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)

Department of the Treasury Internal Revenue Service

A For the 2007 calendar year, or tax year beginning

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

and ending MAR 31, 2008

APR 1, 2007

Open to Public Inspection

OMB No. 1545-0047

В	Check if applicable	Please C Name of organization				D Employer	ridentification number
		Inge we WILL DET CAM CIATE DIDER					
	Addres	e print or FOUNDATION, INC.				13-6	5213516
	Name chang	type to the second second	ot delivered to street address)	Room/suite	E Telephon	
	Initial return	Specific 125 BROAD STREET		61	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-549-2500
	Termir	Instruc- tions. City or town, state or country, and ZIP + 4				F Accounting n	
	Ameno	NEW YORK, NY 10004				Other (specif	vi >
	Applic pendir	 Section 501(c)(3) organizations and 4947(a) 	1) nonexempt charitable tru	sts	Hand lare not app		ection 527 organizations.
		must attach a completed Schedule A (Form 9	90 or 990-EZ).		H(a) Is this a group r		
G	Website	e;▶WWW.ACLU.ORG			H(b) If "Yes," enter no		
J	Organiz	ation type (check only one) ► X 501(c) (3) ◀ (Inse	t no.) 4947(a)(1) or	527	H(c) Are all affiliates		N/A Yes No
K	Check h	ere 🕨 🔛 if the organization is not a 509(a)(3) suppo		ss	(If "No," attach a	list.)	
		are normally not more than \$25,000. A return is not requ			H(d) Is this a separat ganization cover	e return nied red by a grou	p ruling? Yes X No
		to file a return, be sure to file a complete return.	,		I Group Exemption		
							ation is not required to attach
<u>, L _ (</u>	Gross re	eceipts: Add lines 6b, 8b, 9b, and 10b to line 12	134,674,56	4.	Sch. B (Form 99		
	art I	Revenue, Expenses, and Changes in					
	1	Contributions, gifts, grants, and similar amounts receive	ed:				
	a	Contributions to donor advised funds		1a			
	b	Direct public support (not included on line 1a)		1b	75,904,0	86.	
	c	т при в при в при в при от в в в в при в в при в в при в при в		10	458,2		
	d	Government contributions (grants) (not included on line 1a) 1d					
	е	e in the company of the company and the company of) 1e	76,362,326.			
	2	Program service revenue including government fees ar	2	2,233,355.			
	3	Membership dues and assessments					
	4	Interest on savings and temporary cash investments		ill.		4	1,427,941.
	5	Dividends and interest from securities				5	9,434,769.
	6 a	Dividends and interest from securities Gross rents SEE	STATEMENT 1	6a	109,3	40.	
	b	Less: rental expenses SEE	STATEMENT 2	6b	113,2	10.	
a	C	Net rental income or (loss). Subtract line 6b from line 6	line 6a				-3,870.
Š	7	Other investment income (describe			***************************************) 7	
Revenue	8 a	Gross amount from sales of assets other	(A) Securities		(B) Other	25567	
Œ		than inventory	45,106,833.	8a	4		
	b	Less; cost or other basis and sales expenses	38,512,244.	8b			
		Gain or (loss) (attach schedule)	6,594,589.	8c			
	d	- 14 No No 14 No 15 No 14 No 15 N				8d	6,594,589.
	9	Special events and activities (attach schedule). If any ar	nount is from gaming, check	here	> 🔲	8420	
	а	Gross revenue (not including \$	contributions reported on line 1b)	9a		1	
	b	Less; direct expenses other than fundraising expenses		9b		10	
	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		1,000	
	b	Less: cost of goods sold		10b		0.01	
	C	Gross profit or (loss) from sales of inventory (attach sc	hedule). Subtract line 10b fro	m line	10a	10c	
	11	Other revenue (from Part VII, line 103)	*******************************			11	
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10	c, and 11			12	96,049,110.
S	13	Program services (from line 44, column (B))				13	48,701,133.
Expenses	14	Management and general (from line 44, column (C))	***************************************			14	6,568,039.
ber	15	Fundraising (from line 44, column (D))				15	5,444,450.
Щ	16	Payments to affiliates (attach schedule)				16	
	17	Total expenses. Add lines 16 and 44, column (A)	********************************			17	60,713,622.
ø	18	Excess or (deficit) for the year. Subtract line 17 from lin	e 12			18	35,335,488.
Net ssets	19	Net assets or fund balances at beginning of year (from I	ine 73, column (A))			19	255,772,422.
AS	20	Net assets or fund balances at beginning of year (from I Other changes in net assets or fund balances (attach ex	planation) S	EE :	STATEMENT 4	20	-27,200,193.
יחפפיק	21	Net assets of fund balances at end of year. Combine line	s 18, 19, and 20			21	263,907,717.
72300 12-27	-07	LHA For Privacy Act and Paperwork Reduction Act N	otice, see the separate insti	uctions	3.		Form 990 (2007)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	100	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	a Grants paid from donor advised funds				DATE OF THE STREET, ST	Take the grant to the
	(attach schedule)		×			
	(cash \$ 0 • noncash \$ 0	•				
	If this amount includes foreign grants, check here	22	a			
22	Other grants and allocations (attach schedu	le)			STATEMENT 5	
	(cash \$ 75,000 • noncash \$ 0	÷				
าว	If this amount includes foreign grants, check here] 22	b 75,000.	75,000.		
23	Specific assistance to individuals (attach					
24	schedule) Benefits paid to or for members (attach	23	3			
-7	•	0				
25a	schedule)	24	t .		THE SECTION STATES OF	
	employees, etc. listed in Part V-A	25	a 0.	0		
ь	Compensation of former officers, directors, key	25	d U.	0.	0.	0
	employees, etc. listed in Part V-B	25	0.	0.		
C	Compensation and other distributions, not include	1	0.	0.	0.	0
	above, to disqualified persons (as defined under				ľ	
	section 4958(f)(1)) and persons described in					
	section 4958(c)(3)(B)	25				
6	Salaries and wages of employees not					
	included on lines 25a, b, and c	26	21,427,424.	17,283,219.	2,512,142.	1,632,063
7	Pension plan contributions not included on				2/312/142.	1,032,003
	lines 25a, b, and c	27	1,166,294.	890,082.	146,208.	130,004
8	Employee benefits not included on lines				220,2001	130,004
	25a - 27	28	3,077,257.	2,348,473.	385,768.	343,016
9	Payroll taxes	29	1,530,149.	1,167,765.	191,821.	170,563.
0	Professional fundraising fees	30	510,895.		65,023.	100,852
1	Accounting fees	31	162,000.	105,260.	43,780.	12,960.
2	Legal fees	32	295,296.	227,892.	33,960.	33,444.
3	Supplies	33				2.5 /
4	Telephone	34	475,229.	282,896.	139,852.	52,481.
5	Postage and shipping	35	1,081,138.	520,838.	108,710.	451,590.
b ⊸	Occupancy	36	1,488,184.	1,297,381.	190,803.	
	Equipment rental and maintenance	37	294,622.	126,526.	168,096.	
D .	Printing and publications	38	1,095,406.	902,110.		193,296.
)	Travel	39	2,411,250.	2,093,954.	153,774.	163,522.
	Conferences, conventions, and meetings	40	478,011.	449,897.	3,090.	25,024.
, ,	Interest	41	1,002,921.	696,141.	306,780.	
- ' } i	Other expenses not covered above (itemize):	42	2,425,485.	1,417,420.	500,110.	507,955.
	OTHER EXPENSES	43a	1,227,971.	620 260	C00 FC0	
	BOOKS	43b	416,005.	620,269.	603,762.	3,940.
_	PROFESSIONAL SERVICES	43c	8,640,089.	362,463.	32,916.	20,626.
	GRANTS TO AFFILIATES	43d	4,491,025.	6,134,407. 4,484,725.	975,144.	1,530,538.
	PUBLIC INFORMATION	43e	193,226.	120,650.	6,300.	70 576
	AFFILIATE SUPPORT	431	6,748,745.	6,748,745.		72,576.
g		43g	07.207.20.	0,740,743.		
٦	otal functional expenses. Add lines 22a through					
4	3g. (Organizations completing columns (B)-(D),				1	
C	arry these totals to lines 13-15)	44	60,713,622.	48,701,133.	6,568,039.	5 111 150
	Costs. Check > if you are following	SOP	98-2.			5,444,450.
a e	ny joint costs from a combined educational campaig	ın and	d fundraising solicitation ren	orted in (B) Program service	sc2	Yes X No
Yes	s," enter (i) the aggregate amount of these joint cost	ts \$	N/A :(ii) the amount allocated to P	rogram services \$	N/A :
) th	ne amount allocated to Management and general \$			v) the amount allocated to F		N/A
	07		10.000000000000000000000000000000000000	The state of the s	m.α.αισπη φ	-1/22

