a	Federated campaigns 1a				
Tan Tan	۰.ű b	Membership dues 1b	-			
g,	-	Fundralsing events 1c	-			
ar a	d	Related organizations 1d	-			
S, C		Government grants (contributions) 1e	-			
ion	f	All other contributions, gifts, grents,				
哲	•	and similar amounts not included above 1f 1,185,222				
들을	α	Noncash contributions included in lines 1a-1f: \$				
ဝွန	h	Total. Add lines 1a-1f	1,185,222			
e		Busn. Co				
JEJ	2a	MORNING AFTER ELECTION	193,287			193,287
Re	 b		· -			
Program Service Revenue Contributions, gifts, grants	c					
ě	q					
E		· · · · · · · · · · · · · · · · · · ·				
ga	f	All other program service revenue				
윤		Total. Add lines 2a–2f	193,287			
\neg		Investment Income (including dividends, Interest, and				
	•	other similar amounts)	971	971	·	
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties				
	•	(i) Real (ii) Personal				
	6a	Gross Rents				
	b	Less: rental exps.	\dashv			
		Rental Inc. or (loss)				
	d	Net rental Income or (loss)				
		Gross amount from (i) Securities (ii) Other				
- 1		sales of assets other than inventory				
j	h	Less: cost or other				
	-	basis & sales exps.				
	c	Gain or (loss)				
		Net gain or (loss)		***************************************		
		Gross Income from fundralsing events				
ą		(not including \$				
EJ		of contributions reported on line 1c).				
Š		See Part IV, line 18 a				
Other Revenue	b	Less: direct expenses b				
뒝		Net income or (loss) from fundraising events				
-		Gross Income from gaming activities.				
		See Part IV, line 19 a				
	b	Less: direct expenses b				
		Net income or (loss) from gaming activities				
		Gross sales of Inventory, less				
		returns and allowances a				
	b	Less: cost of goods sold b				
		Net Income or (loss) from sales of inventory	.			
,		Miscelianeous Revenue Busn. Co	de			
	11a					<u> </u>
	b					
	C	-				
	d	All other revenue				
	е		•			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,				
		9c. 10c. and 11e	1,379,480	971	0	193,287

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				
	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing 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					
5	Compensation of current officers, directors,		· · · · ·		
	trustees, and key employees		ļ		
6	Compensation not included above, to disqualified				<u> </u>
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	416,663	287,497	<u>70</u> ,833	<u>58,333</u>
7	Other salaries and wages	128,462	88,639	21,838	17,985
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				_
9	Other employee benefits	55,905	38,574	9,504	7,827
10	Payroli taxes	37,087	25,590	6,305	5,192
11	Fees for services (non-employees):				
а					
b					
C		27,005	18,633	4,591	3,781
d	Lobbying		•		<u> </u>
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
12	Advertising and promotion	12,586	8,684	2,140	1,762
13	Office expenses	12,692	8,757	2,158	1,777
14	Information technology	14,697	10,141	2,498	2,058
15	Royalties				
16	Occupancy	68,932	47,563	11,718	9,651
17	Travel	1,912	1,319	325	268
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,720	2,567	632	521
20	Interest	2,909	2,007	495	407
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,709	8,769	2,160	1,780
23	Insurance	4,434	3,059	754	621
				_	
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	Website	66,688	46,015	11,337	9,336
b	Morning After Election	43,519	30,028	7,398	6,093
C	Election Day	41,157	28,398	6,997	5,762
ď	Consulting	33,805	23,325	5,747	4,733
е	Printing/Publications	24,577	16,958	4,178	3,441
f	All other expenses	51,339	35,423	8,728	7,188
25	Total functional expenses. Add lines 1 through 24f	1,060,798	731,946	180,336	148,516
26	The second secon				
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundralsing solicitation				
DAA					5 QQQ (0000)

