# \*\* PUBLIC DISCLOSURE COPY \*\*

Department of the Treasury

# 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)

ve to use a copy of this return to satisfy state reporting requirements.

Open to Public

Inter	nai Heveni	le Service The organization may have to use a copy of this in	GIGITI TO SULIS	y state reporting requirem	01110-	mapeonon				
A	or the 2	004 calendar year, or tax year beginning	and e	nding						
В	Check if	C Name of organization		D	Employer	identification number				
ē	Check if pplicable:	Please use IRS								
	Address	label or CENTER FOR PUBLIC INTEGRITY			54-1	512177				
	Name change	type. Number and street (or P.O. hox if mail is not delivered to street as	ddress)	Room/suite E	relephone	number				
F	Initial return	Specific 910 17TH STREET, N.W.		7TH FL		)466-1300				
F	Final	Instruc- tions. City or town, state or country, and ZIP + 4		F		thod: Cash X Accrual				
F	Amende				Other (specify					
$\overline{}$	Applica	tion Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitat	ble trusts	H and I are not applica		ction 527 organizations.				
	po.,c	must attach a completed Schedule A (Form 990 or 990-EZ).		H(a) Is this a group retu						
G	Nebsite:	▶WWW.PUBLICINTEGRITY.ORG		H(b) If "Yes," enter numb						
		tion type (check only one) ► X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1)	or 527			N/A Yes No				
		re 🕨 🔲 if the organization's gross receipts are normally not more than \$25	5,000. The	(If "No," attach a list <b>H(d)</b> Is this a separate re		ov an or-				
		ion need not file a return with the IRS; but if the organization received a Form 9		ganization covered						
		il, it should file a return without financial data. Some states require a complete		I Group Exemption N	lumber ⊳					
				M Check  if the	ne organiza	ition is <b>not</b> required to attach				
L		ceipts: Add lines 6b, 8b, 9b, and 10b to line 12 <b>6,494</b>	,199.	Sch. B (Form 990,	990-EZ, or	990-PF).				
P	art I	Revenue, Expenses, and Changes in Net Assets or F	Fund Bala	inces		Accessed to the second				
	1	Contributions, gifts, grants, and similar amounts received:	,	,						
	a	Direct public support	1a	6,413,60	3.					
	b	Indirect public support	1b							
	C	Government contributions (grants)	1c							
	d	<b>Total</b> (add lines 1a through 1c) (cash \$ 6,413,603. nonc	cash \$	)		6,413,603.				
	2	Program service revenue including government fees and contracts (from Part	VII, line 93)	***************************************	2	44,646.				
	3	Membership dues and assessments			. 3					
	4	Interest on savings and temporary cash investments	4	9,917.						
	.5	Dividends and interest from securities	. 5	serve :						
	6 a	Gross rents								
	b	Less: rental expenses								
	C	Net rental income or (loss) (subtract line 6b from line 6a)			. 6c					
<u>o</u>	7	Other investment income (describe		I	) 7					
Revenue	8 a	Gross amount from sales of assets other (A) Securities		(B) Other						
ě		than inventory	8a							
	b	Less: cost or other basis and sales expenses	8b		_					
	C	Gain or (loss) (attach schedule)	8c	<u> </u>						
	d				. 8d					
	9	Special events and activities (attach schedule). If any amount is from gaming,								
	a	Gross revenue (not including \$ of contribution		I						
	١.	reported on line 1a)			-					
	b	Less: direct expenses other than fundraising expenses		<u></u>						
	10.0	Net income or (loss) from special events (subtract line 9b from line 9a)	l l	]	9c	· · · · · · · · · · · · · · · · · · ·				
	10 a	Gross sales of inventory, less returns and allowances	I		<b>-</b>					
	b	Less: cost of goods sold  Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 1)		10a)	10c					
	11	Other revenue (from Part VII, line 103)			1 1	26,033.				
	11 12	<b>Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				6,494,199.				
	13	Program services (from line 44, column (B))				3,436,047.				
es	14	Management and general (from line 44, column (C))				781,966.				
Expenses	15	Fundraising (from line 44, column (D))				327,890.				
ă.	16	Payments to affiliates (attach schedule)				April				
ш	17	Total expenses (add lines 16 and 44, column (A))				4,545,903.				
	18	Excess or (deficit) for the year (subtract line 17 from line 12)				1,948,296.				
ets	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	2,427,103.				
Net Assets	20	Other changes in net assets or fund balances (attach explanation)	SEE	STATEMENT 1	20	33,892.				
_ ~	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)				4,409,291.				
4230	01	HA For Privacy Act and Paperwork Reduction Act Notice, see the separa				Form <b>990</b> (2004)				