Form 990 (2007)

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.

W	/hat is the organization's primary exempt purpose? ► SEE STATEMENT 6	Program Service
cli or	Il organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) reganizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
а	LEGAL -PROVIDING LEGAL PRESENTATION IN CASES INVOLVING ISSUES OF CIVIL LIBERTIES AND CONSTITUTIONAL RIGHTS - PRESENTATION RANGING FROM ADMINISTRATIVE HEARINGS TO TRIALS AND APPEALS	
b	(Grants and allocations \$) If this amount includes foreign grants, check here ► □ EDUCATION - EDUCATING THE PUBLIC AS TO CIVIL LIBERTIES AND CONSTITUTIONAL RIGHTS BY DISSEMINATION OF LITERATURE, ETC.	25,132,628.
С	(Grants and allocations \$) If this amount includes foreign grants, check here ► □	16,813,604.
d	(Grants and allocations \$) If this amount includes foreign grants, check here	6,754,901.
	(Grants and allocations \$) If this amount includes foreign grants, check here ○ Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ○ □	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	48,701,133.
		Form 990 (2007)

Note: Name: According distributed schedules and amounts within the description column should be for end-of-year amounts only. As Cash - non-interest-bearing	P	art IV	Balance Sheets (See the instructions.)		13	UZIJJIU Pag	je •
### Scash - non-interest-bearing ### 12, 984, 680, 45		te: Whe	ere required, attached schedules and amounts within the description column	(4)	T	(B)	_
45 Cash - non-interest-bearing		sho	uld be for end-of-year amounts only.			End of year	
48 Savings and temporary cash investments 17,226,438.48 30,838,704 47							_
48 Savings and temporary cash investments 17,226,438.48 30,838,704 47		45	Cash - non-interest-bearing	12,984,680.	45	2,233,68	7
47 a Accounts receivable b Less: allowance for doubtful accounts 47 b Less: allowance for doubtful accounts 48 a Pledgee receivable b Less: allowance for doubtful accounts 48 a Pledgee receivable b Less: allowance for doubtful accounts 48 a Pledgee receivable b Less: allowance for doubtful accounts 48 a Pledgee receivable 59 a Receivables from current and former officers, directors, frustees, and key employees 50 a Receivables from current and former officers, directors, frustees, and key employees 50 a Receivables from current and former officers, directors, frustees, and key employees 50 a Receivables from current and former officers, directors, frustees, and key employees 50 a Receivables from current and former officers, directors, frustees, and key employees 50 a Receivables from current and former officers, directors, frustees, and key employees 51 a Chier notes and learn seceivable 52 Investments of country frusted securities 53 a Investments - publicly frusted securities 54 a Investments - publicly frusted securities 55 a Investments - publicly frusted securities 55 a Investments - publicly frusted securities 56 Investments - other securities 57 a Land, buildings, and equipment: basis 58 Total assets (must equal line 74). Add lines 51 through 58 59 Total assets (must equal line 74). Add lines 45 through 58 50 Other assets including program-related investments 50 (describs lines 20 through 58 50 Total assets (must equal line 74). Add lines 45 through 58 50 Total assets (must equal line 74). Add lines 45 through 58 50 Total payable and accrued expenses 51 Total assets (must equal line 73 and 74. 51 Total assets (must equal line 73 and 74. 52 Total assets (must equal line 73 and 74. 53 Total assets (must equal line 73 and 74. 54 Total classets (must equal line 73 and 74. 55 Total assets (must equal line 73 and 74. 56 Total liabilities. Add lines 60 through 65 57 Total assets (must equal line 73 and 74. 58 Total assets (must equal line 73 and 74. 59 Permanently restricted 50 Total expension of the follow S		46	Savings and temporary cash investments	17,226,438.	46		
b Less: allowance for doubtful accounts			(M)		Na:		_
## 48 a Pledges receivable ## 15,895,966 . ## Less: allowance for doubtful accounts ## 15,895,966 . ## Grants receivable ## 15,895,966 . ## Grants receivable ## 15,895,966 . ## Grants receivable ## 15,895,966 . ## 15,699,660 . ## 15,895,966 . ## 15,895,		47 a	Accounts receivable				
b Less: allowance for doubtful accounts		b	Less: allowance for doubtful accounts 47b		47c		
b Less: allowance for doubtful accounts		52		No.			
So a Receivables from current and former officers, directors, trustees, and key employees Receivables from current and former officers, directors, trustees, and key employees Receivables from other disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958 for a 1,072,067. So Prepald expenses and deferred charges STMT 1.2		48 a	Pledges receivable 48a 15,895,966		1/2		
Section Sec			Less: allowance for doubtful accounts 48b	1,669,660.	48c	15,895,96	6.
Receivables from other disqualified persons (as defined under section 4558(f)(f)) and persons described in section 4958(c)(3)(8) 51a 51b 51b 51b 51c		100000	Pagainships from aureat and (a		49		
B Receivables from other disqualified persons (as defined under section 4956(c)3(B) 51a 51b 5		30 a					
## 4958(f)(1) and persons described in section 4958(c)(3)(8) 51 a Cither notes and loans receivable 51a 51b 51c		l 6	Receivables from other disqualified possess (as defined and and and and and and and and and an		50a		_
51 a Other notes and loans receivable 51a 51b 51b 51c	s	1	4958(f)(1)) and persons described in section 4958(f)(2)(2)(2)				
Steel	set	51 a	Other notes and loans receivable		500		_
S2	As	b	Less: allowance for doubtful accounts 51h	7	N School		
Section Sec			Inventories for sale or use		_		_
State STMT 12		53	Prepaid expenses and deferred charges	929 466.	_	1 072 06	7
b Investments - land, buildings, and equipment: basis 55a		54 a	Investments - publicly-traded securities Cost FMV	223/1001	_	1,072,00	/ •
55 a Investments - land, buildings, and equipment: basis 55a 55b 55c				249,618,183.		244 673 403	2.
b Less: accumulated depreciation 55b 55c		55 a	Investments - land, buildings, and		NEW		-
56 Investments - other 57 a Land, buildings, and equipment: basis 57 a 46,894,460 57 a 11,568,052 32,952,686 57 c 35,326,408 57 a 12,568,052 32,952,686 57 c 35,326,408 57 a 12,588,052 57 a 12,			equipment: basis55a				
56 Investments - other 57 a Land, buildings, and equipment: basis 57 a 46,894,460 57 a 11,568,052 32,952,686 57 c 35,326,408 57 a 12,568,052 32,952,686 57 c 35,326,408 57 a 12,588,052 57 a 12,			26	1	13		
