

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2005

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2005 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CENTER FOR PUBLIC INTEGRITY		D Employer identification number 54-1512177	
		Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	E Telephone number
		910 17TH STREET, N.W.		7TH FL	(202)466-1300
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20006		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates **N/A**

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: **WWW.PUBLICINTEGRITY.ORG**

J Organization type (check only one) 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

I Group Exemption Number **N/A**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **3,157,643.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	3,095,418.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ 3,095,418. noncash \$ _____) ...	1d		3,095,418.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		20,472.	
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4		19,549.	
	5 Dividends and interest from securities	5			
	6 a Gross rents	6a			
	b Less: rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other investment income (describe _____)	7				
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	19,504.	8a			
	19,504.	8b			
		8c			
d Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1	8d				
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a				
b Less: direct expenses other than fundraising expenses	9b				
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
10 a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11 Other revenue (from Part VII, line 103)	11		2,700.		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		3,138,139.		
Expenses	13 Program services (from line 44, column (B))	13	3,156,524.		
	14 Management and general (from line 44, column (C))	14	814,311.		
	15 Fundraising (from line 44, column (D))	15	429,868.		
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17		4,400,703.	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		<1,262,564.>	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		4,409,291.	
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 2	20		<15,412.>	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		3,131,315.	

523001 02-03-06

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

Form 990 (2005)

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) ... (cash \$ <u>11,000.</u> noncash \$ <u>0.</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22	11,000.	11,000.	STATEMENT 5	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc. **	25	292,396.	47,428.	109,297.	135,671.
26 Other salaries and wages	26	2,165,439.	1,782,217.	295,820.	87,402.
27 Pension plan contributions	27	44,360.	34,997.	4,873.	4,490.
28 Other employee benefits	28	173,576.	125,469.	32,407.	15,700.
29 Payroll taxes	29	181,623.	137,488.	27,495.	16,640.
30 Professional fundraising fees	30				
31 Accounting fees	31	17,974.		17,974.	
32 Legal fees	32	47,014.	27,611.	19,403.	
33 Supplies	33	29,018.	16,336.	10,762.	1,920.
34 Telephone	34	22,835.	13,762.	7,348.	1,725.
35 Postage and shipping	35	25,381.	14,189.	3,635.	7,557.
36 Occupancy	36	275,582.	204,530.	46,683.	24,369.
37 Equipment rental and maintenance	37	27,307.	16,123.	9,407.	1,777.
38 Printing and publications	38	72,631.	51,169.	389.	21,073.
39 Travel	39	221,684.	195,992.	5,660.	20,032.
40 Conferences, conventions, and meetings ...	40	57,303.	45,230.	8,779.	3,294.
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	35,201.	25,592.	6,152.	3,457.
43 Other expenses not covered above (itemize):					
a	43a				
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g SEE STATEMENT 3	43g	700,379.	407,391.	208,227.	84,761.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	4,400,703.	3,156,524.	814,311.	429,868.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A; (ii) the amount allocated to Program services \$ N/A; (iii) the amount allocated to Management and general \$ N/A; and (iv) the amount allocated to Fundraising \$ N/A

** SEE STATEMENT 4

Part III Statement of Program Service Accomplishments (See the instructions.)

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

What is the organization's primary exempt purpose? ► SEE STATEMENT 9	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a SEE STATEMENT 6	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	523,318.
b SEE STATEMENT 7	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	515,866.
c SEE STATEMENT 8	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	454,951.
d FIFTY STATES - AN ONGOING CENTER PROJECT THAT MONITORS THE INFLUENCE OF PRIVATE INTEREST ON PUBLIC POLICY IN ALL 50 STATES FROM A NATIONWIDE PERSPECTIVE. IN 2005, RELEASES FOCUSED ON ETHICS LAWS IN THE STATES, PRIVATE FINANCIAL INTERESTS OF STATE LEGISLATORS, AND STATE LOBBY SPENDING.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	375,184.
e Other program services (attach schedule) SEE STATEMENT 10	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	1,287,205.
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	3,156,524.

