** PUBLIC DISCLOSURE COPY **

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2009

OMB No. 1545-0047

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number Please USS INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Address change label or LAW, INC. print or]Name]change type. Doing Business As 52-1818273 Initial Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Specific Termin-126 16TH STREET, N.W. 400 (202)452-8600 Instruc-Amende return City or town, state or country, and ZIP + 4 4.989,478. G Gross receipts \$ Applica-tion WASHINGTON, DC 20036 H(a) Is this a group return pendina F Name and address of principal officer: DOUGLAS RUTZEN for affiliates? Yes X No SAME AS C ABOVE **H(b)** Are all affiliates included? ∫Yes L I Tax-exempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.ICNL.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1992 M State of legal domicile: DE Part I Summary Briefly describe the organization's mission or most significant activities: SEE PART III. LINE Governance Check this box larger if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 9 Activities & Total number of employees (Part V, line 2a) $\overline{17}$ 5 Total number of volunteers (estimate if necessary) 16 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 0. Prior Year **Current Year** 4,591,390. 8 Contributions and grants (Part VIII, line 1h) 4,979,391. Revenue 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 6.499. 4,836. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,000. 5,251. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,989,478. 4,600,889. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 689,854 871,299. 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1.461.698 1,651,456. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 2,007,539 2,108,261. 4,159,091 4,631,016. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 441,798. 358,462. 58 Beginning of Current Year End of Year 7,206,860. 7,751,951. 20 Total assets (Part X, line 16) <u>198,377</u> 21 Total liabilities (Part X, line 26) 385,006. in the second 22 Net assets or fund balances. Subtract line 21 from line 20 7,008,483. 7,366,945. Part II | Signature Block Under penalties experjury, I degrate that I have examine this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Degration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here ĞLAS RUTZEN, PRESÍDENT Type or print name and title Check if Preparer's identifying number (see instructions) Preparer's Paid signature employed > Preparer's Firm's name (or ROSENBERG & FREEDMAN EIN > Use Only yours if self-employed), 4550 MONTGOMERY AVE., SUITE 650 NORTH address, and BETHESDA, MARYLAND 20814-2930 Phone no. \triangleright (301) 951-9090 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

			ONAL CENTER FOR NO	T-FOR-PROFIT		
	990 (2009)	LAW, INC.			<u>52-1818273</u>	Page 2
Par			e Accomplishments		····	·
1	INTERNATION LEGAL ENVIR	TIONAL CENTE AL NOT-FOR-I ONMENT FOR (ER FOR NOT-FOR-PROPROFIT ORGANIZATION FRE	N THAT PROMOTI	ES AN ENABLING	
			ROUND THE WORLD.			
2	the prior Form 990 or 9		t program services during the year v		Yes	X No
3		ease conducting, or ma e changes on Scheduk	ake significant changes in how it cor e O.	nducts, any program servic	es? Yes	X No
4	Section 501(c)(3) and	501(c)(4) organizations	for each of the organization's three l and section 4947(a)(1) trusts are rei revenue, if any, for each program s	quired to report the amoun		٠.
4a	SOCIETY AND ASIA, AFRIC EAST, THE P TECHNICAL A TECHNICAL A	ICNL HAS BE CIVIC PART: A, CENTRAL A ACIFIC, AND SSISTANCE OF	,687,095. including grants of EEN A RESOURCE ON ICIPATION. IN 2009 AND EASTERN EUROPE THE FORMER SOVIET N THE ENABLING ENVINTHE IMPLEMENTATI INITIATIVES, AND	LEGAL ISSUES A , ICNL UNDERTO , LATIN AMERIC UNION. ACTIVIONMENT FOR CON OF LEGISLA	AFFECTING CIVIOOK PROJECTS ICA, THE MIDDLE ITIES INCLUDE CIVIL SOCIETY, TION, RESEARCH	N AND
					 	
4b	(Code:) (Expenses \$	including grants o	of \$) (Revenue \$	
4c	(Code:) (Expenses \$	including grants	of \$) (Revenue \$	
					:	
		· · ·	·			
4d	(Expenses \$		ng grants of \$) (Revenue \$)	
<u>4e</u>	Total program service	ce expenses 🕨 \$	3,687,095.			

932002 02-04-10

Form 990 (2009) LAW, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Х	- 25
7 5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	-4_	Λ	
5	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		_X_
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable	11	X	ri i nariw
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		7 N.40	
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X.	delige:		
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's separate or consolidated infancial statements for the tax year include a roothole that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D. Parts XI, XII. and XIII.	12	x	
194	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12	- 23	
12/	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	45 (1.5 tags (1	Х
14a		14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-7-0		
~	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	<u>`</u>		
	located outside the United States? If "Yes," complete Schedule F, Part III	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	- '`		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	⊢ ''	<u> </u>	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
- 19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	'		
	complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	 	X
	The state of the s		000	(0000)

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Form 990 (2009) LAW, INC.

| Part | V | Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
	the organization report more than \$5,000 or grants and other assistance to governments and organizations in the			
22	United States on Bort IV, polymon (A) line 12 if IIVos II complete Sciencials I. Doute I and II			v
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	00		v
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		Х	
04-	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
248				İ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	040		X
h	Schedule K. If "No", go to line 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b	-	
		240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
		240		_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		х
28		2 8 5		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a	*********	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
_	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
-	If "Yes," complete Schedule R, Part V, line 2	35	x	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
-	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
38			X	1

LAW, INC.