1 Cash-mon-interest bearing		Ju‱	Balance Sheet			/B\	_
Cash—non-interest bearing 36,270 i 67,359			4 1	(A)		(B) End of year	
2 Servings and furmpoisty cash investments 339,567 3 633,146			<u> </u>				_
3 Priority and gramts receivable, net 4 Accounts receivable, net 4 Accounts receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part I of Schedule L 6 Receivables from current departies, prompter Part I of Schedule L 24,050 7 7,500 8 Receivables from other disqualified persons (as defined under acciding dessign(1) and persons described in earth of Schedule L 24,050 7 7,500 8 Part I of Schedule L 24,050 7 7,500 8 Part I of Schedule L 24,050 7 7,500 8 Part I of Schedule L 24,050 7 7,500 8 Part I of Schedule L 24,050 7 7,500 8 Part I of Schedule L 24,050 7 7,500 10 10 10 10 10 10 10		1		36,270	_ 		
Accounts receivable, net A A A A A A A A A	l	2	Savings and temporary cash investments	200 F.CE			
A Accounts receivable, net		3		339,567		633,14	<u>0</u>
Secretables from current and former officers, directors, routlees, key employees, or other related parties. Complete Part If of Schedule L Secretables, so or other disqualified persons (as defined under excellon 4985(R)(1) and persons described in section 4985(R)(3)(B). Complete Part If of Schedule L Notes and loans receivable, net 24,050 7 7,500		4	Accounts receivable, net		_4		_
8 Receivablets from other disqualified persons (as defined under excition 4,050()(1)) and persons described in excition 4858(c)(3(8)). Complete Part IV of Schedule 1. 17 Notes and loans receivable, net 1. 18 Investments—porter excition. See Part IV, line 11		5	Receivables from current and former officers, directors, trustees, key		- 1		
## ## ## ## ## ## ## ## ## ## ## ## ##			employees, or other related parties. Complete Part II of Schedule L	<u> </u>	5		
## ## ## ## ## ## ## ## ## ## ## ## ##		6	Receivables from other disqualified persons (as defined under section				#
Part I of Schedule							
Notes and loans receivable, net 24,050 7 7,500					6		
Investroire for seale or use 8 5,370	ις.	7		2 <u>4,050</u>	7	<u>7,50</u>	<u>0</u>
10a	ह्न	_	Investories for sale or use				_
10a	ž	_	Prepaid expenses and deferred charges	10,527	9	5,37	0
b Less: accumulated depreciation. Complete 10b 46,847 36,781 10c 30,152	`		Land buildings, and equipment; cost basis 10a 76, 999				※
Part VI of Schedula D							#
11 Investments—publicly traded securities 11 12 12 13 13		~		36,781	10c	30,15	<u>2</u>
12 Investments—bother securities. See Part IV, line 11 12 13 14 11 11 12 14 11 11 12 14 11 11		44			11		
13 Investments—program-related. See Part IV, line 11	- 1		Investments other recurifies. See Part IV line 11		12		
14 Intanglible assets 14 14 15 15 15 15 15 15					13		_
15 Other assets. See Part IV. line 11					14		_
The Total sasets, See Park I through 15 (must equal line 34). 18 Grants payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Secured mortgages and notes payable to unrelated third parties 26 Other liabilities. Complete Part X of Schedule D 27 Unrestricted notes and loans payable 28 Total liabilities. Organizations that follow SFAS 117, check here II and complete lines 27 through 29, and lines 33 and 34. 29 Permanently restricted not assets 20 Permanently restricted not assets 20 Permanently restricted not assets 21 Despite stock or trust principal, or current funds 22 Payables tock or trust principal, or current funds 23 Patch in or capital surptus, or land, building, or equipment fund 24 Despite stock or trust principal, or current funds 25 Total leal assets or fund balences 26 Josephal stock or frust principal, or current funds 27 Unrestricted not assets 28 Permanently restricted not assets 29 Permanently restricted not assets 29 Permanently restricted not assets 20 Capital stock or trust principal, or current funds 31 Total leal assets or fund balences 32 Total leal assets or fund balences 33 Total leal assets or fund balences 455, 945 34 752, 756 Part XII Financial Statements and Reporting 4 Accounting method used to prepare the Form 990: Cash X Accrual Other 20 Were the organization's financial statements and selection of an independent accountant? 21 Accounting method used to prepare the Form 990: Cash X Accrual O			Other costs Cos Port IV Fre 44	8.750		8,75	ō
17 Accounts payable and accrued expenses 27,203 17 45,883 18 Grants payable 19 Deferred revenue 19 20 Tax exempt bond liabilities 20 21 Escrow account liability, Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable 24 25 Cother liabilities. Complete Part X of Schedule D 82,414 25 43,865 26 Other liabilities, Add lines 17 through 25 109,617 26 89,748 30 Organizations that follow SFA5 117, check here X and complete lines 27 through 29, and lines 33 and 34. 13,909 27 114,716 27 Unrestricted net assets 332,419 28 548,292 28 Temporarily restricted net assets 332,419 28 548,292 29 Permanently restricted net assets 332,419 28 548,292 30 Capital stock or trust principal, or current funds 31 31 32 33 34 34 34 34 34 34	1						
18 Grants payable 18 19 19 19 19 19 19 19	-						
19 Deferred revenue 19 20 20 30 30 30 30 30 30							
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1 1 1 2 2 2 2 2 2 2							_
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	b) If "	Yes," did the organization undergo the required audit or audits?			July 190	(B)