Part II Statement of All organd (4	anization	ons must complete columi pizations and section 4947	n (A). Columns (B), (C), and (a)(1) nonexempt charitable	trusts but optional for other	n 501(c)(3) Page <b>2</b> ers.
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	Jorgan	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
(cash \$noncash \$	22				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				40.056
25 Compensation of officers, directors, etc.	25	180,000.	142,711.	24,033.	13,256.
26 Other salaries and wages	26	2,403,533.	1,905,614.	320,915.	177,004.
27 Pension plan contributions	27	54,963.	42,351.	8,218.	4,394.
28 Other employee benefits	28	190,525.	137,538.	38,883.	14,104. 14,031.
29 Payroll taxes	29	191,101.	152,073.	24,997.	14,031.
30 Professional fundraising fees	30	20,678.		20,678.	
31 Accounting fees	31	70,901.	47,327.	23,574.	
32 Legal fees	32	27,017.	14,484.	10,887.	1,646.
33 Supplies	34	23,433.	15,941.	6,283.	1,209.
34 Telephone	35	24,534.	8,661.	5,781.	10,092.
35 Postage and shipping	36	254,464.	201,312.	35,091.	18,061.
36 Occupancy	37	56,871.	41,996.	13,335.	1,540.
38 Printing and publications	38	68,412.	46,006.	4,609.	17,797.
39 Travel	39	67,349.	29,587.	29,123.	8,639.
40 Conferences, conventions, and meetings	40	47,635.	22,390.	21,250.	3,995.
41 Interest	41	192.		192.	
42 Depreciation, depletion, etc. (attach schedule)	42	40,575.	31,879.	5,789.	2,907.
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c	43c				
d	43d				
e SEE STATEMENT 2	43e	823,720.	596,177.	188,328.	<u>39,215.</u>
Total functional expenses (add lines 22 through 43).  44 Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	4,545,903.	3,436,047	781,966.	327,890.
Joint Costs. Check ▶ ☐ if you are following SOP 98	3-2.				
Are any joint costs from a combined educational campai	gn and	fundraising solicitation rep	oorted in (B) Program service	es? 🕨 上	Yes X No
If "Yes," enter (i) the aggregate amount of these joint cos	ts \$	;(	(ii) the amount allocated to I	Program services \$	• •
(iii) the amount allocated to Management and general \$			(iv) the amount allocated to	Fundraising \$	
Part III Statement of Program Service					
What is the organization's primary exempt purpose?	_SE	E STATEMENT	3		Program Service
All organizations must describe their exempt purpose achievement		er and consists manner State	the number of clients served but	lications issued etc Discuss	Expenses
achievements that are not measurable. (Section 501(c)(3) and (4) or	s in a cie ganizatio	ins and 4947(a)(1) nonexempt of	charitable trusts must also enter the	ne amount of grants and	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1)
allocations to others.)					trusts; but optional for others.)
a SEE STATEMENT 4					
		· www.			
			Provide and allocations &	\	486,334.
b opp omamasmam c			Grants and allocations \$		400,334.
b SEE STATEMENT 5	-				
particular to the second secon				······································	
	<del></del>		Grants and allocations \$	7	436,371.
c SEE STATEMENT 6			statits and allocations of		130,0,11,
C SEE STATEMENT 0		Control of the Contro	· · · · · · · · · · · · · · · · · · ·		
to the plant open and the control of					
		11	Grants and allocations \$	)	437,827.
d SEE STATEMENT 7			arana ana anocationo w		
~ ORB OTHIRMINI /				,	
		,,			
		((	Grants and allocations \$	}	428,013.
e Other program services (attach schedule)					
= = = = = = = = = = = = = = = = = = =	TAT	EMENT 8 (C	Grants and allocations \$	) [	1,647,502.
f Total of Program Service Expenses (should equal l				) <u> </u>	1,647,502. 3,436,047.

### Part IV Balance Sheets (B) End of year Note: Where required, attached schedules and amounts within the description column (A) Beginning of year should be for end-of-year amounts only. 45 Cash - non-interest-bearing 45 1,258,764. 2,158,639. Savings and temporary cash investments 46 46 109,074. 47 a Accounts receivable 47a 75,309 47c 109,074. 47b Less: allowance for doubtful accounts 48 a Pledges receivable 48a b Less: allowance for doubtful accounts 48b 2,063,000. 875,000. 49 49 Grants receivable Receivables from officers, directors, trustees, 50 50 and key employees 51 a Other notes and loans receivable 51a 51b 51c b Less: allowance for doubtful accounts 52 Inventories for sale or use 52 27,169 29,584. Prepaid expenses and deferred charges 53 53 257,935 115,482. 54 Cost X FMV Investments - securities STMT 9 54 55 a Investments - land, buildings, and 55a equipment: basis 55b 55c **b** Less: accumulated depreciation 56 56 Investments - other 536,458 57a 57 a Land, buildings, and equipment: basis 120,643. 415,815 96,753 57c b Less: accumulated depreciation STMT 10 57b 49,517 49,517. 58 Other assets (describe DEPOSITS 58 4,645,939. 2.640.447 Total assets (add lines 45 through 58) (must equal line 74). 59 213,344 236,648. 60 Accounts payable and accrued expenses 60 61 61 Grants payable 62 62 Deferred revenue \_iabilities 63 Loans from officers, directors, trustees, and key employees 63 64a 64 a Tax-exempt bond liabilities **b** Mortgages and other notes payable 64b 65 Other liabilities (describe 65 236,648. 213,344. 66 Total liabilities (add lines 60 through 65) Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. **Net Assets or Fund Balances** <127,936.>67 307,681. Unrestricted 67 2,555,039. 4,101,610. 68 Temporarily restricted 68 Permanently restricted 69 Organizations that do not follow SFAS 117, check here and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 70 71 Paid-in or capital surplus, or land, building, and equipment fund 71 72 Retained earnings, endowment, accumulated income, or other funds 72 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; 73 409.291 2,427,103. 73 column (A) must equal line 19; column (B) must equal line 21) 4,645,939. 2,640,447. Total liabilities and net assets / fund balances (add lines 66 and 73) 74