Par	tV Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	2		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7	52.75	H.
	(gambling) winnings to prize winners?	1c_	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a1	<u>7</u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)?	4a	X	
þ	If "Yes," enter the name of the foreign country: ► SEE SCHEDULE O			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.	P#10		
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	Ì		İ
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a	ļ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	. 1	V 121 ··· =1:
7	Organizations that may receive deductible contributions under section 170(c).	1991	[MAN]	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	ļ		
	provided to the payor?			X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1_		37
_	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е		7-		v
	benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
ا س	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			
. y	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098 C as required?			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	75.57		i Gază
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year? N/A	8	100	
9	Sponsoring organizations maintaining donor advised funds.			e Signisi
a	Did the organization make any taxable distributions under section 4966? N/A	9a		1 12/0.20
b	37/7		1	1
10	Section 501(c)(7) organizations. Enter:			
а	37/3		r (daga P) Historia	
b				
11	Section 501(c)(12) organizations. Enter:			
а	NT / N			
b				
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		

Form 990 (2009) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

sect	ion A. Governing Body and Management			•	v.	
.	Enter the number of voting members of the sourceing hads	4-	1	Q	Yes	No
	Enter the number of voting members of the governing body Enter the number of voting members that are independent	1a		9		
	Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship	1b	any other			
2				pull dans	phone at reds	X
^	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the			2		
3	of officers, directors or trustees, or key employees to a management company or other person?		•	3		X
	Did the organization make any significant changes to its organizational documents since the prior Fo				X	- 22
	Did the organization become aware during the year of a material diversion of the organization's asset			••	- 45	X
5 6	Does the organization have members or stockholders?			6		X
	Does the organization have members, stockholders, or other persons who may elect one or more me					
Ia	governing body?			7a		X
h	Are any decisions of the governing body subject to approval by members, stockholders, or other per			···		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken					
Ü	by the following:		<i>y y</i> o			
э	The governing body?			8a	X	0 + 0 + 0 + 0 + 0 + 0 + 0 + 0 + 0 + 0 +
b	Each committee with authority to act on behalf of the governing body?				Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
Ū				9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	•		,		
	TOTAL TOTAL (TIME COCKION D'TOQUOCO MICHIGANICA MOCAL PONOISO TICE TOQUICA MICHIGANICA MICHIANICA MICHIGANICA MICHIANICA M				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	1	Х
	If "Yes," does the organization have written policies and procedures governing the activities of such					
-				10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f			11	Х	
11A		_		:		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that co					
	to conflicts?			12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	' describe			
	in Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approv	al by i	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a			
	taxable entity during the year?			16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	ganiza	tion's			
	exempt status with respect to such arrangements?		*************************	16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE					_
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s only) availa	able for		•
	public inspection. Indicate how you make these available. Check all that apply.				-	
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conflic	ct of interest polic	y, and fin	ancial	
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books	and re	cords of the orga	nization:	- _	
	DARLA MECHAM - (202)452-8600			·		
	1126 16TH STREET, N.W., NO. 400, WASHINGTON, DC	<u> 200</u>	36			
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Form 990 (2009)

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee.

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours			(C Posi	;) tion			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ARTHUR B.C.DRACHE CHAIR	4.00	х		х				500.	0.	0.
BINDU SHARMA VICE CHAIR	4.00	х		X				0.	0.	0.
ROCHELLE KORMAN TREASURER	4.00			Х				0.	0.	0.
W.AUBREY WEBSON SECRETARY	4.00			х				0.	0.	0.
JOHN CLARK DIRECTOR	4.00	-						0.	0.	0.
FILIZ BIKMEN BUGAY DIRECTOR	4.00							0.	0.	0.
LINDSAY DRISCOLL DIRECTOR	4.00							0.	0.	0.
GAVIN ANDERSSON DIRECTOR		X						0.	0.	0.
FELICIANO R. GANTEAUME DIRECTOR	4.00							0.	0.	0.
DOUGLAS RUTZEN PRESIDENT	40.00	42		х				135,074.	0.	28,836.
STEPHAN KLINGELHOFER VICE PRESIDENT	40.00			x				140,230.	0.	26,839.
DARLA MECHAM VP OF FINANCE	40.00			X				81,080.	0.	37,337.
										<u></u>

LAW.	INC.

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	(A)	(B)			(C Posi	-			(D)	(E)	(F)
	Name and title	Average hours	(ci				ı app	iy)	Reportable compensation	Reportable compensation	Estimated amount of
		per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	
	· · · · · · · · · · · · · · · · · · ·										
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			-		_						
	· · · · · · · · · · · · · · · · · · ·			<u> </u>							
	<u> </u>										
-			-	-				-			
	Total	<u> </u>		1	<u> </u>	<u> </u>	Ļ		356,884.		0. 93,012
3 4 5	Did the organization list any former office line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the and related organizations greater than \$1 Did any person listed on line 1a receive o	such individua sum of reportal 50,000? If "Yes r accrue compe	l ole c s," co ensa	omp omp	ens lete from	ation Sch	n an edui y un	d ot e Jar	her compensation from for such individual ted organization for sen	the organization	Yes No 3 X 4 X
Sec	the organization? If "Yes," complete Schention B. Independent Contractors										5 X
1	Complete this table for your five highest of the organization. NONE	compensated ir	ndep	end	ent d	cont	tract	ors 1	that received more than	\$100,000 of com	
	(A) Name and busine	ss address							(B) Description of	services	(C) Compensation
					-						
									l		
					•						

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Form 990 (2009) 52-1818273 Page 9 Part VIII Statement of Revenue (**D)** Revenue (A) (B) (C) Total revenue Unrelated Related or excluded from exempt function business tax under sections 512. revenue revenue 513, or 514 1 a Federated campaigns 1a **b** Membership dues 1b gifts, i Fundraising events d Related organizations 1d Contributions, and other simil 4452876 e Government grants (contributions) 1e f All other contributions, gifts, grants, and 526,515 similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ -4979391 Total. Add lines 1a-1f Business Code Program Service Revenue All other program service revenue Total, Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 4,836. 4,836. Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a MISCELLANEOUS INCOME 900099 5,251 5,251. d All other revenue

5;251

4989478

932009 02-04-10 Total revenue. See instructions.

Total. Add lines 11a-11d

0.

10,087.