SCHEDULE A (Form 990 or 990-E2)

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. Employer Identification number COMMITTEE OF SEVENTY 23-0487205 Parti Reason for Public Charity Status (All organizations must complete this part.) (see instructions) 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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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)(lv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 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. a Type i c Type III-Functionally Integrated 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? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? [11g(i) (ii) A family member of a person described in (i) above? 11g(ll) (III) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following Information about the organizations the organization supports. (i) Name of supported (II) EIN (ill) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vil) Amount of organization (described on lines 1-9 In col. (i) listed in your the organization in organization in col. support above or IRC section governing document? col. (i) of your (I) organized in the (see Instructions)) support? U.S.? Νo Yes Νo

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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 organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a	10%-racts-and-circumstances test—200	o. II (II 0 Viyaliizati oofe and circumeta	ncee" feet check i	his hoy and stop h	ere. Explain in Pa	rt IV how the	
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 organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		organization mosts the "facts and electron	stances test. The c	ncos lest, check i rasalzstian auslifi	es as a nubliciv su	pported organizati	on	▶ [
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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	D	more, and if the organization meets the "fa	acts-and-circumsta	nces" test, check t	his box and stop h	tere. Explain in Pa	nt IV how the	▶□
	18	Private foundation, if the organization dic	i not check a box o	n line 13, 16a, 16i	, 17a, or 17b, che	ck this box and se	e Instructions	

<u>Sch</u>	nedule A (Form 990 or 990-EZ) 2008 CO	MMITTEE O	F SEVENTY		2:	3-0487205	Page 3
	art III Support Schedule for C	Organizations I	Described in 9	Section 509(a)			
50	(Complete only if you chection A. Public Support	<u>lecked the box</u>	on line 9 of P	art I.)			
	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
·	energet Aest for usest Aest peating in A	(a) 2004	(b) 2005	(6) 2006	(a) 2007	(e) 2006	(I) TOTAL
1	Gifts, grants, contributions, and membership fees received. (Do not Include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
6	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5				+	 	
7a	received from disqualified persons						
b	received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5.000						
C	Add lines 7a and 7b					ļ	
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support						
	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6					 	
10a	Gross income from Interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable Income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net Income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						-
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	e. <u></u>		•		(c)(3)	<u></u> ▶ □
	tion C. Computation of Public Su						
15	Public support percentage for 2008 (line 8	, column (f) divided	l by line 13, colum	n (f))		15	%
16 Sec.	Public support percentage from 2007 Sch	edule A, Part IV-A,	line 27g	· · · · · · · · · · · · · · · · · · ·		16	<u>%</u>
	tion D. Computation of Investme					1:_1	
17 10	Investment income percentage for 2008 (I	ine 10c, column (f)	divided by line 13	, column (f))		17	%
18 19a	Investment income percentage from 2007	ocnequie A, Part I	v-A, iine 2/h	. da . opal Po- 45 *		18 1	<u>%</u>
ıød	33 1/3 % support tests—2008. If the orga 17 is not more than 33 1/3 %, check this b					•	►□
b	33 1/3 % support tests—2007. If the orga					1	▶ ⊔
~	line 18 Is not more than 33 1/3 %, check the						▶ 🏻