57 a Land, buildings, and equipment: basis 57a 46,894,460 57b 11,568,052 32,952,686 57c 35,326,408 58 Other assets, including program-related investments (describe ► SEE STATEMENT 8 31,9193,234 59 335,204,623 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,234 319,193,2			Less: accumulated depreciation 55b		55c		
b Less: accumulated depreciation STMT 7 67b 11,568,052. 32,952,686. 57c 35,326,408. 58 0ther assets, including program-related investments (describe ► SEE STATEMENT 8) 3,812,121. 58 5,164,389. 59 Total assets (must equal line 74). Add lines 45 through 58 319,193,234. 59 335,204,623. 60 Accounts payable and accrued expenses 3,500,049. 60 3,360,701. 61 Grants payable and accrued expenses 61 Grants payable and accrued expenses 62 Loans from officers, directors, trustees, and key employees 63 Loans from officers, directors, trustees, and key employees 64a Loans from officers, directors, trustees, and key employees 65 Other liabilities (describe ► SEE STATEMENT 11) 36,290,464. 65 44,737,616. 66 Total liabilities. Add lines 60 through 65 SEE STATEMENT 11) 36,290,464. 65 44,737,616. 66 Total liabilities. Add lines 60 through 65 Crypanizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74. 61 Unrestricted 172,188,495. 67 148,840,249. 69 Permanently restricted 172,188,495. 67 148,840,249. 69 Permanently restricted 170 Crapital stock, trust principal, or current funds 171 Paid-in or capital surplus, or land, building, and equipment fund 171 Retained earnings, endowment, accumulated income, or other funds 171 Paid-in or capital surplus, or land, building, and equipment fund 171 Retained earnings, endowment, accumulated income, or other funds 172 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.		25025	Investments - other		56		
SEE STATEMENT 8 3,812,121 58 5,164,389		5/ a		J.			
SEE STATEMENT 8 3,812,121 58 5,164,389				32,952,686.	57c	35,326,408	3.
59 Total assets (must equal line 74). Add lines 45 through 58 319,193,234 59 335,204,623 60 Accounts payable and accrued expenses 3,500,049 60 3,360,701 61 Grants payable 61 62 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 63 64 a Tax-exempt bond liabilities 64a b Mortgages and other notes payable STMT 9 STMT 10 23,630,299 64b 23,198,589 65 Other liabilities. Add lines 60 through 65 SEE STATEMENT 11 36,290,464 65 44,737,616 66 Total liabilities. Add lines 60 through 65 Grants payable STMT 9 STMT 10 23,630,299 64b 23,198,589 67 Total liabilities (describe		30		2 010 101		F 464 004	
60 Accounts payable and accrued expenses 61 Grants payable 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 64 a Tax-exempt bond liabilities 65 Mortgages and other notes payable 66 Total liabilities. Add lines 60 through 65 67 Total liabilities. Add lines 60 through 65 68 Temporarily restricted 69 Permanently restricted 69 Permanently restricted 69 Permanently restricted 60 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) 3 7 3 7 0 4 2 2 2 7 3 2 6 3 , 9 0 7 , 7 1 7 .		59				5,164,389	<u></u>
61 Grants payable 62 Deferred revenue 62 Deferred revenue 63 Loans from officers, directors, trustees, and key employees 63 64a		60	Accounts payable and accrued expenses				
September Sep		61	Grants payable	3,300,043.		3,360,701	
Composition of the composition		62	Deferred revenue		-		_
b Mortgages and other notes payable STMT 9 STMT 10 23,630,299. 64b 23,198,589. 65 Other liabilities (describe SEE STATEMENT 11) 36,290,464. 65 44,737,616. 66 Total liabilities. Add lines 60 through 65 63,420,812. 66 71,296,906. Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. 67 Unrestricted 172,188,495. 67 148,840,249. 68 Temporarily restricted 45,641,707. 68 76,963,918. Organizations that do not follow SFAS 117, check here and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 71 Paid-in or capital surplus, or land, building, and equipment fund 72 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	ties	63	Loans from officers, directors, trustees, and key employees		-		_
SEE STATEMENT 11 36,290,464.65 44,737,616.	pili	64 a	Tax-exempt bond liabilities				_
SEE STATEMENT 11 36,290,464.65 44,737,616.	Lia	b	Mortgages and other notes payable STMT 9 STMT 10	23,630,299.	_	23,198,589) .
Organizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74. 67 Unrestricted 68 Temporarily restricted 69 Permanently restricted Organizations that do not follow SFAS 117, check here ► and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) 63 , 420 , 812 . 66 71 , 296 , 906 . 71		65	Other liabilities (describe ► SEE STATEMENT 11)	36,290,464.	$\overline{}$	44,737,616	5.
Organizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. 67 Unrestricted 68 Temporarily restricted 69 Permanently restricted Organizations that do not follow SFAS 117, check here and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.		72120 O	SECURE DESCRIPTION OF THE PROPERTY OF THE PROP	W- W			_
67 through 69 and lines 73 and 74. 67 Unrestricted 68 Temporarily restricted 69 Permanently restricted Organizations that do not follow SFAS 117, check here □ and complete lines 70 through 74. 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 72 Retained earnings, endowment, accumulated income, or other funds 73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) 172,188,495,67 45,641,707,68 76,963,918. 37,942,220.69 38,103,550.		66	Total liabilities. Add lines 60 through 65	63,420,812.	66	71,296,906	j.,
Figure 2					And s		
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	es	NESSEE N		450 400 405			
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	anc		Temporarily restricted		_	148,840,249	١.
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	Bala	69	Permanently restricted		_	76,963,918	•
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	nd	Organ	nizations that do not follow SEAS 117, check hore	31,942,220.	69	38,103,550	•
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	Ţ.						
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	Sor				70		
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	set	71	Paid-in or capital surplus, or land, building, and equipment fund		-		_
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	t As	72	Retained earnings, endowment, accumulated income, or other funds				_
(Column (A) must equal line 19 and column (B) must equal line 21) 255,772,422. 73 263,907,717.	Ne.	73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72.				_
			(Column (A) must equal line 19 and column (B) must equal line 21)	255,772,422.	-	263,907.717	, _
		74	Total liabilities and net assets/fund balances. Add lines 66 and 73			335,204,623	-