52-1818273 Page 10

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	Bb, 9b, and 10b of Part VIII.		ĕxpenses	generăl expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
-	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	871,299.	871,299.		Marin appropriate the second s
4	Benefits paid to or for members		* · = / = * ·		
5	Compensation of current officers, directors,	*			<u> </u>
	trustees, and key employees	449,896.	193,968.	217,278.	38,650.
6	Compensation not included above, to disqualified	<u> </u>			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		•		
7	Other salaries and wages	951,847.	740,519.	152,183.	59,145.
8	Pension plan contributions (include section 401(k)			-	
	and section 403(b) employer contributions)	65,916.	54,243.	7,804.	
9	Other employee benefits	88,541.	67,663.		5,967.
10	Payroli taxes	95,256.	64,647.		
11	Fees for services (non-employees):				
а	Management				
b	Legal	3,411.	1	3,411.	
С	Accounting	33,105.		33,105.	
d	A Landau Company of the Company of t				
е	and the second of the second o				
f	Investment management fees			1	
g	Other	943,983.	925,254.	17,403.	1,326.
12	Advertising and promotion				
13	Office expenses	285,231.	99,551.	185,277.	403.
14	Information technology				
15	Royalties				
16	Occupancy	258,944.	180,436.		
17	Travel	307,028.	279,753.	25,397.	1,878.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	161,946.	138,397.		76.
20	Interest	89.	89.		
21	Payments to affiliates	• ,			
22	Depreciation, depletion, and amortization	u= v			
23	Insurance	38,207.		38,207.	12.199.1.1.1
24	Other expenses. Itemize expenses not covered				
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below.)				
a	OTHER	76,317 <u>.</u>	71,276	4,789.	252.
k					
· c	•				
c	•				
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	<u>4,631,016.</u>	3,687,095	817,284,	126,637
26	Joint costs. Check here 🕨 🔲 if following		·		
٠.	SOP 98-2. Complete this line only if the organization		* .		
	reported in column (B) joint costs from a combined				•
	educational campaign and fundraising solicitation			1	<u> </u>

932010 02-04-10

Form 990 (2009)

Part X | Balance Sheet (A) End of year Beginning of year 82,824. 75,953. Cash - non-interest-bearing 1,052,136. <u>768,046.</u> 2 Savings and temporary cash investments 2 6,192,039. 6,554,425. Pledges and grants receivable, net 3 3 88,340. 7,565. Accounts receivable, net 4 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 668 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 24,750. 23,045 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 0. Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 Investments · program-related. See Part IV, line 11 13 13 14 Intangible assets 14 31,956. Other assets. See Part IV, line 11 57,064. 15 15 7,206,860. 7,751,951. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 198,377. 365,514. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19,492. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities. Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 198,377. 26 385,006. 26 Organizations that follow SFAS 117, check here

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 404,563. 448,509. 27 27 Unrestricted net assets 6,603,920. 6,918,436. 28 Temporarily restricted net assets 28 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32. 7,008,483. 33 <u>7,366,945.</u> Total net assets or fund balances 33 7,206,860. 7,751,951. 34 Total liabilities and net assets/fund balances

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a_		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			Bari.
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	X	
		Form	aan	mana

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open to Public Inspection

Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer identification number

		LAW, II	NC.						52	-1818	273
Part I	Reason t	or Public Cha	rity Status (All organiz	zations mus	st complet	e this par	t.) See inst	ructions.			
The orga			because it is: (For lines								
. 1 🔲	A church, cor	vention of churche	es, or association of chur	ches desci	ribed in se	ction 170	(b)(1)(A)(i)				
2			70(b)(1)(A)(ii). (Attach Sc								
з 🗀			ital service organization		in section	170(b)(1)	(A)(iii).				
4 🔲			operated in conjunction					(b)(1)(A)(iii). Enter the	e hospital	's name,
	city, and state								-		
5	An organization	on operated for the	benefit of a college or u	niversity ov	vned or op	erated by	a governr	nental unit	described	l in	
	section 170	b)(1)(A)(iv). (Comp	lete Part II.)			_			•		
6 🔲	A federal, sta	te, or local governr	nent or governmental uni	it described	in section	n 170(b)(I)(A)(v).				
7 X			ceives a substantial part					r from the	general pu	ıblic desc	ribed in
		b)(1)(A)(vi). (Compl	· ·								
8 🗀	A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)	•					
9 🔲			ceives: (1) more than 33			om contri	butions, m	nembershir	fees, and	l gross red	ceipts from
			unctions - subject to certa								
			taxable income (less sec							_	
	See section	509(a)(2). (Comple	te Part III.)								
10	An organizati	on organized and o	perated exclusively to te	st for publi	ic safety. S	ee sectio	n 509(a)(4	1).			
11 🗔	An organizati	on organized and o	perated exclusively for t	he benefit (of, to perfo	rm the fu	nctions of,	or to carry	out the p	urposes c	of one or
	more publicly	supported organiz	ations described in sect	ion 509(a)(°	1) or sectio	n 509(a)(2	2). See se c	ction 509(a	a)(3). Chec	k the box	that
	describes the	type of supporting	g organization and comp	lete lines 1	1e through	11h.	·			-	
_	a ∐ Type I	b∟	Type II	с 🔛 Тур	e III - Func	tionally in	tegrated		d 🔲 .	Type III - (Other
e 📖	By checking	this box, I certify th	at the organization is no	t controlled	l directly o	indirectly	/ by one oi	r more disc	qualified pe	ersons oth	ner than
	foundation m	anagers and other	than one or more public	ly supporte	d organiza	tions des	cribed in s	ection 509	(a)(1) or se	ection 509	(a)(2).
f	If the organiz	ation received a wr	itten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			_
	supporting o	ganization, check	this box								L_
. g	Since August	: 17, 2006, has the	organization accepted a	ny gift or c	ontribution	from any	of the foll	owing pers	ons?		
			directly controls, either a	_		-					Yes No
	-		supported organization?								<u> </u>
-			on described in (i) above								1
-			a person described in (i)							11g(iii)	
h	Provide the f	ollowing informatio	n about the supported or	rganization	(s).						
·			(iii) Type of					() la	the		
	e of supported	(ii) EIN	organization		organization sted in your	(v) Did yo	u notity the tion in col.	Lorganizatio	ine on in col.		nount of
org	ganization		(described on lines 1-9		document?		r support?	(i) organiz U.S	ed in the	sup	port
		, I	above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No		
		<u> </u>	(occ matraodona))	165	NO	165	INU	165	NO		
] ,				
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Total	•										

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Schedule A (Form 990 or 990 EZ) 2009 LAW, INC.