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

Form 990 (2004) CENTER FOR PUBLIC IN	TEGRITY		<u>54-15121</u>	
Part IV-A Reconciliation of Revenue per Audited	Part IV-B Recond	ciliation of Exp	enses per A	udited
Financial Statements with Revenue per	Return	ial Statements	with Expen	ses per
Return  a Total revenue, gains, and other support	a Total avecage and b	accae per		
per audited financial statements <b>a</b> 6,528,091	<ul> <li>audited financial state</li> </ul>	ements	a 4,	<u>545,903.</u>
	<b>b</b> Amounts included or	n line a but not on		
b Amounts included on line a but not on line 12, Form 990:	line 17, Form 990: (1) Donated services			
(1) Net unrealized gains	and use of facilities	\$		
on investments \$ 33,892.	(2) Prior year adjustmen			
(2) Donated services	reported on line 20,	···-		
and use of facilities \$	Form 990	\$		
(3) Recoveries of prior	(3) Losses reported on	, . Ψ		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	line 20, Form 990	e		
year grants \$	(4) Other (specify):	Ψ		
(4) Other (specify):	(4) Other (specify).	<b>d</b>		
\$ 22.002	A 11	\$		n
Add amounts on lines (1) through (4) b 33,892		s (1) through (4)		545,903.
c Line a minus line b			F G 4± 1	343,303.
d Amounts included on line 12, Form 990 but not on line a:	d Amounts included or 990 but not on line a			
(1) Investment expenses	(1) Investment expenses	3		
not included on	not included on			
line 6b, Form 990 <b>\$</b>	line 6b, Form 990	\$		
(2) Other (specify):	(2) Other (specify):			
\$	(2) 3 (3) 3	\$		
Add amounts on lines (1) and (2)	Add amounts on line	s (1) and (2)	<b>▶</b> d	0.
e Total revenue per line 12, Form 990	e Total expenses per li			
(line c plus line d) • e 6,494,199	1 7		▶ e 4,	545,903.
Part V List of Officers, Directors, Trustees, and Key	Employees (List each on	ne even if not compens		
	(B) Title and average hours per week devoted to	(C) Compensation	(D) Contributions to	(E) Expense account and
(A) Name and address	per week devoted to position	(If not paid, enter	plans & deferred compensation	other allowances
CHARLES LEWIS	EXEC. DIR./BC			
ALL MAY BE REACHED IN C/O ORG				
VIII THIT DI VIII CHID IN - 5/0 -010	40+	180,000.	7,200.	0.
ALLEN PUSEY				
VIDEN LODET	I KIDI I OKLIK			]
	2	0.	0.	0.
MARIANNE SZEGEDY-MASZAK	SECRETARY	† · · · · · · · · · · · · · · · · · · ·	<u></u>	
WAKTANNE PREGEDI-MAPRAY	DECKETAKI	1		
	2	0.1	0.	0.
DAIII A MADICONI	BOARD MEMBER		<u> </u>	- 0 *
PAULA MADISON	DOARD MEMBER			
	1	0.	0.	0.
	T TO A D.D. AND AND TO THE TAIL OF THE TAI	0.	<u> </u>	<u> </u>
JOHN E. NEWMAN, JR.	BOARD MEMBER			
			^	
	<u> </u>	0.	0.	0.
SUSAN LOEWENBERG	BOARD MEMBER		*	
	_1	0.	0.	0.
ISABEL WILKERSON (RESIGNED 6/21/04)	BOARD MEMBER			ļ
			_	
	1	0.	0.	0.
CHARLES PILLER	BOARD CHAIR			-
				PHOTOGRAPH
	2	0.	0.	0.
BEN SHERWOOD	BOARD MEMBER			
	1	0.	0.	0.
75 Did any officer, director, trustee, or key employee receive aggregate compensations.	ation of more than \$100,000 fro	om your organization a	and all related	
organizations, of which more than \$10,000 was provided by the related organ	izations? If "Yes," attach schedu	ule. ⊳ 🔲 Yes 🛚	X No	

	T	Yes No
Part VI Other Information	70	<del>                                     </del>
Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
Were any changes made in the organizing or governing documents but not reported to the IRS?	77	
If "Yes," attach a conformed copy of the changes.	78a	x
a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		Α.
b If "Yes," has it filed a tax return on Form 990-T for this year?		x
Was there a liquidation, dissolution, termination, or substantial contraction during the year?	19	A
If "Yes," attach a statement		
a Is the organization related (other than by association with a statewide or nationwide organization) through common membership,	900	x
governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	A
b If "Yes," enter the name of the organization	-	
and check whether it is exempt or nonexem	0.	
a Embi direct of member pointed experience of the desirence		x
b Did the organization file Form 1120-POL for this year?  2 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than		
	82a	x
fair rental value?	02a	1 2
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)  N/A		
	83a	х
Did the organization comply with the public inspection requirements for returns and exemption applications?		X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?  N/A	84a	*   -
Did the organization solicit any contributions or gifts that were not tax deductible?  N/A	04a	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	84b	
tax deductible? N/A	85a	
5 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?  N/A  N/A  N/A	85b	
a big tile of days and a single of the singl	000	
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax		
owed for the prior year.  c. Dues, assessments, and similar amounts from members   85c   N/A		
05.1	-	
- 1.99. 99. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85g	
3		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of due allocable to nondeductible lobbying and political expenditures for the following tax year?  N/A	85h	
	0311	
77/7		
	-	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  87b		
against amount of the control of the		
At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,		
or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	88	X
If "Yes," complete Part IX  1 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:	- 00	
6111	-	
transaction during the year or did it become aware of an excess benefit transaction from a prior year?	89b	X
If "Yes," attach a statement explaining each transaction	. [000]	1 23
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under		0
sections 4912, 4955, and 4958		0
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		U
a List the states with which a copy of this return is filed ► ALL STATES WHERE REQUIRED  b Number of employees employeed in the pay period that includes March 12, 2004  90b	ina	4!
	2 አርፑ	
The books are in care of ▶ THE CENTER Telephone no. ▶ SEE	:AGE	1
Located at ▶ SEE PAGE 1 ZIP + 4 ▶	SEE	PAGE :
LUCAICU AL POLITICI DE LA COLO	<u> </u>	
Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year  92	N/.	<b>▶</b> □ A