Form 990 (2005)

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year		
Assets	45	Cash - non-interest-bearing		45	750.	
	46	Savings and temporary cash investments	2,158,639.	46	2,010,739.	
	47 a	Accounts receivable	47a	499.		
	b	Less: allowance for doubtful accounts	47b		47c	499.
	48 a	Pledges receivable	48a	50,000.		
	b	Less: allowance for doubtful accounts	48b		48c	50,000.
	49	Grants receivable	2,063,000.	49	964,000.	
	50	Receivables from officers, directors, trustees, and key employees		50		
	51 a	Other notes and loans receivable	51a			
	b	Less: allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use		52		
	53	Prepaid expenses and deferred charges	29,584.	53	75,870.	
	54	Investments - securities STMT 11 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	115,482.	54	127,194.	
	55 a	Investments - land, buildings, and equipment: basis	55a			
b	Less: accumulated depreciation	55b		55c		
56	Investments - other		56			
57 a	Land, buildings, and equipment: basis	57a	556,871.			
b	Less: accumulated depreciation STMT 12	57b	451,015.	57c	105,856.	
58	Other assets (describe ▶ DEPOSITS)		49,517.	58	49,517.	
59	Total assets (must equal line 74). Add lines 45 through 58	4,645,939.	59	3,384,425.		
Liabilities	60	Accounts payable and accrued expenses	236,648.	60	228,895.	
	61	Grants payable		61		
	62	Deferred revenue		62		
	63	Loans from officers, directors, trustees, and key employees		63		
	64 a	Tax-exempt bond liabilities		64a		
	b	Mortgages and other notes payable		64b		
65	Other liabilities (describe ▶ DUE TO GLOBAL INTEGRITY)			65	24,215.	
66	Total liabilities. Add lines 60 through 65)	236,648.	66	253,110.		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67	Unrestricted	307,681.	67	<43,567.>	
	68	Temporarily restricted	4,101,610.	68	3,174,882.	
	69	Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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		
73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	4,409,291.	73	3,131,315.		
74	Total liabilities and net assets/fund balances. Add lines 66 and 73	4,645,939.	74	3,384,425.		

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a Total revenue, gains, and other support per audited financial statements		a	3,146,942.
b Amounts included on line a but not on Part I, line 12:			
1 Net unrealized gains on investments	b1	8,803.	
2 Donated services and use of facilities	b2		
3 Recoveries of prior year grants	b3		
4 Other (specify):	b4		
Add lines b1 through b4	b	8,803.	
c Subtract line b from line a	c		3,138,139.
d Amounts included on Part I, line 12, but not on line a:			
1 Investment expenses not included on Part I, line 6b	d1		
2 Other (specify):	d2		
Add lines d1 and d2	d		0.
e Total revenue (Part I, line 12). Add lines c and d	e		3,138,139.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a Total expenses and losses per audited financial statements		a	4,400,703.
b Amounts included on line a but not on Part I, line 17:			
1 Donated services and use of facilities	b1		
2 Prior year adjustments reported on Part I, line 20	b2		
3 Losses reported on Part I, line 20	b3		
4 Other (specify):	b4		
Add lines b1 through b4	b		0.
c Subtract line b from line a	c		4,400,703.
d Amounts included on Part I, line 17, but not on line a:			
1 Investment expenses not included on Part I, line 6b	d1		
2 Other (specify):	d2		
Add lines d1 and d2	d		0.
e Total expenses (Part I, line 17). Add lines c and d	e		4,400,703.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 13		167,000.	26,396.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees <i>(continued)</i>	Yes	No
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 10		
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control?	75c	X
Note. Related organizations include section 509(a)(3) supporting organizations. If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.		
d Does the organization have a written conflict of interest policy?	75d	X

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
CHARLES LEWIS 1250 24TH STREET, NW, SUITE 300 WASHINGTON, DC 20037	0.	99,000.	0.	0.