2-1818273 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 4,682,196. 5,218,952 4,591,390 4,979,391 22,054,844 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 4,591,390 4,979,391 22,054,844. 4,682,196 5,218,952 2 582 915 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 125,776. 21,929,068 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 7 Amounts from line 4 4,591,390 4,979,391 22,054,844. 2,582,915 4,682,196. 5 218 952 Gross income from interest, dividends, payments received on securities loans, rents, royalties 4,836. 6,499. 38,319. 9,171. 13,799. 4.014. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on ... 10 Other income, Do not include gain or loss from the sale of capital .267. 3.000 40,766. assets (Explain in Part IV.) 28.248. 11 Total support. Add lines 7 through 10 22,133,929. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 99.07 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 99.05 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Schedule A (Form 990 or 990-EZ) 2009

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions...

alendar year (or fiscal year beginnin	n in) /-1 2005	/I-) 0006	(-) 0007	(-1) 2000	(-) 2000	(5) Total
1 Gifts, grants, contributions, and		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
membership fees received. (Do		•				
include any "unusual grants.")	· ·		. '			
2 Gross receipts from admission	******					
merchandise sold or services r						
formed, or facilities furnished in				· ·		•
any activity that is related to the organization's tax-exempt purp						
3 Gross receipts from activities t						
are not an unrelated trade or b	í					•
iness under section 513		·		·		
4 Tax revenues levied for the org						
ization's benefit and either paid	- 1			· ·	,	
or expended on its behalf	· ·					
5 The value of services or facilities	es				***	
furnished by a governmental u	I					
the organization without charg	1					-
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2						
3 received from disqualified pe						•
b Amounts included on lines 2 and 3 recei	ived .				•	
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of th amount on line 13 for the year						
c Add lines 7a and 7b						-
8 Public support (Subtract line 7c from li	**************************************	ica finalizitat			aaka tiita	
ection B. Total Support						
alendar year (or fiscal year beginnir	ng in) (a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received securities loans, rents, royaltie	es l					
and income from similar source						
b Unrelated business taxable incom			İ			l
(less section 511 taxes) from busi	inesses					
agazirad aftar luga 00 1076			1			
acquired after June 30, 1975		1			1	
c Add lines 10a and 10b	Isinoss					
c Add lines 10a and 10b 11 Net income from unrelated bu activities not included in line 1	10b,					
c Add lines 10a and 10b 11 Net income from unrelated bu activities not included in line 1 whether or not the business is	10b, s					
c Add lines 10a and 10b 11 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 12 Other income. Do not include or loss from the sale of capita	10b, s gain					
c Add lines 10a and 10b 11 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 12 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.)	gain					
c Add lines 10a and 10b 11 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 12 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, a	gain Il					
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, 8) 4 First five years. If the Form 9	gain and 12.)					_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, add First five years. If the Form 9 check this box and stop here	gain and 12.)					_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, at 4 First five years. If the Form 9 check this box and stop here	gain Il Igand 12.) Igo is for the organization If Public Support F	Percentage				_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, at 10c, 11, at 10c) 4 First five years. If the Form 9 check this box and stop here section C. Computation of 15 Public support percentage for	gain and 12.) 190 is for the organization 1	Percentage divided by line 13,	column (f))		15	_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, a 4 First five years. If the Form 9 check this box and stop here section C. Computation of Public support percentage for the properties of the properties of the properties of the public support percentage for the properties of the properties	gain and 12.) 990 is for the organization f Public Support For 2009 (line 8, column (f) and 2008 Schedule A, Pa	Percentage divided by line 13, art III, line 15	column (f))			_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 12 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, a) 14 First five years. If the Form 9 check this box and stop here section C. Computation of Public support percentage for Section D. Computation of	gain and 12.) 1990 is for the organization 1991 is for the organization 1991 is for the organization 1992 is for the organization 1993 is for the organization 1994 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2008 is for the organization 2009 is for the organization 2008 is for the organ	Percentage divided by line 13, art III, line 15 me Percentage	column (f))		15 16	_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, 8) 4 First five years. If the Form 9 check this box and stop here section C. Computation of Public support percentage for Section D. Computation of Investment income percentage	gain and 12.) 190 is for the organization 1 Public Support For 2009 (line 8, column (f) 1 Investment Incomes 2 ge for 2009 (line 10c, co	Percentage divided by line 13, art III, line 15 me Percentage lumn (f) divided by	column (f))		15 16	_
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, a) 4 First five years. If the Form 9 check this box and stop here ection C. Computation of Public support percentage for Section D. Computation of Investment income percentage Investment income percentage	gain gain gain gand 12.) 190 is for the organization f Public Support For 2009 (line 8, column (f) mm 2008 Schedule A, Pa of Investment Inco ge for 2009 (line 10c, co ge from 2008 Schedule	Percentage I divided by line 13, art III, line 15 IMME Percentage Iumn (f) divided by A, Part III, line 17	column (f))		15 16 17 18	
c Add lines 10a and 10b 1 Net income from unrelated bu activities not included in line 1 whether or not the business is regularly carried on 2 Other income. Do not include or loss from the sale of capita assets (Explain in Part IV.) 3 Total support (Add lines 9, 10c, 11, at 1 su	gain and 12.) 1990 is for the organization of Public Support For 2009 (line 8, column (f) om 2008 Schedule A, Pa of Investment Inco of ge for 2009 (line 10c, co of ge from 2008 Schedule 100) 199. If the organization die	Percentage I divided by line 13, art III, line 15 IMME Percentage Illumn (f) divided by A, Part III, line 17 Id not check the box	column (f)) iine 13, column (f)) c on line 14, and lir	ne 15 is more than 3	15 16 17 18 33 1/3%, and line	17 is not

Schedule A (Form 990 or 990-EZ) 2009

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

Schedule of Contributors

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

I Organization type (check		
Iraanization tuna/check	LAW, INC.	52-1818273
riganization type (one on	cone):	
ilers of:	Section:	
orm 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
orm 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	
		•
contributor. Cor	mplete Parts I and II.	•
Special Rules		
X For a section 50 509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of ton (i) Form 990-EZ, line 1. Complete Parts I and II.	
For a section 50 509(a)(1) and 17 of the amount of the associon 50 aggregate contri	70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of t	the greater of (1) \$5,000 or (2) 2% ntributor, during the year,
For a section 50 509(a)(1) and 17 of the amount of the amount of aggregate contributions for a section 50 contributions for lf this box is che purpose. Do no	70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of ton (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. O1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one coributions of more than \$1,000 for use exclusively for religious, charitable, scientific, litera	ntributor, during the year, ry, or educational purposes, or ntributor, during the year, aggregate to more than \$1,000. sively religious, charitable, etc., se it received nonexclusively