Note: Enter gross amounts unless otherw	Line I Ulliciated				
indicated.	(A) Business	business income (B) Amount	(C) Exclusion	(D) Amount	(E) Related or exempt
93 Program service revenue:	code	, and an	code		function income
a CONSULTING FEES					30,783.
b PUBLICATIONS					13,863.
C					
d		<del></del>			
e					
f Medicare/Medicaid payments	1				
g Fees and contracts from government age					
4 Membership dues and assessments	4			0.017	
5 Interest on savings and temporary cash i			14	9,917.	
6 Dividends and interest from securities	1 1			<del></del>	, i
7 Net rental income or (loss) from real esta					
a debt-financed property					
<b>b</b> not debt-financed property					<u> </u>
8 Net rental income or (loss) from persona					
9 Other investment income					
O Gain or (loss) from sales of assets					
other than inventory					
1 Net income or (loss) from special events					
2 Gross profit or (loss) from sales of invent	itory				· water and a constant and a
Other revenue:					26,033.
					40,033.
b					
C					- Laborator and the second sec
d		ia. www			
e		· · · · · · · · · · · · · · · · · · ·		9,917.	70,679.
4 Subtotal (add columns (B), (D), and (E))		· · · · · · · · · · · · · · · · · · ·	J		
or the tradeline 404 pairman (D) (D) on	A (E ) )			No.	80 596.
					80,596.
ate: Line 105 plus line 1d. Part I. should	l equal the amount on line 12. I	Part I.		_	
ote: Line 105 plus line 1d, Part I, should Part VIII Relationship of Activ	l equal the amount on line 12, l vities to the Accomplis	<sub>Part I.</sub> h <mark>ment of Exe</mark> r	npt Purpo:	ses (See page 34 of the i	nstructions.)
ote: Line 105 plus line 1d, Part I, should Part VIII Relationship of Activine No. Explain how each activity for which	d equal the amount on line 12, leading the decomplishing in the decomplishing in the decomplishing the decomplishing in the decomplishing the decomplishing in the decomplishing the decomplishing the decomplishing in the decomplishing the decomplishing in the decomplishing the decomplishing the decomplishing in the decomplishing the de	Part I. <b>hment of Exer</b> E) of Part VII contribu	npt Purpo:	ses (See page 34 of the i	nstructions.)
Part VIII Relationship of Activine No. Explain how each activity for white exempt purposes (other than by	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes	Part I. <b>hment of Exer</b> E) of Part VII contribu	npt Purpo:	ses (See page 34 of the i	nstructions.)
Part VIII Relationship of Activine No. Explain how each activity for which	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes	Part I. <b>hment of Exer</b> E) of Part VII contribu	npt Purpo:	ses (See page 34 of the i	nstructions.)
Part VIII Relationship of Activine No. Explain how each activity for white exempt purposes (other than by	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes	Part I. <b>hment of Exer</b> E) of Part VII contribu	npt Purpo:	ses (See page 34 of the i	nstructions.)
Part VIII Relationship of Activine No. Explain how each activity for whice exempt purposes (other than by SEE STATEMENT	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes 11	Part I. hment of Exer E) of Part VII contribu S).	npt Purpos	ses (See page 34 of the i	nstructions.) f the organization's
Dart VIII Relationship of Activation No.  Explain how each activity for whice exempt purposes (other than by SEE STATEMENT)	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes 11	Part I. hment of Exer E) of Part VII contribu S).	npt Purpos	ses (See page 34 of the i	nstructions.) f the organization's
Dart VIII Relationship of Activation No.  Explain how each activity for white exempt purposes (other than by SEE STATEMENT  Part IX Information Regarding	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes 11  ng Taxable Subsidiaries	Part I. hment of Exer  E) of Part VII contributes).  s and Disrega  (C)	npt Purpos	ses (See page 34 of the i to the accomplishment of	nstructions.)  f the organization's  structions.)
Dart VIII Relationship of Active Line No. Explain how each activity for white exempt purposes (other than by SEE STATEMENT  Part IX Information Regarding (A) Name, address, and EIN of corporation,	requal the amount on line 12, I vities to the Accomplish ich income is reported in column (Exproviding funds for such purposes 11  Ing Taxable Subsidiaries (B)  Percentage of	Part I. hment of Exer E) of Part VII contribu S).	npt Purpos	ses (See page 34 of the i y to the accomplishment of	nstructions.)  If the organization's
Dart VIII Relationship of Active  Explain how each activity for whice exempt purposes (other than by SEE STATEMENT  Part IX Information Regarding (A)  Name, address, and EIN of corporation,	d equal the amount on line 12, I vities to the Accomplish ich income is reported in column (E providing funds for such purposes 11  ng Taxable Subsidiaries	Part I. hment of Exer  E) of Part VII contributes).  s and Disrega  (C)	npt Purpos	ses (See page 34 of the i to the accomplishment of	nstructions.)  f the organization's   istructions.)  (E) End-of-year
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Dart VIII Relationship of Active Line No. Explain how each activity for white exempt purposes (other than by SEE STATEMENT  Part IX Information Regarding (A) Name, address, and EIN of corporation,	requal the amount on line 12, I vities to the Accomplish to income is reported in column (Exproviding funds for such purposes 11  In the substitution of the substitut	Part I. hment of Exer  E) of Part VII contributes).  s and Disrega  (C)	npt Purpos	ses (See page 34 of the i to the accomplishment of	nstructions.)  f the organization's   istructions.)  (E) End-of-year
Part IX Information Regardion, partnership, or disregarded entity	requal the amount on line 12, I vities to the Accomplish to hincome is reported in column (Exproviding funds for such purposes 11  Ing Taxable Subsidiaries (B)  Percentage of ownership interest %	Part I. hment of Exer  E) of Part VII contributes).  s and Disrega  (C)	npt Purpos	ses (See page 34 of the i to the accomplishment of	nstructions.)  f the organization's   istructions.)  (E) End-of-year
Date: Line 105 plus line 1d, Part I, should Part VIII Relationship of Activ Line No. Explain how each activity for whice exempt purposes (other than by good start of the star	requal the amount on line 12, I vities to the Accomplish to hincome is reported in column (Exproviding funds for such purposes 11  In the substitution of the substitu	Part I. hment of Exer E) of Part VII contributes).  s and Disrega (C) lature of activities	npt Purpos	ses (See page 34 of the into the accomplishment of the into the accomplishment of the ac	nstructions.)  If the organization's  Istructions.)  (E)  End-of-year assets
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Part VIII Relationship of Active Line No. Explain how each activity for white exempt purposes (other than by exempt purposes	requal the amount on line 12, I vities to the Accomplish vities to the Accomplish to hincome is reported in column (Exproviding funds for such purposes 11  In this reported in column (Expression of the Accomplish for such purposes 11  In this report of the Accomplish for such purposes 11  In this report of the Accomplish for such purposes 11  In this report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 12  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accomplish for such purposes 11  In the report of the Accom	Part I. hment of Exer  E) of Part VII contributes.  S and Disrega  (C) lature of activities  d with Person tly, to pay premiums on a personal benefit	al Benefit on a personal bet contract?	ses (See page 34 of the into the accomplishment of the accomplishment of the into the accomplishment of the into the int	nstructions.)  If the organization's  Instructions.)  (E)  End-of-year assets  34 of the instructions.)  Yes X No  Yes X No
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Relationship of Activine No.  Explain how each activity for whice exempt purposes (other than by SEE STATEMENT  Part IX Information Regarding (A)  Name, address, and EIN of corporation, partnership, or disregarded entity  N/A  Part X Information Regarding (B)  N/A  Part X Information Regard	requal the amount on line 12, I vities to the Accomplish vities to the Accomplish to hincome is reported in column (Exproviding funds for such purposes 11  Ing Taxable Subsidiaries (B) Percentage of ownership interest (B) White the color of the color o	Part I. hment of Exer  E) of Part VII contributes.  S and Disrega  (C) lature of activities  In the part VII contributes.  In	al Benefit on a personal to tocontract?  Type or print rolate	Ses (See page 34 of the into the accomplishment of the accomplete the accomp	nstructions.)  If the organization's  Istructions.)  (E)  End-of-year assets  34 of the instructions.)  Yes X No  Yes X No  e and belief, is is true  ADMINISTIMA  Preparer's SSN or PTIN

### SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

2004

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

54 1512177 CENTER FOR PUBLIC INTEGRITY Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours per week devoted to position (e) Expense account and other (a) Name and address of each employee paid (c) Compensation employee benefit plans & deferred more than \$50,000 allowances compensation DIR DEVELOP BARBARA W. SCHECTER 0. 115,000 4,423 40 +C/O ORGANIZATION EDITOR TEO FURTADO 0. 100,000 3.246 40 +MNGING EDITOR WILLIAM ALLISON\_ 115,000 0 0 . 40 +DIR FIN & ADM CATHY SWEENEY 0. 40 +115,000 4.238 SENIOR FELLOW LARRY MAKINSON 95,000. 3,508 0. 40 +Total number of other employees paid over \$50,000 Part II | Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service G. SCOTT SINGLETON DATA BASE CONSULTANT 60,940. ALEXANDRIA, VA 22314 421 N FAYETTE STREET Total number of others receiving over \$50,000 for professional services

1

Pa	rt IV-A Support Schedule (Control Note: You may use the	omplete only if you che worksheet in the insti	ecked a box on line 10 auctions for convertina	, 11, or 12.) Use cash from the accrual to th	method of account e cash method of ac	ting. counting.
Cale	ndar year (or fiscal year nning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	4,211,766.	2,965,021.	4,431,770.	3,170,676	. 14,779,233.
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	85,713.	10,254.	18,453.	159,161	. 273,581.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the		÷			
	organization after June 30, 1975	17,000.	19,763.	30,706.	53,045	. 120,514.
19	Net income from unrelated business activities not included in line 18  Tax revenues levied for the organization's benefit and either					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	132.	120.	SEE STATEME 18,344.	NT 12 16,628	. 35,224.
23	Total of lines 15 through 22	4,314,611.		4,499,273.		
24	Line 23 minus line 17	4,228,898.	2,984,904.	4,480,820.	3,240,349	<u>. 14,934,971.</u>
25	Enter 1% of line 23	43,146.	29,952.	44,993.	33,995	
26	Organizations described on lines 16					298,699.
b	Prepare a list for your records to sho					
	unit or publicly supported organization			ded the amount shown in		7,878,958.
	Do not file this list with your return.  Total support for section 509(a)(1) to				≥ 26c	
ď	Add: Amounts from column (e) for li		20,514. 19			
u	Add: Amounto from colorini (c) for in		35,224. 26b	7,878,95	8 <b>.</b> ≥ 26d	8,034,696.
е	Public support (line 26c minus line 2				<b>№</b> 26e	
f	Public support percentage (line 26	(numerator) divided by	tine 26c (denominator))		▶ 26f	
27	Organizations described on line 12: records to show the name of, and to such amounts for each year: (2003)	tal amounts received in ea	ach year from, each "disq	ualified person." <b>Do not fi</b>	le this list with your re	turn. Enter the sum of
b	For any amount included in line 17 th	nat was received from each	h person (other than "dis	qualified persons"), prepa	re a list for your record	Is to show the name of,
ū	and amount received for each year, t described in lines 5 through 11, as w the larger amount described in (1) or (2003)	hat was more than the <b>la</b> vell as individuals.) <b>Do no</b> t r <b>(2)</b> , enter the sum of the (2002)	rger of (1) the amount o t file this list with your re se differences (the exces (2	n line 25 for the year or (; eturn. After computing the is amounts) for each year 001)	2) \$5,000. (Include in the difference between the N/A (2000)	he list organizations
C	Add: Amounts from column (e) for li	nes: 15		16	. I.	NT / N
	17 Add: Line 27a total	20	d line 97h 1-1-1	21	27c	
d	Add: Line 27a total Public support (line 27c total minus	line 27d total)	a line 2/d total		<u>27d</u> ≥ 27d	
e f	Total support for section 509(a)(2) to	est Enter amount on line	23. column (e)	<b>≥</b> 27f	N/A	
,	Public support percentage (lin				_ ,	N/A %
h	Investment income percentage	e (line 18, column (e)	numerator) divided b	y line 27f (denominat	or)) 🔛 🔊 27h	
28	<b>Unusual Grants:</b> For an organization oshow, for each year, the name of the rour return. Do not include these gran	n described in line 10, 11, contributor, the date and ts in line 15.	or 12 that received any u amount of the grant, and	inusual grants during 200 d a brief description of the	0 through 2003, prepa nature of the grant. <b>Do</b>	re a list for your records o not file this list with