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

Schedule A (Form 990 or 990-EZ) 2008 COMMITTEE OF SEVENTY	<u> 23-0487205 </u>	Page 4
Part IV Supplemental Information. Complete this part to provide the explanation	required by Part II, line 10;	
Part II, line 17a or 17b; or Part III, line 12. Provide any other additional inf	ormation. (see instructions)	
Part II, Line 10 - Other Income Detail		
\$ 8,842		
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service
Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2008

Employer Identification number COMMITTEE OF SEVENTY 23-0487205 Organization type (check one): Filers of: Section: X 501(c)(Form 990 or 990-EZ 3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check If your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.) General Rule For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filling Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF),

Page 1 of 2 of Part I Schedule B (Form 990, 990-EZ, or 990-PF) (2008) Employer Identification number Name of organization 23-0487205 COMMITTEE OF SEVENTY Part Contributors (see instructions) (c) (d) (a) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. Person William Penn Foundation 1 Payroll Two Logan Square, 11th Floor 100 North 18th Street
Philadelphia PA 19103 \$ 362,500 Noncash (Complete Part II if there is a noncash contribution.) (d) (c) (b) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. X Person 2 The Philadelphia Foundation 1234 Market Street; Suite 1800 Payroll \$ 50,000 Noncash Philadelphia PA 19107 (Complete Part II if there is a noncash contribution.) (d) (c) (a) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. W.W. Keen Butcher c/o Committee of Seventy Person 3 1628 JFK Boulevard; Suite 1002 Payroll \$ 40,000 Philadelphia PA 19103 Noncash (Complete Part II If there is a noncash contribution.) (d) (c) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. Greater Philadelphia Chamber of Comm Person 200 South Broad Street; Suite 700 Payroll \$ 25,000 Noncash Philadelphia PA 19102 (Complete Part II if there is a noncash contribution.) (d) (b) (c) (a) Type of contribution Name, address, and ZIP + 4 Aggregate contributions No. Phoebe W. Haas Charitable Trust B 1717 Arch Street; 14th Floor Person 5 Payroll \$ 25,000 Noncash Philadelphia PA 19103 (Complete Part II if there Is a noncash contribution.) (d) (c) (b) (a) Type of contribution Aggregate contributions Name, address, and ZIP + 4 No. Person Independence Foundation 6... Payroll Offices at the Bellevue 200 South Broad Street; Suite 1101 0 \$ 25,500 Noncash Philadelphia PA 19102 (Complete Part II if there is a noncash contribution.)

	B B (Form 990, 990-EZ, or 990-PF) (2008)		Page Z of Z of Part
	organization MITTEE OF SEVENTY		Employer Identification number 23–0487205
Parti	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
. 7	Independence Blue Cross 1901 Market Street Philadelphia PA 19103	\$ 27,500	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	Pepper Hamilton LLP 3000 Two Logan Square 18th and Arch Street Philadelphia PA 19103	\$ 30,000	Person X
(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 Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
• • • • • • • • • • • • • • • • • • • •		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE 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.

OMB No. 1545-0047 2008

Open to Public Inspection

Employer Identification number Name of the organization-23-0487205 COMMITTEE OF SEVENTY Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 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? 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 other Impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) 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. Held at the End of the Year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _ _ _ _ _ _ Number of states where property subject to conservation easement is located \(\bigs_{\text{--}} \) __ _ _ _ _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements 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 section 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 include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues Included in Form 990, Part VIII, line 1 (ii) Assets Included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