13-6213516

Page 5

P	Reconciliation of Revenue per Audited Fin	ancial Statements V	Vith Revenue	per R	eturn (S	516 Page See the
a	Total revenue, gains, and other support per audited financial statem	nents			a	68848917
b	Amounts included on line a but not on Part I, line 12:		************************			00040717
1	Net unrealized gains on investments		b1 -21,43	5.547	mar.	
2	Donated services and use of facilities		b2	-		
3	Recoveries of prior year grants		b3			
4	Other (specify): SEE STATEMENT 13	*	b4 -5763	546		
	Add lines b1 through b4				ь	-27,200,193
C	Subtract line b from line a			******		96049110
d	Amounts included on Part I, line 12, but not on line a:		***************************************	*******	388	20043110
1	Investment expenses not included on Part I, line 6b		atl			
2	Other (specify):		d2	-	-	
	Add lines d1 and d2				d	0
е	Total revenue (Fart I, line 12). Add lines c and d					96049110
Pa	rt IV-B Reconciliation of Expenses per Audited Fin	ancial Statements V	With Expenses	ner	Return	90049110
а	Total expenses and losses per audited financial statements			рог		50713622
b	Amounts included on line a but not on Part I, line 17:	***************************************	***************************************		a c	00/13622
1	Donated services and use of facilities	Î	hal.			
2	Prior year adjustments reported on Part I, line 20	10	b2			
3	Losses reported on Part I, line 20		b2	-		
4			b4			
	11		04	_	10000	•
C	Add lines b1 through b4 Subtract line b from line a			******	b	0.
d	Subtract line b from line a Amounts included on Part I, line 17, but not on line a:				c t	0713622.
		The state of the s	aril .			
2	Investment expenses not included on Part I, line 6b Other (specify):		01			
			02			-
e	Add lines d1 and d2 Total expenses (Part Lline 17), Add lines a and d				d	0.
Pa	Total expenses (Part I, line 17). Add lines c and d rt V-A Current Officers, Directors, Trustees, and Ke	y Employage (List as		•	e 6	0713622.
72,000	or key employee at any time during the year even if they we	ere not compensated) (See	cn person wno wa e the instructions l	s an of	ficer, dire	ctor, trustee,
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter		ntributions to yee benefit & deferred asation plans	(E) Expense account and other allowances
				Compa	Settlett plans	ound anonunced
SEI	E STATEMENT 14		0.		0.	0.
					٠.	0.
				-		
-					1	
			1			
					1	
-						
						orm 990 (2007)

_	FOUNDATION, INC.			13-6213	516	F	Page
Pa	rt V-A Current Officers, Directors, Trustees, and K	ey Employees (contin	ued)			Yes	No
/5 a	Enter the total number of officers, directors, and trustees permitted meetings	to vote on organization bu	usiness at board	12			
b	Are any officers, directors, trustees, or key employees listed in Form listed in Schedule A, Part I, or highest compensated professional an Part II-A or II-B, related to each other through family or business related.	n 990, Part V-A, or highest nd other independent cont	compensated emp	oloyees chedule A,			
	the individuals and explains the relationship(s)				75b		X
С	Do any officers, directors, trustees, or key employees listed in Form listed in Schedule A, Part I, or highest compensated professional an Part II-A or II-B, receive compensation from any other organizations, organization? See the instructions for the definition of "related organization".	990, Part V-A, or highest on d other independent cont whether tax exempt or ta	compensated emp ractors listed in Sc xable, that are rela	loyees chedule A, ted to the			
			SEE STATEM	ENT 15	75c	X	
ч	If "Yes," attach a statement that includes the information described	in the instructions.					750
Pai	Does the organization have a written conflict of interest policy? TV-B Former Officers, Directors, Trustees, and Ke			***************************************	75d	X	
	Benefits (If any former officer, director, trustee, or key er the year, list that person below and enter the amount of co	mplovee received compen	sation or other bed	nefite (describe	d bolo	and do	ring
			(C) Compensation	(D) Contributions	to (E) Expe	
	(A) Name and address NONE	(B) Loans and Advances	(if not paid, enter -0-)	employee benefi plans & deferred compensation plan	i i uc	ccount er allow	and
					_		
					1		
Daw							
Part	1 The months of				1	Yes	No
6	Did the organization make a change in its activities or methods of cor	nducting activities? If "Yes	," attach a detaile	t		1	
	statement of each change				76		X
7	were any changes made in the organizing or governing documents b	ut not reported to the IRS	?		77		X
	r "Yes," attach a conformed copy of the changes.			8	TOTAL B	WEV.	Section 1
oa I	Did the organization have unrelated business gross income of \$1,000	or more during the year c	overed by this retu	ım?	78a	X	- NOTES
DI	f "Yes," has it filed a tax return on Form 990-T for this year?				78b	Х	
9 \	was there a liquidation, dissolution, termination, or substantial contra	ction during the year? If "	Yes." attach a stat	ement	79		X
U a I	is the organization related (other than by association with a statewide	or nationwide organization	n) through commo	in 2			
r	membership, governing bodies, trustees, officers, etc., to any other ex	xempt or nonexempt organ	nization?		80a	Х	- suspect
D §	res, enter the name of the organization AMERICAN CIV	/IL LIBERTIES	UNION, IN	VC.	170 B	909	100
1	inter direct and indirect political	and check whether it is	exempt or	nonexempt			
· а (6 Ъ Г	Enter direct and indirect political expenditures. (See line 81 instruction	ns.) [81a	0.			
U L	Did the organization file Form 1120-POL for this year?				81b		X
					Form 9	90 (2	007)

Pa	art VI Other Information (continued)		Yes	No				
82	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?	82a		x				
ı	If "Yes," you may indicate the value of these items here. Do not include this			WSU TE				
	amount as revenue in Part I or as an expense in Part II.							
	(See instructions in Part III.) 82b N/A	三克斯尔	Sec. 2					
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?							
84 :	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X				
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not	7.50	佐田	11274				
	tax deductible?	84b						
85 a	a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? N/A	85a						
	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.	3200		30				
(000000000000000000000000000000000000000							
(
6		314						
f	27/13			S 18 7				
ç	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g						
ı	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							
t	Gross receipts, included on line 12, for public use of club facilities							
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A							
t	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 a	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?		0.00					
	If "Yes," complete Part IX	88a	Х					
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of							
	section 512(b)(13)? If "Yes," complete Part XI	88b		X				
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:			70000				
	section 4911 ▶ 0 • ; section 4912 ▶ 0 • ; section 4955 ▶ 0 •							
b	17/7 - 19 Section Fig. 11. Control of the Control o	200						
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?	TANK.	接接	5466				
Œ	If "Yes," attach a statement explaining each transaction	89b	929573	_X_				
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under		17/63					
3	sections 4912, 4955, and 4958							
	Enter: Amount of tax on line 89c, above, reimbursed by the organization	27,380	2033I	A STATE OF				
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X				
I	b and the second of the second	89f	560506	X				
y	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization,	HI300)	2620	22 50 50 50 50 50 50 50 50 50 50 50 50 50				
۵۸ ۵	or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		X				
	90 a List the states with which a copy of this return is filed SEE STATEMENT 16							
	Number of employees employed in the pay period that includes March 12, 2007 The books are in care of ► SAM CHUKWUEZE Telephone no. ► 212-54	0 0		232				
914	107							
h		.000	Yes	No				
U	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)?							
	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.	0.0		35%				
	and interpolar Accounts.	Energy	990 (20071				
		1 01111	9 9U (LUU/)				