423121 12-03-04

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)		<del></del>	Γ
Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing	<u> </u>	Yes	N
instrument, or in a resolution of its governing body?	29		
Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,			
and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
to all parts of the general community it serves?	31		L
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
	<del></del>		
Does the organization maintain the following:			
a Records indicating the racial composition of the student body, faculty, and administrative staff?			-
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	32c		ĺ
admissions, programs, and scholarships?			-
d Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	JEU		Г
Does the organization discriminate by race in any way with respect to:	33a		
a Students' rights or privileges?	· · · · · · · · · · · · · · · · · · ·		
b Admissions policies?			
c Employment of faculty or administrative staff?			
d Scholarships or other financial assistance?			Π
e Educational policies?  f Use of facilities?	201		Г
h Other extracurricular activities?	001		Г
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
a Does the organization receive any financial aid or assistance from a governmental agency?			r
b Has the organization's right to such aid ever been revoked or suspended?	34b	-	-
If you answered "Yes" to either 34a or b, please explain using an attached statement.			l
Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			ĺ
1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	990-F7	

Schedule A (Form 990 or 990-EZ) 2004

P			<b>lecting Public Char</b> anization that filed Form 5768		ige 9 of	the instructions.)		N/A
Che		ation belongs to an affiliate			you che	ecked "a" and "limited o	control"	provisions apply.
		mits on Lobbying				(a) Affiliated group		(b) To be completed for ALL
	(The ter	n "expenditures" means a	mounts paid or incurred.)			totals		electing organizations
						N/A		
36	Total lobbying expenditures to				36			
37	Total lobbying expenditures to				37			
38	Total lobbying expenditures (				38			
39	Other exempt purpose expend				39			
40	Total exempt purpose expend				40			
41	Lobbying nontaxable amount							
	If the amount on line 40 is -	· •	/ing nontaxable amount is -	_			.	
	Not over \$500,000							
	Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,50				41			
	Over \$1,500,000 but not over \$17,500,000 but n				''			
	Over \$17,000,000							
42	Grassroots nontaxable amou				42			
43	Subtract line 42 from line 36.				43			
44	Subtract line 41 from line 38.				44			
	Caution: If there is an amo	unt on either line 43 or	line 44, you must file Form	n 4720.				
			Lobbying Exp	enditures Durin	ng 4-Ye	ar Averaging Period	<del></del>	N/A
	endar year (or al year beginning in)	<b>(a)</b> 2004	(b) 2003	(c) 2002		(d) 2001		(e) Total
45	Lobbying nontaxable							
-	amount							0.
46	Lobbying ceiling amount							0.
47	(150% of line 45(e))							<u> </u>
47	Total lobbying expenditures							0.
48	Grassroots nontaxable			· and approximate ·				
.,5	amount							0.
49	Grassroots ceiling amount							
	(150% of line 48(e))						<del>7-1</del>	0.
50	Grassroots lobbying							
	expenditures		ation Dublic Chariti				· . · · · · · · · · · · · · · · · · · ·	] 0.
٥	<del></del>		cting Public Chariti		he instri	actions.)		
Du	ring the year, did the organization		and the second s					71 - 11 - 11 - 11 - 11 - 11 - 11 - 11 -
	uence public opinion on a legis			i, moleculing ally	attomp	Yes	No	Amount
	Malantana						Х	
b	Paid staff or management (Inc						Х	
C	Media advertisements		,				X	
d	Mailings to members, legislat	ors, or the public					X	
е	Publications, or published or						X	
f							X	
g	Direct contact with legislators	· -					X	
h :	Rallies, demonstrations, semi					1 ·	Α	0.
1	Total lobbying expenditures (A		ng a detailed description of th			L	I	