Name of organization
INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer identification number

52-1818273

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$62,007.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$4,180,774.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$500,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there
923452 02-01		0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	is a noncash contribution. 990, 990-EZ, or 990-PF) (2009

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

f the organization answered	"Yes," to F	orm 990, Part IV,	line 5 (Proxy Tax), then
-----------------------------	-------------	-------------------	--------------------------

 Section 501(c)(4), (5), or (6) organiza 	tions: Complete Part III.			
Name of organization INTERNA	TIONAL CENTER FOR	NOT-FOR-PR	OFIT Empl	oyer identification number
LAW, IN	<u>C.</u>	<u> </u>		52-1818273
Part I-A Complete if the org	ganization is exempt unde	r section 501(c) o	or is a section 527 o	rganization.
1 Provide a description of the organization	zation's direct and indirect political	l campaign activities in	Part IV.	
2 Political expenditures				
3 Volunteer hours		******		
	<u>- </u>		•	
Part I-B Complete if the org	ganization is exempt unde	r section 501(c)(3	3).	· .
1 Enter the amount of any excise tax	incurred by the organization unde	r section 4955	▶\$,
2 Enter the amount of any excise tax	incurred by organization manager	s under section 4955		
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a Was a correction made?	·····	*************		Yes No
b If "Yes," describe in Part IV.		4	*	
	ganization is exempt unde			c)(3).
1 Enter the amount directly expended	d by the filing organization for sect	tion 527 exempt functi	on activities >\$	
2 Enter the amount of the filing organ	ization's funds contributed to othe	er organizations for sec	ction 527	
exempt function activities			> \$	
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here an	d on Form 1120-POL,	•	
line 17b			> \$	
4 Did the filing organization file Form	1120-POL for this year?	***************************************		Yes No
5 Enter the names, addresses and er	nployer identification number (EIN) of all section 527 poli	tical organizations to whic	h payments were made.
For each organization listed, enter t	the amount paid from the filing org	janization's funds. Also	enter the amount of polit	ical contributions received
that were promptly and directly del	ivered to a separate political organ	nization, such as a sep	arate segregated fund or a	a political action committee
(PAC). If additional space is needed	i, provide information in Part IV.		T	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's	contributions received and
			funds. If none, enter -0	promptly and directly delivered to a separate
·				political organization.
				If none, enter -0
	·			
				· · ·
				<u></u>
For Privacy Act and Paperwork Reduc			<u> </u>	

932041 02-04-10

LHA

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Schedule C (Form 990 or 990-EZ) 2009	LAW, INC.			52-1	8182 <mark>73 Page 2</mark>
Part II-A Complete if the org		npt under section	າ 501(c)(3) and fil	ed Form 5768	•
(election under sec					
[m - m - m - m - m - m - m - m - m - m -	tion belongs to an affili				
B Check ▶ ☐ if the filing organiza	tion checked box A an	a "limited control" pro	visions apply.	f-A Filling	(L) Affiliated avenue
	ts on Lobbying Expen ditures" means amou			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (ç	grass roots lobbying)			
b Total lobbying expenditures to influence			.,,	12,586.	
c Total lobbying expenditures (add li	ines 1a and 1b)			12,586.	
d Other exempt purpose expenditure	es			4,630,650.	
e Total exempt purpose expenditure	s (add lines 1c and 1d)		4,643,236.	
f Lobbying nontaxable amount. Enter	er the amount from the	following table in both	n columns.	382,162.	
If the amount on line 1e, column (a) o	or (b) is: The lob!	oying nontaxable amo	ount is:		
Not over \$500,000	20% of t	the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.		ung masamalan an ina	
· · · · · · · · · · · · · · · · · · ·	<u> </u>				
g Grassroots nontaxable amount (er				95,541.	
h Subtract line 1g from line 1a. If zer				0.	<u> </u>
i Subtract line 1f from line 1c. If zer				0.	
j If there is an amount other than ze		line 1i, did the organiza	ation file Form 4720	F	
reporting section 4911 tax for this	-			L	Yes No
	4-Year Ave zations that made a s olumns below. See the		n do not have to com		
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period	·	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount		340,812.	357,955.	382,162.	1,080,929.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					1,621,394.
•				40	
c Total lobbying expenditures	<u></u>	24,860.	522.	12,586.	37,968.
d Grassroots nontaxable amount		85,203.	89,489.	95,541.	270,233.
e Grassroots ceiling amount					
(150% of line 2d, column (e))				higuntario Ni	405,350.

Schedule C (Form 990 or 990 EZ) 2009 LAW, INC. 52-18182 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	1				
——————————————————————————————————————	Yes	''	No	Aı	mount
1 During the year, did the filing organization attempt to influence foreign, national, state or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:				i, dar	
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				didi;	
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?		1.			
f Grants to other organizations for lobbying purposes?		<u>.</u>			·
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities? If "Yes," describe in Part IV					
j Total. Add lines 1c through 1i	<u>Mādad</u>				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			di Kari		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(e	c)(5),	or se	ection	
501(c)(6).					
				Yes	No
				-	
Were substantially all (90% or more) dues received nondeductible by members?					
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Formal Part III-A in the prior year?	tion 501(c)(5),	2 3 or se		∍d
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." 	ction 501(Part III-A,	c)(5), line (2 3 or se		ed .
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Full or "Yes."	ction 501(Part III-A,	c)(5), line (3 or so 3 is a		∍d
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Full "Yes." Dues, assessments and similar amounts from members 	ction 501(Part III-A,	c)(5), line (2 3 or so 3 is a		ed .
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). 	ction 501(Part III-A,	c)(5), line (2 3 or se 3 is a		∍d
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). Current year 	ction 501(Part III-A,	c)(5), line :	2 3 or so 3 is a		∍d
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). 	ction 501(Part III-A,	c)(5), line :	2 3 or se 3 is a		∍d
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Fuyes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total 	ction 501(Part III-A,	c)(5), line :	2 3 or se 3 is a 1 2a 2b 2c		ed .
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Fuyes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). Current year Carryover from last year 	ction 501(Part III-A,	c)(5), line :	2 3 or se 3 is a 1 2a 2b 2c		∍d
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 	etion 501(a Part III-A, elitical	c)(5), line :	2 3 or so 3 is a 1 2a 2b 2c 3		ed .
 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and 	excess	c)(5), line :	2 3 or se 3 is a 1 2a 2b 2c		ed .
 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if F"Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 	excess	c)(5), line :	2 3 or so 3 is a 2 2a 2b 2c 3		ed