Part VI Other Information (continued)				1	Vac Na
c At any time during the calendar year, did the org	anization maint	ain an office outside o	of the Ur	nited States?	91c X
If "Yes," enter the name of the foreign country	► N	I/A			
92 Section 4947(a)(1) nonexempt charitable trusts fi	ling Form 990 ir	lieu of Form 1041- C	heck he	ere	
and enter the amount of tax-exempt interest rece	eived or accrued	during the tax year		▶ 92	N/A
Part VII Analysis of Income-Producing	Activities (S	ee the instructions.)			11/ 11
Note: Enter gross amounts unless otherwise		d business income	Exclud	led by section 512, 513, or 514	(F)
indicated.	(A) Business	(B)	(C) Exclu-	(D)	(E) Related or exempt
93 Program service revenue:	code	Amount	sion	Amount	function income
a LEGAL EXPENSES AWARDED,					
b NET					2,201,242.
c OTHER INCOME					32,113.
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	1,427,941.	
96 Dividends and interest from securities			14	9,434,769.	
97 Net rental income or (loss) from real estate:	501100	0.000	\$100 mg		
a debt-financed property	531120	-1,545.			
b not debt-financed property	 		16	-2,325.	
98 Net rental income or (loss) from personal property99 Other investment income					
100 Gain or (loss) from sales of assets					
other than inventory	1 1		10	C 504 500	
101 Net income or (loss) from special events			18	6,594,589.	
102 Gross profit or (loss) from sales of inventory	-				
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))	SOMETRIE	-1,545.	17.00	17,454,974.	2,233,355.
105 Total (add line 104, columns (B), (D), and (E)) Note: Line 105 plus line 1e. Part I, should equal the amo					19,686,784.
equal tile allo	uni on line 12, 1	~aπ ı.			
Part VIII Relationship of Activities to the	Accomplish	nment of Exempt	t Purp	oses (See the instructio	ns.)
Line No. Explain how each activity for which income is repo	orted in column (E) of Part VII contributed	importar	ntly to the accomplishment o	f the organization's
exempt purposes (other than by providing funds f	or such purposes).			
DEE STATEMENT 17					
Part IX Information Regarding Taxable	Subsidiaries	and Disregarde	d Ent	itios (O	
(B)		(C)	u Liit	(D)	s.)
partnership, or disregarded entity ownership interes	st N	ature of activities		Total income	End-of-year
915 15TH STREET, LLC	%		-		assefs
- 915 15TH STREET	%		_		
NW, WASHINGTON, DC	%		_		
20005 - 13-6213516 100.00%	REAL ES	TATE COMPAN	1Y	1,251,091.	12,144,113.
Part X Information Regarding Transfers	S Associated	with Personal E	Benefi	t Contracts (See the	nstructions.)
(a) Did the organization, during the year, receive any funds, o	lirectly or indirectly	y, to pay premiums on a	persona	I benefit contract?	Yes X No
(b) Did the organization, during the year, pay premiums, direct	ctly or indirectly, o	on a personal benefit con	tract?		Yes X No
Note: If "Yes" to (b), file Form 8870 and Form 4720 (see	e instructions).				110

Form 990 (2007)

Phone no.	21	2-	2	97	-(140	0	
//				For	m (agn	(20)	77

Preparer's SSN or PTIN (See Gen. Inst. X)

Please Sign

Here

Paid

Preparer's

Use Only

ASSISTANT SECRETARY TREASURER

Date

Signature of officer

Preparer's

signature

yours if self-employ

Firm's name (o

Type or print name and title

MONTCLAIR

J.H.

COHN LLP

1212 AVENUE OF THE AMERICAS NEW YORK, NY 10036 Check if

employed

EIN >

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 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 2007

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

Employer identification number 13 6213516

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.") (b) Title and average hours (a) Name and address of each employee paid per week devoted to (c) Compensation employee benefit plans & deferred account and other allowances more than \$50,000 position compensation KAREN CURRY DIR. COMMUNICATIONS 125 BROAD STREET NEW YORK, NY 10004 35.00 208,436 20,327 0. STEVEN SHAPIRO DIR. LEGAL DEPT 125 BROAD STREET, NEW YORK NY 10004 35.00 266,086 52,562 0. MATTHEW COLES DIR. GAY RIGHTS 125 BROAD STREET, NY 10004 NEW YORK 35.00 176,354. 44,902 0. GERI ROZANSKI DIR OF AFFILIATES 125 BROAD STREET, NEW YORK NY 10004 35.00 206,000 48,637 0. DONNA MCKAY DIR OF DEVELOPMENT 125 BROAD STREET NEW YORK NY 10004 35.00 237,974. 22,445 0. Total number of other employees paid over \$50,000 142 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 J.H. COHN LLP 1212 AVENUE OF THE AMERICAS, NEW YORK, NY 10036 ACCOUNTING 162,000. PATTERSON BELKNAP WEBB & TYLER 1133 AVENUE OF THE AMERICAS, NEW YORK, NY 10036 LEGAL 110,324. KAUFF, MCCLAIN, & MCGUIRE 950 THIRD AVENUE, 14TH FLOOR, NEW YORK, NY 10022 LEGAL 103,703. Total number of others receiving over \$50,000 for professional services 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 BELDEN RUSSONELLO & STEWART PUBLIC EDUCATION 1320 19TH ST., NW SUITE 700, WASHINGTON, 20036RESEARCH DC 605,793. ZERO CHAOS 420 S. ORANGE AVENUE ORLANDO, FL 32801 CONSULTANTS 595,250. PRISM PUBLIC AFFAIRS 1399 NEW YORK AVENUE, NW SUITE, WASHINGTON DC 2PUBLIC EDUCATION 396,870. MESIROW FINANCIAL PROFESSIONAL 321 N. CLARK STREET, CHICAGO, IL 60654 SERVICES 353,975. COMMUNITY COUNSELLING SERVICE CAMPAIGN 461 5TH AVENUE, NEW YORK, NY 10017 CONSULTING 349,060. Total number of other contractors receiving over \$50,000 for other services 13

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ. 723101/12-27-07

-	15-02	roor	. O .	aye z
	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 \$ \$ 725,510. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		x	
2	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. During the year, has the organization, either directly or indirectly engaged in any of the following acts with any orbits at the following acts with a statement or the following			
	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?	2a		X
	c Furnishing of goods, services, or facilities?	2b		X
	e Transfer of any part of its income or assets?	2d 2e		X
9	the organization determines that recipients qualify to receive payments.) SEE STATEMENT 18	3a	х	
1	b Did the organization have a section 403(b) annuity plan for its employees? c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space.	3b		X
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3c 3d		X
4 6	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
	b Did the organization make any taxable distributions under section 4966? C Did the organization make a distribution to a donor, donor advisor, or related person? N/A	4b 4c		
6	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/2	
ı	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts.			0.
8	g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			0.

	t IV	Reason for Non-Private Foundation			ons.)					
5 6 7 8 9	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv).									
11a 11b 12	(Also complete the Support Schedule in Part IV-A.) 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.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization: Type II Type III-Functionally Integrated Type III-Other									
		Provide the following information al	out the supported organ	nizations. (See page 8 of	the instructi	ons.)	-			
		(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) (e) ion Is the supported Amount o es organization listed in support ve the supporting		Amount of			
_					Yes	No				
Fotal .	*********									
14		An organization organized and operated to test for public	c cafety Section 500/av	1) (Con page 9 of the !	truotio N					