		E OF SEVENTY		23-0487	<u> 205 </u>	Page 2
	art III Organizations Maintainin	g Collections of Art,	Historical Treas	ures, or Other Sin	nilar Asse	ts (continued)
3	Using the organization's accession and othe items (check all that apply):	r records, check any of the	e following that are a s	ignificant use of its coll	ection	
a	Public exhibition	d ∏ Loan	or exchange programs	5		
Ŀ		e Other	· · -	•		
c		о <u>—</u> оппол				
4	Provide a description of the organization's co	ollections and explain how	they further the organ	ization's exempt purpos	e In	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to	or receive donations of art, o be maintained as part of	historical treasures, or the organization's coll	r other similar lection?	1	Yes No
P	Trust, Escrow and Custoo Part IV, line 9, or reported	lial Arrangements. (Complete if organ	ization answered '	'Yes" to F	
18	Is the organization an agent, trustee, custodi					
		•				☐ Yes ☐ No
h	Included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV	and complete the followin	a table:	• • • • • • • • • • • • • • • • • • • •	٠ ١	
~	in 100, explain the alterigoment in trait XIV	and complete the teneving	a ranio.			Amount
c	Beginning balance				1c	
	Additions during the year					
-	Distributions during the year	***************************************			1e	
f	Ending balance	*			1f	
	Did the organization include an amount on Fe	orm 990 Part X line 212	• • • • • • • • • • • • • • • • • • •			Yes No
	If "Yes," explain the arrangement in Part XIV.				· · · · · · · ·	165
	rt V Endowment Funds. Comp		nswered "Yes" to	Form 990. Part IV	/. line 10.	
<u> </u>		(a) Current year		(c) Two years back (d)		ck (e) Four years back
1a	Beginning of year balance					
b	Contributions	-				
c						
d	Grants or scholarships	. <u>-</u>				
е	Other expenditures for facilities	-				
	and programs					
f	Administrative expenses					
g						
2	Provide the estimated percentage of the year					
а	Board designated or quasi-endowment					
b	Permanent endowment ►%					•
C	Term endowment ▶ %					
	Are there endowment funds not in the posses	ssion of the organization th	at are held and admin	istered for the		
	organization by:					Yes No
	(i) unrelated organizations					3a(i)
		• • • • • • • • • • • • • • • • • • • •				
b	If "Yes" to 3a(ii), are the related organizations	listed as required on Sch	edule R?	*******************		3b
4	Describe in Part XIV the intended uses of the	organization's endowmen	t funds.			
Pa	rt VI Investments—Land, Build		t. See Form 990,	Part X, line 10.		
	Description of Investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Deprecia	ion	(d) Book value
1a	Land					
b	Buildings					
C	Leasehold improvements					
d	Equipment					
<u>e</u>	Other		76,	999 46	,847	30,152
Total	. Add lines 1a-1e. (Column (d) should equal F	orm 990, Part X, column (B), line 10(c).)		▶	30,152

Schedule D (Form 990) 2008 COMMITTEE OF SEVENTY		23-0487 <u>205</u>	Page 3
Part Vil Investments—Other Securities. See Form 990,	Part X line 12		
(a) Description of security or category	(b) Book value	(c) Method of valuation:	
(including name of security)	(b) book tales	Cost or end-of-year market val	lue
			
Financial derivatives and other financial products			
Closely-held equity interests			
Other			-
· · ·			
		<u> </u>	
		 	
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 990	Part X. line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation:	-
(a) Description of Investment type	(b) BOOK VAIUS	Cost or end-of-year market val	lue.
		Cost of end-of-year marker var	
	 -		
·			
		ł	
Fotal. (Column (b) should equal Form 990, Part X, col. (B) line 13.)	<u> </u>		
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description		(b) B	ook value
(4) 2000-1-1-1			
· · · · · · · · · · · · · · · · · · ·			
			
<u> </u>			
·			
· <u> </u>			
			
	<u>-</u>		
			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Part X Other Liabilities. See Form 990, Part X, line 25.			
(a) Description of liability	(b) Amount		
ederal income taxes			
DEFERRED RENT	32,663		
CAPITAL LEASE PAYABLE	11,202		
LINE OF CREDIT		-	
		1	
		1	
		-	
		-	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)	43,865		
n Part XIV, provide the text of the footnote to the organization's financial state	ments that reports the or	ganization's liability for	

uncertain tax positions under FIN 48.