Par				d Relationships With Nonchar	itable		
				or organization described in section		<del></del>	
51							
•				ontical organizations:		Yes	No
a	· · · ·				51a(i)		Х
							X
h	501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  a Transfers from the reporting organization to a rioncharitable exempt organization of:  (i) Cash (ii) Other assets  b Other transactions:  (i) Sales or exchanges of assets with a noncharitable exempt organization (iii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets (iv) Reimbursement arrangements (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations (iii) Rental of facilities, equipment, mailing lists, other assets, or paid employees (iv) Performance of services or membership or fundraising solicitations (iv) Enably the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in an transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: (a)  (b)  Amount involved  Name of noncharitable exempt organization  Description of transfers, transing in no.  Amount involved  Name of noncharitable exempt organization  Description of transfers, transing transfers, transing its received the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (d) (in the properting organization involved in section 50 (c) (in the properting organization involved in section 50 (c) (in the properting organization involved in section 50 (c) (in the properting organization involved in section 50 (c						
Ü		te with a noncharitable ever	mnt organization		b(i)		X
							Х
							X
							X
					b(v)		Х
	• •						Х
c	• •						Х
d						<del></del>	
ų							
						N/A	1
(2)		, , , , , , , , , , , , , , , , , , , ,		(d)		•	· · · · · · · · · · · · · · · · · · ·
	no. Amount involved	Name of noncha	ritable exempt organization	Description of transfers, transactions, and	d sharing a	rranger	nents
*****							-
***							
					P		
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,, , ,	,		, , , , , , , , , , , , , , , , , , , ,				
52 a	Is the organization directly or in	directly affiliated with or re	lated to one or more tax-exempt or	ganizations described in section 501(c) of the	3		
UL U				▶ [	Yes		ON [
h							
			(b)	(c)			
	Name of org	janization	Type of organization	Description of relation	ship		
***							
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423151 11-24-				Schedule A (Fo	rm 990 or	990-EZ	) 2004

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions) OMB No. 1545-0047

**Employer identification number** 

Name of organization CENTER FOR PUBLIC INTEGRITY 54-1512177 Organization type (check one): Section: Filers of X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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-X For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but

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

requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2004)

they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing

Name of organization

**Employer identification number** 

## CENTER FOR PUBLIC INTEGRITY

54-1512177

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4	Aggregate contributions  \$ 500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$ 500,000.	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
4		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$600,000.	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		\$ <u>980,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

# CENTER FOR PUBLIC INTEGRITY

54-1512177

Employer identification number

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 1,000,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$ 250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9		\$ 450,000.	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
10		\$\$.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person 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.)

# FORM 990 PAGE 2

Amount Of Depreciation	32,976.	4,235.	264	3,100.	40,575.	-					-	-		-	
Current Sec 179	-		<del> </del>		ó	<del>-</del>									
Accumulated Depreciation	132,302.	101,320.	113,718.	27,900.	375,240.										
Basis For Depreciation	261,584.	129,210.	114,664.	31,000.	536,458.										
Reduction In Basis	<del></del>				o			i a a a a a a a a a a a a a a a a a a a							
Bus % Excl	7. T. E														
Unadjusted Cost Or Basis	261,584.	129,210.	114,664.	31,000.	536,458.				<u> </u>						
N. C. o. e.	16	16	16	16									 		
Life	5.00	5,00	5.00	5.00											
Method		SI	SI	SL											
Date Acquired	VARIESSL	VARIESSL	/ARIES	VARIESSL											
Description	1COMPUTER EQUIPMENT	2FURNITURE	3LEASEHOLD IMPROVEMENTSVARIESSL	IE SYSTEM											
Asset No.	<b>S.</b> I	. 1		.4			,e.e	,		<del>-</del> ; -	-			 	

(D) - Asset disposed

428 102 10-08-04

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

FORM 990 OTHER C	HANGES IN NET	ASSETS OR FUND	BALANCES	STATEMENT	1
DESCRIPTION				TRUOMA	
UNREALIZED GAIN ON INVE	33,892.				
TOTAL TO FORM 990, PART					
FORM 990	ORM 990 OTHER EXPENSES			STATEMENT	2
	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)	.T.G
DESCRIPTION	TOTAL	SERVICES	AND GENERAL	FUNDRAISI	.VG
ADVERTISING AWARDS	21,162. 30,991.	20,763. 30,991.	399.		
BANK CHARGES	13,495.	80.	13,415. 3,438.	23,0	7 5
CONSULTING FEES CONTRACT STAFF	75,895. 267,081.	49,382. 206,668.	60,413.	25,0	15.
DUES & MEMBERSHIP FEES	1,384.	540.	844.		
PAYROLL PROCESSING R & M - TECHNOLOGY	10,361.	0.20	10,361.		
CONTRACTS RESEARCH SERVICES -	36,099.	31,643.	3,057.	1,39	99.
NON-ELECTRIC	68,437.	68,389.	48.		
TECHNOLOGY	161,725.	135,688.	17,449.	8,58	
MISCELLANEOUS	3,603.	477.	3,055.	·	71.
TEMPORARY SERVICES	7,181.	1,825. 8,585.	5,356. 13,083.	78	88.
INSURANCE PROFESSIONAL FEES	22,456. 53,852.	4,052.	49,800.	, (	
PROFESSIONAL	33,032.	1,000	20,000		
DEVELOPMENT	24,604.	22,092.	765.	1,74	<b>47</b> .
FILING FEES	5,578.	2,818.	100.	2,60	50.
PUBLIC EDUCATION	3,637.		3,637.	F 4	1 0
RECRUITING SUBSCRIPTIONS	859. 15,320.	12,184.	349. 2,759.		10. 77.
TOTAL TO FM 990, LN 43	823,720.	596,177.	188,328.	39,21	15.

FORM 990

STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III

STATEMENT

3

EXPLANATION

THE CENTER FOR PUBLIC INTEGRITY IS A NON-PROFIT, NONPARTISAN RESEARCH ORGANIZATION THAT CONCENTRATES ON ETHICS AND PUBLIC SERVICE ISSUES.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

DESCRIPTION OF PROGRAM SERVICE ONE

POLITICS, PUBLICATIONS, AND PUBLIC I (PP&P): BECAME KNOWN IN 2004 AS PAR (POLITICAL ACCOUNTABILITY REPORTS). IN 2004, THE PAR PROJECT WAS THE PRIMARY HOME OF THE CENTER'S ELECTION CAMPAIGN COVERAGE, WHICH INCLUDED YEAR-LONG FOLLOW-UP REPORTS TO THE BUYING OF THE PRESIDENT 2004 BESTSELLER AND OTHER RELATED STORIES SUCH AS LOBBYING. IN ADDITION, THE CENTER'S WORK ON THE ABU GHRAIB SCANDAL WAS FEATURED AS PART OF THIS PROJECT.