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public
Inspection

Name of the organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Employer identification number LAW, 52-1818273 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ➤ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sched	dule D (Form 990) 2009 LAW, INC			<u> </u>			<u>818273</u>		ge 2
Parl	t III Organizations Maintaining C	ollections of An	t, Historical [*]	Treasures, c	r Other	Similar Ass	ets (contii	าued)	
3	Using the organization's acquisition, accessic	on, and other records	s, check any of th	ne following that	t are a sig	nificant use of i	ts collection	items	ì
	(check all that apply):								
а	Public exhibition	d	Loan or e	xchange progra	ıms	-			
b.	Scholarly research	. е	Other						
С	Preservation for future generations	4							
4	Provide a description of the organization's co	ollections and explain	how they furthe	r the organization	on's exem	pt purpose in P	art XIV.		
	During the year, did the organization solicit or	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de							
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's	collection?	,,		Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	te if organization	answered "Yes	s" to Form	990, Part IV, lir	ne 9, or		
	reported an amount on Form 990, Par		_						
1a	Is the organization an agent, trustee, custodi	ian or other intermed	iary for contribut	ions or other as	sets not ir	ncluded			
	on Form 990, Part X?						Yes		No
	If "Yes," explain the arrangement in Part XIV						5		
		•	J			.	Amount		
С	Beginning balance	•				1c			
	Additions during the year					1 1 .			
	Distributions during the year					1 1			
f	Ending balance					1 1			
	Did the organization include an amount on Fo						Yes		No
	If "Yes," explain the arrangement in Part XIV.		***************************************						
150 10011 - 1 1	t V Endowment Funds. Complete i		swered "Yes" to	Form 990, Part	IV, line 10) <u>.</u>			
I I I I I I I I I I I I I I I I I I I		(a) Current year	(b) Prior year	(c) Two year	rs back (d) Three years ba	ck (e) Four	years	back
1a	Beginning of year balance								gg of Su
b	Contributions				Obritty sees				10116
c	Net investment earnings, gains, and losses			130 135 137 13 151 151 151 151 151 151 151 151 151					
d	Grants or scholarships					aa gaallaash			Trap.
	Other expenditures for facilities			61 P21 P21 P21 P3					MICH
•	and programs			enson i dina. Entra e l'osta					
f	Administrative expenses			arina kala					
g	End of year balance	l .							
2	Provide the estimated percentage of the year		as:						
a	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
c									
_	Are there endowment funds not in the posse	- ession of the organiz	ation that are he	d and administe	ered for th	e organization			
	bv:					•		Yes	No
	(i) unrelated organizations		•				3a(i)		
							3a(ii)		
b									
4	Describe in Part XIV the intended uses of the	· ·						•	
	rt VI Investments - Land, Buildin			990, Part X, line	10.				
	Description of investment	(a) Cost or o	1	Cost or other sis (other)		cumulated reciation	(d) Boo	k value	e
12	Land		.	· · · · · · · · · · · · · · · · · · ·			:		
,a b									
C									
d				4			:		
_	Other			_					
	al. Add lines 1a through 1e. (Column (d) must		t X, column (B). li	ne 10(c).)		· · · · · · · · · · · · · · · · · · ·			0.
1010	mer and miles to an engage to position (a) multi-	uni		1-7-7 11144141					

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Part VII Investments - Other Securities. Set (a) Description of security or category		<u> </u>	(c) Method of valuation:	
(including name of security)	(b) Book value		Cost or end-of-year market value	
Financial derivatives				
Closely-held equity interests	1 -			
Other				
	·			
			-	
		·		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)		Marketta (114) and Hallon (114)		
Part VIII Investments - Program Related.	See Form 990, Part X, line	13.		
(a) Description of investment type	(b) Book value		(c) Method of valuation:	
(a) bescription of investment type	(b) book value	. (Cost or end-of-year market value	
:			·	
· ·				_
· · · · · · · · · · · · · · · · · · ·	•			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>		a nomina se i subse su proper u se constanta a se c	
Part IX Other Assets. See Form 990, Part X, lin				
(a	a) Description	-	(b) Book v	alue
	· · ·		·	
<u> </u>	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
			•	
	<u> </u>		<u> </u>	
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				· · · · · · · · · · · · · · · · · · ·
				· · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ле 15.)		>	
Part X Other Liabilities. See Form 990, Part >	<u>ле 15.)</u> (, line 25.			
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) ζ, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ле 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) ζ, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) <, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part > 1. (a) Description of liability	ne 15.) (, line 25.	(b) Amount		
Part X Other Liabilities. See Form 990, Part >	ne 15.) (, line 25.	(b) Amount		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X: IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD

(FASB) RELEASED FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES. FOR THE YEAR ENDED DECEMBER 31, 2009, THE CENTER HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10 AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

932055 02-01-10

Schedule F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer identification number

52-1818273

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No.

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

(a) Region	(b) Number of offices	(c) Number of employees or	(d) Activities conducted in region (by type) (i.e., fundraising,	(e) If activity listed in (d) is a program service,	(f) Total expenditures
	in the region	agents in region	program services, grants to recipients located in the region)	describe specific type of service(s) in region	for region
				NGO LEGAL ENABLING	
EUROPE	1	7	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	259,062
RUSSIA AND THE NEWLY				NGO LEGAL ENABLING	
INDEPENDENT STATES	. 7	27	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	1,113,124
. •	,			NGO LEGAL ENABLING	
SOUTH ASIA	1	. 2	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	103,705
		!			•
EAST ASIA AND THE				NGO LEGAL ENABLING	
PACIFIC		7	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	54 110
CENTRAL AMÉRICA AND				NGO LEGAL ENABLING	
THE CARRIBEAN	Ι΄ .	4	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	26,312
		, ,			
MIDDLE EAST AND				NGO LEGAL ENABLING	
NORTH AFRICA		5	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	120 910
21021242 412 212 022	`		A NO GRADA WILLY I GEO	DIVINONIMATE THEFTIELD	120,510
•					
				NGO LEGAL ENABLING	
NORTH AMERICA	(. 3	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	12,243
					·
				NGO LEGAL ENABLING	
SOUTH AMERICA		0 8	PROGRAM SERVICES	ENVIRONMENT INITIATIVES	43,038
•					
•					-
Totals	<u>· </u>	9 67			1.804.174