Page 4

30%	Note: You may use the	e worksheet in the inst	ecked a box on line 10 ructions for converting), 11, or 12.) Use cast I from the accrual to th	nethod of accounting cash method of acc	ng. ounting.
begi	ndar year (or fiscal year nning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	64626566.	48597852.	49625523.	43159899.	206009840.
16	Membership fees received				10107077.	2000030101
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	2.067 117.	2 360 179.	1,680,961.	1 693 010	7,801,267.
18	Gross income from interest, divid-	2,007,117.	2,300,173.	1,000,001.	1,093,010.	7,001,207.
	ends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975		7,060,997.	6,738,213.	4,548,676.	27,805,224.
19	Net income from unrelated business					
	activities not included in line 18					
20	lax 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					
23	Total of lines 15 through 22	76151021.	58019028.	58044697.	49401585.	241616331.
24	Line 23 minus line 17	74083904.	55658849.	56363736.	47708575.	233815064.
25	Enter 1% of line 23	761,510.	580,190.	580,447.	494,016.	
26	Organizations described on lines 10) or 11; a Enter 2% of a	mount in column (e), lin	e 24	▶ 26a	4,676,301.
b	Prepare a list for your records to sho	w the name of and amour	nt contributed by each pe	rson (other than a govern	menta!	
	unit or publicly supported organization					
	Do not file this list with your return.	Enter the total of all these	e excess amounts		▶ 26b	91507884.
C	Total support for section 509(a)(1) to	est: Enter line 24, column	(e)		▶ 26c	233815064.
d	Add: Amounts from column (e) for lin	nes: 18 <u>27,8</u> 0	05,224. 19			
		22	26b	91,507,88	4. ▶ 26d	119313108.
е	Public support (line 26c minus line 2	6d total)			≥ 26e	114501956.
	Public support percentage (line 26e	(numerator) divided by	line 26c (denominator))		26f	48.9712%
27	Organizations described on line 12:	a For amounts included	in lines 15, 16, and 17 th	at were received from a "c	lisqualified person," prep	are a list for your
	records to show the name of, and total such amounts for each year:	al amounts received in each	ch year from, each "disqu	alified person." Do not fil	e this list with your retu	rn. Enter the sum of
	(2006)	•	(0.0	10.41	(0000)	
h	For any amount included in line 17 th	at was received from each	norman (other then "dies	uplified passage!	(2003)	
·	and amount received for each year, th	at was received from the lar	r person (onier mair dist	luanneu persons), prepai	re a list for your records t	o snow the name of,
	described in lines 5 through 11b, as v	na vas moistinais en par	t file this list with your r	nine 20 for the year or (2)	a difference between the li	st organizations
	the larger amount described in (1) or	(2) anter the cum of the	e differences (the evene	eturn. Arter computing th	e dinerence between the	amount received and
	(2006)	(2005)	229079 9111/ 2901191191119 94	o amounts) for each year.	1A \ U	
c	Add: Amounts from column (e) for lin	165* 15		16	(2003)	
_	17	20		21	Nor. I	N/A
d	Add: Amounts from column (e) for line 17	20	line 27h total			N/A
e	Public support (line 27c total minus li	ne 27d total)	215 10101		270	N/A
f	Total support for section 509(a)(2) te	st. Enter amount on line 2	3. column (e)	► 271 N	J/A	N/A
g	Public support percentage (line 27e	(numerator) divided by I	ine 271 (denominator))	[[[]	▶ 27g	N/A %
-	Investment income percentage (line	: 18. column (e) (numera	tor) divided by line 27f (denominator\\	27g	N/A %
28 U	nusual Grants: For an organization de-	scribed in line 10, 11, or 1	2 that received any unus	ual grante during 2003 th	rough 2006 propore a lie	t for unus records to
51	now, for each year, the name of the con eturn. Do not include these grants in lir	ntributor, the date and am	ount of the grant, and a t	orief description of the na	ture of the grant. Do not	file this list with your
723131	12-27-07	NC	NE		Schedul	e A (Form 990 or 990-EZ) 2007

Part V Private School Questionnaire (See page 9 of the instructions.)

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

N/A

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing		Yes	No
	instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,	1	100	864
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30	1001140	3-70 m ()
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of	392.0	發酵	
	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		2547154
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		2/4/3		
32	Does the organization maintain the following:	門間		
	Records indicating the racial composition of the student body, faculty, and administrative staff?	. 32a		
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			
	admissions, programs, and scholarships?	. 32c		
a	Copies of all material used by the organization or on its behalf to solicit contributions?	. 32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			Mercal I
		-		1000
33	Doop the complyation discriminate by your in any with	· 10000		15
	Does the organization discriminate by race in any way with respect to:		6220	280 a
a	Students' rights or privileges?	33a		
U	Admissions policies?	33b		
d	Employment of faculty or administrative staff?	33c		
_	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
,	Use of facilities?	33f		
h	Athletic programs?	33g		
"	Other extracurricular activities?	33h		Name of the last
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
				100
34 a	Does the organization receive any financial aid or assistance from a governmental assessing		West !	3
b	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or supposed of	34a		
J	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.		250000	
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,	1000	200	232
	1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation			
	The state of the s	35		

Part VI-A	Lobbying Expenditures by Electing Public Charities	(See page 11 of the instructions.)
	(To be completed ONLY by an eligible organization that filed Form 5768)	3 32 2

Check ▶ a ☐ if the organization belongs to an affiliated group. Check ▶ b ☐	if you chec	ked "a" and "limited contro	ol" 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
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) 37 Total lobbying expenditures to influence a legislative body (direct lobbying) 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures	37	N/A	249,791. 475,719. 725,510. 39,985,122.
 40 Total exempt purpose expenditures (add lines 38 and 39) 41 Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - 	40		40,710,632.
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		1,000,000.
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 42 Grassroots nontaxable amount (enter 25% of line 41) 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	42		250,000.
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.	44		0.

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 13 of the instructions.)

		Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total					
45 Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000					
46 Lobbying ceiling amount (150% of line 45(e))					6,000,000					
47 Total lobbying expenditures	725,510.	838,223.	855,308.	997,225.	3,416,266					
48 Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000					
49 Grassroots ceiling amount (150% of line 48(e))					1,500,000					
50 Grassroots lobbying expenditures	249,791.	62,970.	240,625.	229,484.	782,870					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.) N/A During the year, did the organization attempt to influence national, state or local legislation, including any attempt to Yes No Amount influence public opinion on a legislative matter or referendum, through the use of: a Volunteers b Paid staff or management (Include compensation in expenses reported on lines c through h.) Media advertisements d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means Total lobbying expenditures (Add lines c through h.) If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

12-27-07

Part		garding Transfers To ar zations (See page 14 of the ins		nd Relationships With Noncha	ritable		
51 [er organization described in section			
		section 501(c)(3) organizations) or					
		ganization to a noncharitable exemp		3 most of gamzations.		Yes	No
					51a(i)		X
	(ii) Other assets	V	36		a(ii)		X
b (Other transactions:	(a)					
	(i) Sales or exchanges of asse	ets with a noncharitable exempt orga	anization		b(i)		X
	(ii) Purchases of assets from a	a noncharitable exempt organization			b(ii)		X
(iii) Rental of facilities, equipme	ent, or other assets			b(iii)	X	
(iv) Reimbursement arrangeme	ents			b(iv)		Х
	(v) Loans or loan guarantees				b(v)		X
(VI) Performance of services or	membership or fundraising solicita					X
		mailing lists, other assets, or paid			С	X	
u II	nnde ather accete or conject	e is Yes, complete the following so given by the reporting organization	nedule. Column (b) should	always show the fair market value of the			
9 tı	ansaction or sharing arrangem	nent, show in column (d) the value (of the annals other assets	or services received.			
(a)	(b)	(c)	or are goods, outer assets,	(d)			
Line no	. Amount involved	Name of noncharitable ex	cempt organization	Description of transfers, transactions, and	d sharing ar	rangen	nents
BII	238,850.	NYCLU, INC.		SEE STATEMENT 19			
BIII	445,490.	ACLU, INC.				-	
C	1.	ACLU, INC.					
_				 			
				1			_
-							
						77	
C	ode (other than section 501(c) "Yes," complete the following s	(3)) or in section 527?schedule:		ganizations described in section 501(c) of the	X Yes		No
	(a) Name of org		(b) Type of organization	(c) Description of relations	ship		
ACLU	, INC.		501(C)(4)	SEE STATEMENT 20			
							_
723152 12-27-07							
12-27-07				Schedule A (Fo	rm 990 or 9°	90-EZ)	2007