GRANTS

EXPENSES

TO FORM 990, PART III, LINE A

486,334.

**EXPENSES** 

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT FORM 990 DESCRIPTION OF PROGRAM SERVICE TWO POLITICS OF NATIONAL SECURITY/OUTSOURCING THE PENTAGON: AN IRE-AWARD-WINNING REPORT RELEASED IN 2004 BY THE CENTER THAT EXAMINED THE SIGNIFICANT NUMBER OF NON-BID CONTRACTS, TOTALING \$362 BILLION, AWARDED BY THE PENTAGON SINCE 1998. THE REPORT, WHICH COVERS THE PERIOD 1998-2003, ALSO DOCUMENTS THE EXTENT TO WHICH THE DEFENSE DEPARTMENT HAS BECOME DEPENDENT ON OUTSIDE CONTRACTORS. **EXPENSES** GRANTS 436,371. TO FORM 990, PART III, LINE B 6 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT FORM 990 DESCRIPTION OF PROGRAM SERVICE THREE SOFT MONEY: THE SOFT MONEY PROJECT TRACKS CAMPAIGN MONEY OUTSIDE OF FEDERAL REGULATION, NAMELY STATE POLITICAL PARTIES AND 527 GROUPS. THROUGH THE 2004 ELECTION YEAR, THE CENTER COVERED THESE TWO TYPES OF POLITICAL COMMITTEES THROUGH WRITTEN REPORTS, BY CONSTRUCTING FINANCE DATABASE AND VIA CONSISTENTLY UPDATE WEB SITES.

TO FORM 990, PART III, LINE C 437,827.

GRANTS

7 STATEMENT FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

### DESCRIPTION OF PROGRAM SERVICE FOUR

GLOBAL ACCESS: THIS LONG-TERM INVESTIGATION INTO CORRUPTION. GOVERNMENT ACCOUNTABILITY AND OPENNESS AMONG THE WORLD'S DEMOCRACIES. THE INTIAL PHASE OF THE PROJECT, RELEASED IN 2004 AS A 700,000 WORLD REPORT, EXAMINED 25 WIDELY DIVERSE COUNTRIES AROUND THE WORLD USING INVESTIGATIVE JOURNALISTS AND SOCIAL SCIENTISTS FROM EACH COUNTRY. THE INNOVATIVE PUBLIC INTEGRITY INDEX, CREATED FOR THIS PROJECT, ASSESSES THE EXISTENCE AND EFFECTIVENESS OF MECHANISMS THAT PREVENT ABUSES OF POWER AND PROVIDE ACCESSIBILITY TO PUBLIC INFORMATION TO CITIZENS TO HOLD THEIR GOVERNMENT ACCOUNTABLE.

	GRANTS	EXPENSES	
TO FORM 990, PART III, LINE D		428,013.	
FORM 990 OTHER PROGRAM SERV	VICES	STATEMENT 8	
DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES	
INTERNATIONAL CONSORTIUM OF INVESTIGATIVE JOURNALISTS STATES TELECOM BUYING OF THE PRESIDENT 2004 COMMUNICATIONS GEOPOLITICS OF OIL INFLUENCE MATRIX PHARMACEUTICAL		221,779. 381,672. 394,523. 29,809. 284,668. 219,465. 108,227. 7,359.	
TOTAL TO FORM 990, PART III, LINE E		1,647,502.	

FORM 9	90 NON-G	NON-GOVERNMENT SECURITIES			STATEMENT	9
SECURI	TY DESCRIPTION COST/FMV	CORPORATE STOCKS	CORPOR BOND		TOTAL NON-GOV'T S SECURITIES	
	MUTUAL FUNDS FMV INCOME MUTUAL FMV	maganda magama nagan mana mana maka maka maka maka maka ma		3,801 111,681		
TO FOR	M 990, LINE 54, COL B			115,482	115,482	2.
FORM 9	90 DEPRECIATION OF	ASSETS NOT	HELD FOR	INVESTMENT	STATEMENT 1	10
DESCRI	PTION	COST OTHER		ACCUMULATED DEPRECIATION	BOOK VALUE	
FURNIT	ER EQUIPMENT URE OLD IMPROVEMENTS ONE SYSTEM	1 1	61,584. 29,210. 14,664. 31,000.	165,278. 105,555. 113,982. 31,000.	96,306 23,655 682	5 .
TOTAL	TO FORM 990, PART IV, L	N 57 5	36,458.	415,815.	120,643	3.
FORM 9		ELATIONSHIP HMENT OF EXE			STATEMENT 1	11
LINE	EXPLANATION OF RELATION	NSHIP OF ACT	IVITIES			
93A/ 93B	THE CENTER HAS A CONTRAPUBLIC AWARENESS OF THE WHICH CONCERN MATTERS OF GOVERNMENT, WHICH ARE OF THE CONTRAPUTED IN THE CONTRAP	E RESULTS OF OF INTEGRITY	THE CENT	TER'S INVESTIGA POLITICAL PROCE	TIONS, ALL OF SS AND	Ŧ.
103A	CENTER. OTHER INCIDENTAL REVENU PURPOSE ACTIVITIES.	JE RECEIVED	IN THE C	OURSE OF PERFOR	MING EXEMPT	

SCHEDULE A	OTHER INC	OME	STATEMENT		
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	ı
MISCELLANEOUS	132.	120.	18,344.	16,6	28.
TOTAL TO SCHEDULE A, LINE 22	132.	120.	18,344.	16,6	28.