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

52-1818273

Schedule F (Form 990) 2009

(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance (g) Amount of assistance non-cash Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement 585114. WIRE TRANSFER 10,997.WIRE TRANSFER 119613 WIRE TRANSFER 104825 MIRE TRANSFER (f) Manner of recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 of cash grant (e) Amount the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ASSISTANCE TO NGOS. TO SUPPORT NGO LAW TO SUPPORT NGO LAW TO SUPPORT NGO LAW PROVIDE LEGAL AND (d) Purpose of grant EDUCATIONAL REFORM REFORM AND THE CARRIBEAN REFORM NEWLY INDEPENDENT Use Schedule F-1 (Form 990) if additional space is needed. CENTRAL AMERICA AIDDLE EAST AND RUSSIA AND THE (c) Region NORTH AFRICA SUB-SAHARAN Enter total number of other organizations or entities STATES AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization Part II Q

Schedule F (Form 990) 2009

ဗ

Page 3

52-1818273

Schedule F (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement 28,750, WIRE TRANSFER (c) Number of (d) Amount of recipients cash grant Use Schedule F-1 (Form 990) if additional space is needed. MIDDLE EAST AND (b) Region NORTH AFRICA (a) Type of grant or assistance SMALL GRANT PROGRAM

			· ·
Complete this part to	provide the information re-	nuired in Part Lline 2	and any additional information.

SCHEDULE F, PART I, LINE 2: PAYMENT FOR SMALL GRANTS IS MADE IN TWO OR

MORE DISBURSEMENTS, WITH THE FINAL DISBURSEMENT ISSUED ONCE THE FINAL

REPORT HAS BEEN FILED. THE FORMAT OF THE FINAL REPORT IS DETERMINED BY

THE APPROVED ACTIVITY TO BE SUPPORTED BY THE SMALL GRANT. FOR RESEARCH

GRANTS, THE FINAL REPORT IS THE FINISHED RESEARCH PAPER; FOR GRANTS WHICH

SUPPORT OTHER TYPES OF PROGRAM ACTIVITIES, SUCH AS WORKSHOPS, THE FINAL

REPORT DETAILS THE ACCOMPLISHMENTS AND INCLUDES A FINANCE REPORT

COMPARING ACTUAL COSTS TO THE APPROVED BUDGET.

FOR GRANTS THAT EXCEED THE SMALL GRANT THRESHOLD, THE GRANTEE RECEIVES AN INITIAL ADVANCE, BASED ON THEIR CALCULATED NEEDS FOR THE ADVANCE PERIOD.

THE GRANTEE MUST THEN SUBMIT A REPORT WHICH LIQUIDATES THE ADVANCE AND A REQUEST FOR THE NEXT DISBURSEMENT. FOR SUBSTANTIAL GRANTS, SUCH AS THE RUSSIA PROGRAM, GRANTEES SUBMIT MONTHLY REPORTS; FOR THE HONDURAS PROGRAM, WHICH HAS A LOWER LEVEL OF ACTIVITY, THE GRANTEE SUBMITS

QUARTERLY REPORTS. THE LIQUIDATION REPORTS INCLUDE A COMPARISON OF ACTUAL COSTS TO THE APPROVED BUDGET, WITH COPIES OF SUPPORTING DOCUMENTATION, RECEIPTS, ETC.

SCHEDULE F-1

(Form 990)

Continuation Sheet for Schedule F (Form 990)

➤ Attach to Form 990 to list additional information for Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III.

➤ See instructions for Schedule F (Form 990).

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer identification number

Part I Continuatio	LAW, INC	s per Region	L (Schedule F (Form 990), Part I, line 3	52-181	and the second s
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	4		NGO LEGAL ENABLING ENVIRONMENT INITIATIVES	71,670.
	-				
			·		
Totals •		4			71,670,

932181 02-01-10

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

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. See separate instructions. INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Employer identification number 52-1818273

Schedule J (Form 990) 2009

	LAW, INC.	52	-181827	3	
Pa	rt I Questions Regarding Compensation				
			energy of	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person list				
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these ite			1.3	
	First-class or charter travel Housing allowance or residen	· .			
	Travel for companions Payments for business use o				
	Tax indemnification and gross-up payments Health or social club dues or				
	Discretionary spending account Personal services (e.g., maid,	, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding pa		81.4E		
Ü	reimbursement or provision of all of the expenses described above? If "No," complete Part III to ex		Berti.		BART 3.
2			<u>1b</u>	+	<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by al				
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		2	1	111112
_					
3	Indicate which, if any, of the following the organization uses to establish the compensation of the c	organization's	1 1		
	CEO/Executive Director. Check all that apply.				
	Compensation committee				
	Independent compensation consultant X Compensation survey or students	-	225 B : 1 : 1		
	Form 990 of other organizations X Approval by the board or con	npensation committee	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			100 mm (100 mm)		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the f	filing			
	organization or a related organization:	•			18 38 P. L 18 38 E
a	Receive a severance payment or change-of-control payment?				X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				X
С	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		X X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in P	art III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.				Jil Book
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	compensation			-Nana
	contingent on the revenues of:				
а	The organization?		5a		Х
b	Any related organization?		5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	compensation			
•	contingent on the net earnings of:				
а	The organization?		6a		X
b	A			+ -	X
~	If "Yes" to line 6a or 6b, describe in Part III.	•			23
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fix	ked payments			
•	not described in lines 5 and 6? If "Yes," describe in Part III		7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			+ -	1
•	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		_ v
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described		······	+	X
Ÿ	Regulations section 53.4958-6(c)?	***	_		
	Redulations section 53.4958-bic//		1 0		1

932111 02-02-10

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

52-1818273

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2009

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(i)·(D)	reported in prior Form 990 or Form 990-EZ
	€ :	135,074.			14,500.	14,336.	163,910.	
DOUGLAS KUTZEN		140,230.			14,357.	12,482.	167,069.	
STEPHAN KLINGELHOFER	E							
	(:)							
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury

Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

QMB No. 1545-0047
2009
Open: to: Public
Inspection

Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW, INC.