2007 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 2

990

Current Year Deduction	63,332.	76,265.	2,285,888.	2,425,485.	110				
Current Sec 179	Ca 117 0000000000000000000000000000000000		100 mm	•					
Accumulated Depreciation	570,319.	2,796,328.	5,775,920.	9,142,567.		100)
Basis For Depreciation	710,159.	3,113,163.	43,071,138.	46,894,460.					
Reduction In Basis				.0		,			- 1. - 2.
Bus % Excl	9407070000								
Unadjusted Cost Or Basis	710,159.	3,113,163.	43,071,138.	46,894,460.					
Line No.	16	16	16					15 (19)	
Life	000.	000.	000.				100 (m) 110 (m)		
Method	200000		(g)						
Date Acquired	VARIESSL	VARIESSL	VARIESSL						A skil
Description	1TELEPHONE EQUIPMENT	20FFICE EQUIPMENT	13LAND & BUILDING * TOTAL, 990 PAGE 2	DEPR					
Asset No.	П	CN.	13						728102

(D) - Asset disposed

FORM 990	RENTAL I	NCOME			STATEMENT	1
KIND AND LOCATION OF PROPERTY	-			TIVITY UMBER	GROSS RENTAL INC	OME
RENTAL REAL ESTATE RENTAL REAL ESTATE				1 2	43,6 65,7	
TOTAL TO FORM 990, PART I, LI	NE 6A			-	109,3	40.
FORM 990	RENTAL E	XPENSES			STATEMENT	2
DESCRIPTION		ACTIVITY NUMBER	AMOU	NT	TOTAL	
INTEREST EXPENSE DEPRECIATION OTHER EXPENSES - S	UBTOTAL -	1	10	0,580. 0,188. 4,416.	45,1	0.4
INTEREST EXPENSE DEPRECIATION OTHER EXPENSES	UBTOTAL -	2	1!	5,929. 5,338. 6,759.		
TOTAL TO FORM 990, PART I, LI		2			113,2	
FORM 990 GAIN (LOSS) F	ROM PUBLICI	Y TRADED S	SECURITIE	ES	STATEMENT	3
DESCRIPTION	GROSS SALES PRI	COST		EXPENSE OF SALE	NET GAII OR (LOS	
MARKETABLE SECURITIES	45,106,83	38,512	2,244.	0.	6,594,58	89.
TO FORM 990, PART I, LINE 8	45,106,83	38,512	.,244.	0.	6,594,58	39.

					_
FORM 990	OTHER CHANGES IN	NET ASSETS OR F	UND BALANCES	STATEMENT	4
DESCRIPTION			<u> </u>	AMOUNT	
UNREALIZED G	ION LIABILITY ADJUSTM			-3,217,86 -21,436,54 -2,549,73	17. L3.
TOTAL TO FOR	M 990, PART I, LINE 2	0		-27,200,19	93.
FORM 990		TS AND ALLOCATION OTHERS	ONS	STATEMENT	5
CLASS OF ACT	IVITY/DONEE'S NAME AN	D ADDRESS		AMOUNT	
AMERICAN CIV	IL LIBERTIS UNION FOU	NDATION AFFILIA	res	75,00	00.
TOTAL INCLUD	ED ON FORM 990, PART	II, LINE 22B		75,00	0.
FORM 990	STATEMENT OF ORGANIZA	FION'S PRIMARY I	EXEMPT PURPOSE	STATEMENT	6
EXPLANATION PRESERVE AND STATES CONST	PROMOTE CIVIL RIGHTS	AND LIBERTIES A	AS GUARANTEED BY	THE UNITED	
FORM 990	DEPRECIATION OF ASSI	ETS NOT HELD FOR	RINVESTMENT	STATEMENT	7
DESCRIPTION		COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	
TELEPHONE EQU OFFICE EQUIPM LAND & BUILDI	MENT	710,159. 3,113,163. 43,071,138.	633,651. 2,872,593. 8,061,808.	76,50 240,57 35,009,33	0.
TOTAL TO FORM	1 990, PART IV, LN 57	46,894,460.	11,568,052.	35,326,40	8.

FORM 990 OTH	ER ASSETS		STATEMENT	8
DESCRIPTION	×	BEGINNING OF YEAR	END OF YE	AR
DEFERRED MORTGAGE COST OTHER BENEFICIAL INTERESTS AND TRUST DUE FROM AFFILIATES ASSETS LIMITED OR RESTRICTED AS TO U		549,012. 354,318. 1,670,311. 1,238,480.	680,7 562,0 2,683,1 1,238,4	70. 04.
TOTAL TO FORM 990, PART IV, LINE 58		3,812,121.	5,164,3	89.
FORM 990 MORTGAG	ES PAYABLE		STATEMENT	9
DESCRIPTION			BALANCE DU	€
PRINCIPAL COMMERCIAL FUNDING LLC			4,098,5	39.
TOTAL INCLUDED ON FORM 990, PART IV,	LINE 64B, C	COLUMN B	4,098,5	39.

FORM 990		ОТНІ	ER NOT	ES .	AND LOANS PA	AYABLE	STATEMENT	10
LENDER'S	NAME		TERMS	OF	REPAYMENT			
	CITY INDUST ENT AGENCY C REVENUE		VARIA	BLE		•	e e	
DATE OF NOTE	MATURITY DATE		GINAL AMOUN'		INTEREST RATE			
06/01/97	06/01/12	20,	0,000,0	00.	10.00%			
SECURITY	PROVIDED BY	BORROV	VER	PUI	RPOSE OF LOA	7N		
BONDS AND	LETTER OF (CREDIT			QUISITION, F	ENOVATION AND		
RELATIONS	SHIP OF LEND	ER						
LENDER								
DESCRIPTI	ON OF CONSI	DERATIO	N			FMV OF CONSIDERATION	BALANCE DU	E
IRREVOCAE	BLE LETTER OF	F CREDI	T			0.	19,100,0	00.
TOTAL INC	LUDED ON FOR	RM 990,	PART	IV,	, LINE 64, C	COLUMN B	19,100,0	00.
FORM 990			ОТНІ	ER I	LIABILITIES		STATEMENT	11
DESCRIPTI	ON					BEGINNING OF YEAR	END OF YEA	AR
DUE TO AC TRUST FOR	THE BILL OF ENSION LIABI	RIGHT	s			10,703,279. 5,109,986. 17,302,301. 1,125,354. 2,049,544.	12,406,4 7,027,7 19,109,7 3,675,00 2,518,5	98. 37. 67.
TOTAL TO	FORM 990, PA	RT IV,	LINE	65		36,290,464.	44,737,6	16.

FORM 990	OTHER SECURITIES		STATEMENT	12
SECURITY DESCRIP	TION	COST/FMV	OTHER SECURITIE	S
CORPORATE AND GOUS TREASURY NOTE MUTUAL FUNDS AGENCY BONDS	VERNMENTMENT BONDS S	FMV FMV FMV FMV	5,125,0 6,743,3 212,518,4 20,286,6	11. 12.
TO FORM 990, LIN	E 54B, COL B		244,673,4	02.
FORM 990	OTHER REVENUE NOT INCLUDED C	N FORM 990	STATEMENT	13
DESCRIPTION			TNUOMA	
·	OF SPLIT INTEREST AGREEMENTS LIABILITY ADJUSTMENT		-3,217,86 -2,549,73	13.
TOTAL TO FORM 99	0, PART IV-A		-5,763,6	46.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, STATEMENT 14 TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
M. CALIEN LEWIS 125 BROAD STREET 18TH 1 NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
MARC O. BEEM 125 BROAD STREET 18TH : NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
MARY ELLEN GALE 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
MICHAEL PHENEGER 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
MILTON ESTES 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
NADINE STROSSEN 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
PREETMOHAN SINGH 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
RICHARD ZACKS 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
ROBERT B. REMAR, ESQ 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
ROSLYN LITMAN 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.
SUSAN N. HERMAN 125 BROAD STREET 18TH I NEW YORK, NY 10004	FLOOR	DIRECTOR 0.00	0.	0.	0.