Part VI Other Information <i>(See the instructions.)</i>	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization THE FUND FOR INDEPENDENCE IN JOURNALISM and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a Enter direct or indirect political expenditures. (See line 81 instructions.)	81a	0.
b Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 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.) 82b N/A		X
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications? 83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A 83b		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? N/A 84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A 84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A 85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A 85b		
	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		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A 85g		
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 dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A 85h		
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	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? If "Yes," complete Part IX 88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0. 89a		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction 89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0.		
90 a	List the states with which a copy of this return is filed ▶ SEE STATEMENT 14		
b	Number of employees employed in the pay period that includes March 12, 2005 90b 44		
91 a	The books are in care of ▶ THE CENTER Telephone no. ▶ (202) 466-1300 Located at ▶ 910 17TH STREET, N.W., WASHINGTON, DC ZIP + 4 ▶ 20006		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 91b		X
	If "Yes," enter the name of the foreign country ▶ N/A		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A 91c		X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Part VII Analysis of Income-Producing Activities (See the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a CONSULTING FEES					20,472.
b PUBLICATIONS					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	19,549.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS					2,700.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		19,549.	23,172.
105 Total (add line 104, columns (B), (D), and (E))					42,721.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 15

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: *Cathy R. Sweeney* **Date:** 6/29/06 **Type or print name and title:** CATHY R. SWEENEY, DIRECTOR OF FINANCE and ADMINISTRATION

Preparer's signature: *David F. Hurling CPA* **Date:** 6-28-06 **Check if self-employed:** **Preparer's SSN or PTIN:**

Firm's name (or yours if self-employed), address, and ZIP + 4: GELMAN, ROSENBERG & FREEDMAN
4550 MONTGOMERY AVE., SUITE 650 NORTH
BETHESDA, MARYLAND 20814-2930

EIN: **Phone no.:** (301) 951-9090

STATEMENT

Organization Exempt Under Section 501(c)(3)

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

2005

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

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

Name of the organization CENTER FOR PUBLIC INTEGRITY	Employer identification number 54 1512177
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JOHN DUNBAR ALL IN C/O ORGANIZATION	DIR. WELL CONN PROJ 40.00	85,262.	11,218.	
TEO FURTADO	EDITOR 40.00	82,138.	22,375.	
WILLIAM ALLISON	EDITOR AT LARGE 40.00	121,363.	7,468.	
CATHY SWEENEY	DIR FIN & ADM 40.00	113,036.	9,481.	
MELEAH RUSH	DIR. STATE PROJ 40.00	73,550.	21,347.	
Total number of other employees paid over \$50,000	▶ 13			

Part II-A 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.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶ 0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	▶ 0	

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	X	
e	Transfer of any part of its income or assets?		X
3 a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b	Do you have a section 403(b) annuity plan for your employees?	X	
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4 a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ▶ Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	6,413,603.	4,211,766.	2,965,021.	4,431,770.	18,022,160.
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	44,646.	85,713.	10,254.	18,453.	159,066.
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	9,917.	17,000.	19,763.	30,706.	77,386.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
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	26,033.	132.	SEE STATEMENT 16 120.	18,344.	44,629.
23 Total of lines 15 through 22	6,494,199.	4,314,611.	2,995,158.	4,499,273.	18,303,241.
24 Line 23 minus line 17	6,449,553.	4,228,898.	2,984,904.	4,480,820.	18,144,175.
25 Enter 1% of line 23	64,942.	43,146.	29,952.	44,993.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 362,884.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 8,639,411.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 18,144,175.
d Add: Amounts from column (e) for lines: 18 77,386. 19 22 44,629. 26b 8,639,411.					26d 8,761,426.
e Public support (line 26c minus line 26d total)					26e 9,382,749.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 51.7122%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2004) (2003) (2002) (2001)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2004) (2003) (2002) (2001)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	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?		
31	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?		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			

32	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?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student 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.)			

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			

34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended?		
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group.

Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h .)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h .)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

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

2005

Name of organization

Employer identification number

CENTER FOR PUBLIC INTEGRITY

54-1512177

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(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 under Regulations sections 1.509(a)-3/1.170A-9(e) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

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

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

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2005)

Name of organization CENTER FOR PUBLIC INTEGRITY	Employer identification number 54-1512177
--	---

Part I Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 450,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 316,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 700,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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
7		\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

2005 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	COMPUTER EQUIPMENT	VARIESL		5.00	16	278,647.			278,647.	165,277.		29,911.
2	FURNITURE	VARIESL		5.00	16	129,210.			129,210.	105,555.		4,970.
3	LEASEHOLD IMPROVEMENTS	VARIESL		5.00	16	118,014.			118,014.	113,982.		320.
4	TELEPHONE SYSTEM	VARIESL		5.00	16	31,000.			31,000.	31,000.		0.
	* TOTAL 990 PAGE 2 DEPR					556,871.		0.	556,871.	415,814.	0.	35,201.

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
SALE OF INVESTMENTS	19,504.	19,504.	0.	0.	
TO FORM 990, PART I, LINE 8	19,504.	19,504.	0.	0.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES		STATEMENT	2
DESCRIPTION				AMOUNT
UNREALIZED GAIN ON INVESTMENTS				8,803.
FUND BALANCE FROM CENTER FOR PUBLIC INTEGRITY PROJECT SPUN OFF TO SEPARATE ENTITY, GLOBAL INTEGRITY				<24,215.>
TOTAL TO FORM 990, PART I, LINE 20				<15,412.>

FORM 990	OTHER EXPENSES				STATEMENT	3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING		
ADVERTISING	15,003.	13,848.	350.	805.		
AWARDS	20,881.	20,391.	490.			
BANK CHARGES	5,886.	262.	5,600.	24.		
CONSULTING FEES	207,180.	69,430.	88,000.	49,750.		
CONTRACT STAFF	98,542.	51,039.	47,503.			
DUES & MEMBERSHIP FEES	1,769.	1,222.	340.	207.		
PAYROLL PROCESSING R & M - TECHNOLOGY CONTRACTS	11,564.		11,564.			
RESEARCH SERVICES - NON-ELECTRIC TECHNOLOGY	22,537.	16,687.	3,790.	2,060.		
MISCELLANEOUS	60,454.	59,054.	5.	1,395.		
TEMPORARY SERVICES	181,707.	143,262.	21,897.	16,548.		
INSURANCE	5,076.	742.	4,170.	164.		
PROFESSIONAL FEES	3,527.	500.	3,027.			
PROFESSIONAL DEVELOPMENT	22,819.	13,195.	7,931.	1,693.		
FILING FEES	3,777.	3,777.				
	14,483.	8,568.	4,933.	982.		
	10,607.	1,320.	488.	8,799.		

CENTER FOR PUBLIC INTEGRITY

54-1512177

RECRUITING	5,960.	1,875.	2,875.	1,210.
SUBSCRIPTIONS	6,607.	2,219.	3,264.	1,124.
MOVING	2,000.		2,000.	
TOTAL TO FM 990, LN 43	700,379.	407,391.	208,227.	84,761.

FORM 990 OFFICER COMPENSATION ALLOCATION STATEMENT 4
PART II, LINE 25

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS OF A, B & C
ROBERTA BASKIN	167,000.	26,396.		
A. PROGRAM SERVICES	16,700.	2,640.		19,340.
B. MANAGEMENT AND GENERAL	83,500.	13,198.		96,698.
C. FUNDRAISING	66,800.	10,558.		77,358.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS OF A, B & C
CHARLES LEWIS	99,000.			
A. PROGRAM SERVICES	9,900.			9,900.
B. MANAGEMENT AND GENERAL	49,500.			49,500.
C. FUNDRAISING	39,600.			39,600.