Sch	edule D (Form 990) 2008 COMMITTEE OF SEVENTY		23-0487205	Page 4
	Reconciliation of Change in Net Assets from Form 990	to Financial	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1,379,480
2	Total expenses (Form 990, Part IX, column (A), line 25)			1,060,798
3	Excess or (deficit) for the year. Subtract line 2 from line 1			318,682
4	Net unrealized gains (losses) on Investments			-2,002
5	Donated services and use of facilities		5	
6	Donated services and use of facilities	,	· · · · · · · · · · · · · · · · · · ·	
7	Investment expenses			
8	Prior period adjustments Other (Decembe in Part VIV)		· · · · · · · · · · · · · · · · · · ·	
9	Other (Describe in Part XIV)		· · · · · · · · · · · · · · · · · · ·	-2,002
10	Total adjustments (net). Add lines 4-8 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		· · · · · · · · · · · · · · · · · · ·	316,680
	Reconciliation of Revenue per Audited Financial State			<u> </u>
<u> </u>				1,377,478
1	Total revenue, gains, and other support per audited financial statements		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Amounts Included on line 1 but not on Form 990, Part VIII, line 12:	2a	-2,002	
a	Net unrealized gains on investments			
a	Donated services and use of facilities	··· 		
C	Recoveries of prior year grants			
d	Other (Describe in Part XIV)	20		-2,002
_	Add lines 2a through 2d			1,379,480
3	Subtract line 2e from line 1		3	1,313,400
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)	<u>4</u> b		
C	Add lines 4a and 4b	. ,	4c	1 270 400
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)		5	<u>1,379,480</u>
Pa	rt XIII Reconciliation of Expenses per Audited Financial State			1 060 200
1	Total expenses and losses per audited financial statements		1	1,060,798
2	Amounts Included on line 1 but not on Form 990, Part IX, line 25:	f 1		
а	Donated services and use of facilities			
b	Prior year adjustments	2b		
C	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe In Part XIV)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	<u>1,060,798</u>
4	Amounts Included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b			
_ 5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	<u>1,060,798</u>
	nt XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a and 4;	Part IV, lines 1b	
and 2	b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines:	s 2d and 4b.		
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Schedule D (Fo	orm 99	0) 200	в (CON	1MI	TTI	Œ	OF	' S	EV	ΕN	TY	•							2	3-	048	372	205	j					Pag	e 5
Part XIV	Suń	plem	enta	ıl İn	forn	natio	on (conti	nuec	n (t																				<u>v</u>	_
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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**

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

COMMITTEE OF SEVENTY

Employer Identification number 23-0487205

	Questions Regarding Compensation			
		m	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 line 1a is 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	1b		
2	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	[
3	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			****
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, dld any person listed in Form 990, Part VII, Section A, line 1a:			
а	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		<u>x</u>
C	Participate In, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
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?	<u>5</u> a		<u>x</u>
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:			
а	The organization?	6a_		<u>X</u>
b	Any related organization?	6b	17:17:1	X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	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	X	
8	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	l a l		X

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

Schedule J (Form 990) 2008

Page 2

23-0487205

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed Schedule J (Form 990) 2008 COMMITTEE OF SEVENTY

Par II Officers, Directors. Trustage Kay Franky

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)(f)—(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

	muchinera (a)	notestion of M. 2 and/or 1009 MISC comparation	compensation	(C) Defemen	(II) Nontaxable	(E) Total of columns	(F) Compensation
(А) Лапе	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits		reported in prior Form 990 or Form 990-EZ
Zachary Stalberg* (see Sch J) (0)	218,846	10,500	19,387	0	0	248,733	0
	0		0	0	0	0	0
(ii)							
(D)							
(W)				••••••			
(E)							
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(E)							
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(E)						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(8)			•••••				
(E)				••••••			
(ii)							
(ii) (ii)							
(ii)							
(1)							
						Schedu	Schedule J (Form 990) 2008

Schedule J (Form 990) 2008 COMMITTEE OF SEVENTY	23-0487205 Page 3
anation, or descriptions required for	Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part
Part I, Line 7 - Non-Fixed Payments Provided	
Zack Stalberg's \$19,387 of other reportable	le compensation consists of
payments made to him in lieu of health insur	surance coverage.
DAA	Schedule J (Form 990) 2008

SCHEDULE L

(Form 990 or 990-EZ)

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, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