AMERICAN CIVIL LIBERTIES UNION	FOUNDATIO		13-62	13516
AUNDRE M. HERRON 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	DIRECTOR 0.00	0.	0.	0.
ANTHONY ROMERO 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	CHIEF EXECUTIVE OFFI	CER 0.	0.	0.
ALMA MONTCLAIR 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	ASSISTANT SECRETARY 35.00	TREASURER 0.	0.	0.
DOROTHY M. EHRLICH 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	DEPUTY EXECUTIVE DIF 35.00	RECTOR 0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART	V-A	0.	0.	0.

FORM 990 PART V-A OFFICER COI RELATED ORGAN	STATEMENT		
OFFICER'S NAME ANTHONY ROMERO	COMPENSATION 345,000.	EMPLOYEE BENEFIT PLAN CONTRIBUTION 23,138.	ACCOUNT
NAME OF RELATED ORGANIZATION		EMPLOYER	ID NUMBER
AMERICAN CIVIL LIBERTIES UNION, INC		13-3871360	
RELATIONSHIP BETWEEN ORGANIZATIONS			
RELATED ORGANIZATION			
COMPENSATION DESCRIPTION			
EXECUTIVE DIRECTOR			

		EMPLOYEE BENEFIT PLAN	EXPENSE
OFFICER'S NAME	COMPENSATION	CONTRIBUTION	ACCOUNT
ALMA MONTCLAIR	237,974.	22,314.	0.
NAME OF RELATED ORGANIZATION		EMPLOYER	ID NUMBER
AMERICAN CIVIL LIBERTIES UNION, INC		13-38	371360
RELATIONSHIP BETWEEN ORGANIZATIONS			
RELATED ORGANIZATION			
COMPENSATION DESCRIPTION			
DIRECTOR OF ADMIN/FINANCE			

EMPLOYEE

COMPENSATION

270,000.

BENEFIT PLAN EXPENSE

ACCOUNT

DOROTHY M. EHRLICH

CONTRIBUTION

0.

NAME OF RELATED ORGANIZATION

56,374.

AMERICAN CIVIL LIBERTIES UNION, INC

EMPLOYER ID NUMBER

13-3871360

RELATIONSHIP BETWEEN ORGANIZATIONS

RELATED ORGANIZATION

OFFICER'S NAME

COMPENSATION DESCRIPTION

DEPUTY EXECUTIVE DIRECTOR

FORM 990

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

STATEMENT

16

STATES

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

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT

17

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93A COURT AWARDED LEGAL FEES WHICH CAN ONLY BE EXPENDED TO FINANCE THE COST OF OTHER LITIGATION CASES - THE BASIS FOR THE LEGAL PROGRAM. 93C

INCOME FROM EDUCATIONAL MATERIALS PERTAINING TO CIVIL LIBERTIES

AND CONSTITUTIONAL RIGHTS AN INTEGRAL FUNCTION OF THEEDUCATION PROGRAM

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 18 PART III, LINE 3A

SCHOLARSHIP INFORMATION

CRITERIA: ENTERING AN ACCREDITED COLLEGE OR UNIVERSITY; DEMOSTRATED COMMITMENT TO CIVIL LIBERTIES; CUMULATIVE GPA OF A 3.0; NEED FINANCIAL ASSISTANCE.

PROCESS: WRITE A PERSONAL ESSAY; PROVIDE TWO (2) RECOMMENDATIONS; PROVIDE A WRITTEN STATEMENT OF SUPPORT FROM AFFILIATE; SELECTED BY PANEL OF JUDGES BASED ON CONTRIBUTIONS TO CIVIL LIBERTIES; IMPACT OF CONTRIBUTIONS, ACADEMIC EXCELLENCE; AND FINANCIAL NEED.

SCHEDULE A INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 19 PART VII, LINE 51, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

NYCLU, INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

SHARING OF OFFICE SPACE

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

ACLU, INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS SHARING OF OFFICE SPACE.

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

ACLU, INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

ACLU SHARES CERTAIN EQUIPMENT AND PAID EMPLOYEES BENEFITS. EACH COMPANY PAYS ITS OWN PORTION OF THESE EXPENSES.

SCHEDULE A AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS STATEMENT 20 PART VII, LINE 52, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

ACLU, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

SHARING OF CERTAIN EXPENSES PREDOMINATLY SALARIES AND EMPLOYEE BENEFITS.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

2007, and ending	MAR	31	,20 08

Department of the Treasury Internal Revenue Service

For calendar year 2007, or fiscal year beginning $APR \ 1$, 2 Do not send to the IRS. Keep for your records.

See instructions.

OMB No. 1545-1878

Return ID (20-digit number	N/A		
Name of exempt organization	AMERICAN CIVIL LIBERTIES UN	ION	Employer identification number
	FOUNDATION, INC.		13-6213516
Name and title of officer	ALMA MONTCLAIR ASSISTANT SECRETARY TREASUR	ER	
Part I Type of F	Return and Return Information (Whole Dollars	Only)	
on line 1a, 2a, 3a, 4a, or 5a	n for which you are using this Form 8879-EO and enter , below, and the amount on that line for the return for w licable, blank (do not enter -0-). But, if you entered -0- o n Part I.	which you are filing this form was b	plank, then leave line 1b, 2b, 3b,
1a Form 990 check here	X b Total revenue, if any (Form 990, line 12	2)	1ь 96049110
2a Form 990-EZ check he		., line 9)	2b
3a Form 1120-POL check		: 22)	3b
4a Form 990-PF check he	_ 		
5a Form 8868 check here	b Balance Due (Form 8868, line 3c)		5b
Part II Declarati	on and Signature Authorization of Officer		
institutions involved in the pissues related to the payme	Agent at 1-888-353-4537 no later than 2 business days processing of the electronic payment of taxes to receivent. I have selected a personal identification number (Play's consent to electronic funds withdrawal.	e confidential information necessa	ary to answer inquiries and resolve
X I authorize J. I	I. COHN LLP	to	o enter my PIN 11111
is being filed with enter my PIN on As an officer of th indicated within t	ERO firm name on the organization's tax year 2007 electronically filed report to a state agency(ies) regulating charities as part of the little return's disclosure consent screen. The organization, I will enter my PIN as my signature on the interest of the return that a copy of the return is being filed with a ster my PIN on the return's disclosure consent screen.	RS Fed/State program, I also auth the organization's tax year 2007 el	orize the aforementioned ERO to
Officer's signature		Date	
Part III Certificat	tion and Authentication		
The state of the s	ion and radional out		
ERO's EFIN/PIN. Enter you	ur six-digit EFIN followed by your five-digit self-selected	PIN. 13496222222 do not enter all zeros	
	neric entry is my PIN, which is my signature on the 2007 g this return in accordance with the requirements of Pu		
ERO's signature >		Date >	
	ERO Must Retain This Form Do Not Submit This Form To the IRS		•

LHA For Paperwork Reduction Act Notice, see instructions. 723051 12-01-07

Form **8879-EO** (2007)