TOTAL PROGRAM SERVICES				29,240.
TOTAL MANAGEMENT AND GENERAL				146,198.
TOTAL FUNDRAISING				116,958.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON LINE 25				292,396.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 5

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
AWARDS	RUSSELL CAROLLO	1947 NEWTON ROAD EXTENSION, , PUEBLO, CO 81005	NONE	10,000.
AWARDS	BARTON GELLMAN	424 WEST END AVENUE APT 13G, NEW YORK, NY 10024	NONE	1,000.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22

11,000.

FORM 990	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	STATEMENT	6
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DESCRIPTION OF PROGRAM SERVICE ONE

INTERNATIONAL CONSORTIUM OF INVESTIGATIVE JOURNALISTS - ICIJ EXTENDS GLOBALLY THE CENTER'S STYLE OF "WATCHDOG JOURNALISM" IN THE PUBLIC INTEREST BY MARSHALING THE TALENTS OF A NETWORK OF 92 OF THE WORLD'S LEADING INVESTIGATIVE REPORTERS IN 48 COUNTRIES. IN AUGUST 2005 AN INTERNATIONAL CONFERENCE OF THESE JOURNALISTS WAS HELD IN LONDON, ENGLAND, THE FIRST EVER HELD OUTSIDE THE U.S. AND THE FIRST SUCH MEETING IN FOUR YEARS.

TO FORM 990, PART III, LINE A

GRANTS

EXPENSES

	523,318.
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DESCRIPTION OF PROGRAM SERVICE TWO

LOBBY/WATCH CHARLES LEWIS SPECIAL PROJECTS - THE CENTER'S PROJECT INVESTIGATING THE LOBBYING INDUSTRY. SINCE 1998, LOBBYISTS REPORTED SPENDING ALMOST \$13 BILLION - TWO TIMES WHAT IS SPENT ON FEDERAL ELECTIONS. WHILE ENORMOUS AMOUNTS ARE BEING SPENT ON LOBBYING, FEW ARE PAYING ATTENTION, WHICH MAY BE WHY THERE IS SUCH A LOW PERCENTAGE OF COMPLIANCE WITH DISCLOSURE LAWS. THE CENTER FOUND ALMOST 20 PERCENT OF ALL LOBBYING FORMS ARE NEVER FILED, WHILE EVEN MORE ARE FILED MONTHS LATE. THE CENTER ALSO LOOKED INTO LOBBYISTS WHO HAVE PRIOR EMPLOYMENT WITH EITHER THE CONGRESS OR THE FEDERAL GOVERNMENT. THIS ATTEMPT TO QUANTIFY THE PROVERBIAL REVOLVING DOOR FOUND THAT MORE THAN 2,200 FORMER FEDERAL GOVERNMENT EMPLOYEES REGISTERED AS FEDERAL LOBBYISTS BETWEEN 1998 AND 2004, INCLUDING NEARLY 250 FORMER MEMBERS OF CONGRESS AND FEDERAL AGENCY HEADS.

TO FORM 990, PART III, LINE B

GRANTS

EXPENSES

	515,866.
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FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 8

DESCRIPTION OF PROGRAM SERVICE THREE

TELECOM - THIS IS AN ON-GOING INVESTIGATION INTO THE HISTORY AND POLITICAL INFULENCE OF THE MEDIA AND TELECOMMUNICATIONS INDUSTRIES IN AMERICA SINCE 1990. THIS MAY WELL BE THE MOST THOROUGH BUSINESS INVESTIGATION EVER UNDERTAKEN JOURNALISTICALLY. IN 2005, THE CENTER PUBLISHED THE MOST EXHAUSTIVE STUDY EVER UNDERTAKEN OF THE TELECOMMUNICATIONS INDUSTRY'S INFLUENCE AT THE STATE LEVEL. THE PROJECT EXAMINED LOBBYING AND CAMPAIGN CONTRIBUTION EXPENDITURES BY THE TELECOMMUNICATIONS INDUSTRY IN EVERY STATE AS WELL AS THE FINANCIAL HOLDINGS AND JOB HISTORIES OF EVERY PUBLIC UTILITY BOARD IN THE NATION.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE C		454,951.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 9
PART III