COMMITTEE OF SEV	ENTY					23-	048	372	0 <u>5</u>			
Part i Excess Benefit Transactions (sec To be completed by organizations that ans	ction 501(c))(3) and	d section 501 orm 990. Par	(c)(4) org	anizations or 25a or 25b. o	nly). r Form 990-E	Z, Par	t V, li	ne 40	b		
To be completed by organizations that ans	moleu lea	0111	Oliti 200, I al					,		(c) (orrect	ed?
1 (a) Name of disqualified person					(b) Descriptio	n of transaction				Yes	١	lo
·											_ _	
· · · · · · · · · · · · · · · · · · ·											+	
<u> </u>								_			- -	
 2 Enter the amount of tax imposed on the organization under section 4958 3 Enter the amount of tax, if any, on line 2, above, reim 							► \$ ► \$					
Part II Loans to and/or From Interested	Person	ş.								-		
To be completed by organizations that ans	wered "Yes	s" on <u>F</u>	orm 990, Pai	t IV, line 2	26, or Form 9	90-EZ, Part V	, line	38a.				
(a) Name of interested person and purpose	(b) Loar or from t	the	(c) Origin principal am		(d) Bala	ance due	(e) In (default?	by bo	proved ard or oftlee?	(g) W	
	To Fr						Yes	No	Yes	No	Yes	No
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		Ш.		>	<u> </u>			<u> </u>				
Total Part III Grants or Assistance Benefitting To be completed by organizations that ans	j interes	ted P	Persons.	· · · · · ·	-		**********		1000 a 1000	<u> </u>		
(a) Name of Interested person	· ·	<u> </u>			en interested p	erson and the	(c) Amo	unt of	grant o	r type	of
(a) Issue of illusies and person			(b) (class)		anization		,		assis			
· · · · · · · · · · · · · · · · · · ·	_		 									
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Part IV Business Transactions Involving To be completed by organizations that ans	g Interes wered "Yes	sted F s" o <u>n</u> F	Persons. Form 990, Pa	rt IV, line :	28a, 28b, or 2	28c.						
(a) Name of interested person	(b) Re	- lationsh	nlp between	(c) A	mount of	(d) Descr	iption (of trans	sactlor	1		hading org. nues?_
		organiz	son and the	l war	isacu0ii							No
Meredith McCormick	Wife	of	Bd. Mem		7,158	Service	Pr	ovi	der			x
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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.

OMB No. 1545-0047

2008
Open to Public inspection

Name of the organization

COMMITTEE OF SEVENTY

Employer identification number 23-0487205

Amended Return Explanation
We are amending Schedule A, Part II, Line 5 of this return to properly
reflect contributions from the William Penn Foundation, a private
foundation, for the 2004 through 2008 years.
· · · · · · · · · · · · · · · · · · ·
Form 990 - Organization's Mission or Most Significant Activities
by educating citizens, safeguarding elections and demanding the ethical
conduct of its government officials.
Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990
All Board Members receive a draft of the 990 for review prior to the July
15th Board meeting. A discussion on the 990 is led by the Treasurer
answering all questions about the return. The final return is reviewed by
the Audit Committee, Treasurer and CEO.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
In April 2006, the organization adpoted a Code of Ethics that the Board
Members are required to adhere to. For 2008, the Code of Ethics and
Disclosure of Interest and Annual Compliance Statement were distributed in
December 2007. All Board Members are required to complete these forms no
later than January 31st of each year. Members are called until the forms
are completed and returned. All Members are required to disclose
additional conflicts as they occur. The Subcommittee on Ethics reviews
such statements and informs the Executive Committee of any potential

where performance and achievement of goals is reviewed and discussed. In determining compensation the Committee considers leadership skills; knowledge of regional government, business and communities; ability to think strategically; and successfully implement program initiatives. It was determined that the President/CEO had successfully achieved his goals and exceeded expectations.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Form 4562

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Attachment Sequence No.

Identifying number

23-0487205 COMMITTEE OF SEVENTY Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed In service (see instructions) 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1, if zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 10 11 11 Business Income limitation. Enter the smaller of business income (not less than zero) or line 5 (see Instructions) 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see Instructions) 14 Property subject to section 168(f)(1) election 15 12,709 Other depreciation (Including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2008 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed In Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (e) Convention (business/investment use only-see instructions) (f) Method (g) Depreciation deduction (a) Classification of property year placed in service period 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM property MM S/L 27.5 yrs. Nonresidential real MM S/L 39 yrs. property MM S/L Section C-Assets Placed In Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L 40-year S/L Summary (See instructions.) Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 12,709 Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

__Totals

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COMMITTEE OF	SEVENTY				23-0487	205
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FORM 990, Par	t X, Line 7 -	Additiona.	L incormation	on	<u> </u>	
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