EXPLANATION

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

FORM 990 OTHER PROGRAM SERVICES STATEMENT 10

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
PHARMACEUTICAL INDUSTRY PROJECT		269,420.
COMMUNICATIONS		240,474.
SOFT MONEY		229,759.
GLOBAL ACCESS		164,620.
POLITICS PUBLICATIONS AND PUBLIC I		155,919.
TORTURER'S LOBBY		69,964.
POLICY BY PROVIDENCE		69,851.
INFLUENCE MATRIX		61,446.
KATRINA WATCH/HOMELAND SECURITY		17,361.
POLITICS OF NATIONAL SECURITY		8,391.
TOTAL TO FORM 990, PART III, LINE E		1,287,205.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 11

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
EQUITY MUTUAL FUNDS	FMV			12,601.	12,601.
FIXED INCOME MUTUAL FUNDS	FMV			114,593.	114,593.
TO FORM 990, LINE 54, COL B				127,194.	127,194.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 12

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER EQUIPMENT	278,647.	195,188.	83,459.
FURNITURE	129,210.	110,525.	18,685.
LEASEHOLD IMPROVEMENTS	118,014.	114,302.	3,712.
TELEPHONE SYSTEM	31,000.	31,000.	0.
TOTAL TO FORM 990, PART IV, LN 57	556,871.	451,015.	105,856.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ROBERTA BASKIN ALL MAY BE REACHED IN C/O ORG	EXEC. DIR./BOARD 40.00	MEMBER 167,000.	26,396.	0.
ALLEN PUSEY	BOARD MEMBER 2.00	0.	0.	0.
MARIANNE SZEGEDY-MASZAK	BOARD MEMBER 2.00	0.	0.	0.
PAULA MADISON	BOARD MEMBER 2.00	0.	0.	0.
JOHN E. NEWMAN, JR.	BOARD MEMBER 2.00	0.	0.	0.
SUSAN LOEWENBERG	BOARD MEMBER 2.00	0.	0.	0.
BILL KOVACH	BOARD MEMBER 2.00	0.	0.	0.
CHARLES PILLER	BOARD MEMBER 2.00	0.	0.	0.
BEN SHERWOOD	BOARD MEMBER 2.00	0.	0.	0.
PEARL STEWART	BOARD MEMBER 2.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		167,000.	26,396.	0.

FORM 990

LIST OF STATES RECEIVING COPY OF RETURN
PART VI, LINE 90

STATEMENT 14

STATES

AL, AK, AZ, AR, CA, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MS, NH, NJ, NM, NY, NC, OH, OK, OR, PA
RI, SC, TN, UT, VA, WA, WV, WI

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 15

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

- 93A THE CENTER HAS A CONTRACT WITH A MAJOR NEWS ORGANIZATION TO INCREASE PUBLIC AWARENESS OF THE RESULTS OF THE CENTER'S INVESTIGATIONS, ALL OF WHICH CONCERN MATTERS OF INTEGRITY IN THE POLITICAL PROCESS AND GOVERNMENT, WHICH ARE CORE ELEMENTS OF THE EXEMPT FUNCTION OF THE CENTER.
- 103A OTHER INCIDENTAL REVENUE RECEIVED IN THE COURSE OF PERFORMING EXEMPT PURPOSE ACTIVITIES.

SCHEDULE A

OTHER INCOME

STATEMENT 16

DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT
MISCELLANEOUS	26,033.	132.	120.	18,344.
TOTAL TO SCHEDULE A, LINE 22	26,033.	132.	120.	18,344.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print	Name of Exempt Organization	Employer identification number
	CENTER FOR PUBLIC INTEGRITY	54-1512177
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	
	910 17TH STREET, N.W., NO. 7TH FL	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	WASHINGTON, DC 20006	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **THE CENTER**
Telephone No. ▶ **SEE PAGE 1** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until **AUGUST 15, 2006** to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2005** or
▶ tax year beginning _____, and ending _____
- 2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____
- c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.