Employer identification number 52-1818273

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

KAZAKHSTAN, KYRGYZSTAN, TAJIKISTAN, TURKMENISTAN,

UKRAINE, HUNGARY, RUSSIA

FORM 990, PART VI, SECTION A, LINE 4: THE BOARD UNANIMOUSLY APPROVED AN AMENDMENT OF ART. II, SEC. 2 OF THE BYLAWS, MODIFYING TERMS AND ELECTION PROCEDURES FOR ADVISORY MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. THE DRAFT 990 WAS PRESENTED TO THE AUDIT COMMITTEE AND THEN TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY, AT OR ABOUT THE TIME OF
THE BOARD'S ANNUAL MEETING, ICNL STAFF SENDS THE CONFLICT OF INTEREST AND
DISCLOSURE POLICY FORM TO EACH BOARD MEMBER, AS WELL AS TO EACH STAFF
MEMBER. THE FORM CONTAINS ICNL'S POLICY AND ASKS THAT EVERY RECIPIENT
PROVIDE INFORMATION ON ANY ACTIVITIES HE OR SHE IS ENGAGED IN THAT MAY
PRESENT A CONFLICT, OR AN APPEARANCE OF A CONFLICT, WITH ICNL'S PROGRAMS,
POLICIES, OBJECTIVES, OR MISSION. RESPONSES ARE REVIEWED BY STAFF, AND IF
ANY ACTION IS REQUIRED TO ADJUST THE RELATIONSHIP BETWEEN THE EMPLOYEE AND
THE ORGANIZATION OR THE BOARD MEMBER AND THE ORGANIZATION, SUCH ACTION IS
UNDERTAKEN, INITIALLY THROUGH DISCUSSIONS BETWEEN THE STAFF MEMBER AND
PRESIDENT, OR THE BOARD MEMBER AND THE CHAIR, WITH THE FINAL DECISION
ISSUED BY THE PRESIDENT OR CHAIR.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 8322 11 02-03-10

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No. 1545-0047

2009
Open to Public Inspection

Name of the organization

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT LAW. INC.

Employer identification number 52-1818273

FROM A FIRM SPECIALIZING IN THIS INFORMATION. WE ALSO COLLECTED

INFORMATION FROM SEVERAL OTHER PUBLICLY AVAILABLE SOURCES. COMPARABILITY

DATA WAS THEN PRESENTED TO THE BOARD OF DIRECTORS ALONG WITH PROPOSED

SALARY LEVELS AT A MEETING OF THE BOARD OF DIRECTORS. THE DIRECTORS

DELIBERATED AND DECIDED ON COMPENSATION, AND THERE WAS CONTEMPORANEOUS

SUBSTANTIATION OF THE PROCESS.

FORM 990, PART VI, SECTION C, LINE 19: ICNL PROVIDES GOVERNING DOCUMENTS

UPON REQUEST. FINANCIAL STATEMENTS ARE INCLUDED IN ICNL'S ANNUAL REPORT,

WHICH IS PUBLISHED ON ICNL'S WEBSITE, WWW.ICNL.ORG, AND WHICH IS ALSO

AVAILABLE IN HARDCOPY UPON REQUEST. ICNL'S CONFLICT OF INTEREST POLICY IS

ALSO AVAILABLE ON REQUEST.

SCHEDULE R, PART I

PRIMARY ACTIVITY

TO UNDERTAKE RESEARCH AND SERVICES TO PROMOTE AN ENABLING ENVIRONMENT FOR CIVIL SOCIETY AND PUBLIC PARTICIPATION AROUND THE WORLD.

SCHEDULE R, PART II

PRIMARY ACTIVITY

PROMOTES THE STRENGTHENING OF A SUPPORTIVE LEGAL ENVIRONMENT FOR CIVIL

SOCIETY IN EUROPE, WITH A FOCUS ON CENTRAL AND EASTERN EUROPE, BY

DEVELOPING EXPERTISE AND BUILDING CAPACITY IN LEGAL ISSUES AFFECTING

NOT-FOR-PROFIT ORGANIZATIONS AND PUBLIC PARTICIPATION.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

2009 Open to Public Inspection Employer identification number OMB No. 1545-0047 Direct controlling Direct controlling 52-1818273 entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets 80,140 status (if section Public charity 501(c)(3)) **(a)** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. 862,613. FOREIGN ENTITY Total income Exempt Code section ਉ ত্র ▶ See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) CENTER FOR NOT-FOR-PROFIT ELAWARE HUNGARY PROMOTES THE STRENGTHENING ENVIRON, FOR CIVIL SOCIETY ▶ Attach to Form 990. RESEARCH & SERVICES TO OF A SUPPORTIVE LEGAL ENVIRONMENT FOR CIVIL Primary activity Primary activity PROMOTE AN ENABLING 9 INTERNATIONAL INTERNATIONAL CENTER FOR NOT-FOR PROFIT LAW EIN; FORIEGN ENTITY), APACZAI CSERE JANOS U. EUROPEAN CENTER FOR NOT-FOR-PROFIT LAW (NO LLC - 20-5736798, 1126 16TH STREET, NW 1052 LAW, INC. SUITE 400, WASHINGTON, DC 20036 1ST FLOOR, BUDAPEST, HUNGARY Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part II Part

Schedule R (Form 990) 2009

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

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Schedule R (Form 990) 2009

Part III

LAW,

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Page 2

52-1818273

Code V-UB1 General or amount in box managing 20 of Schedule R-1 (Form 1065) Yes No Percentage ownership Schedule R (Form 990) 2009 6 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Ξ Share of end-of-year assets ate allocations? Disproportion-Yes No Ξ Share of total income € Share of end-of-year assets **6** Type of entity (C corp, S corp, or trust) Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ਉ <u>e</u> Legal domicile (state or foreign country) <u>ပ</u> 36 Direct controlling entity Primary activity Legal domicile (state or foreign country) <u>©</u> Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 932162 02-04-10 Part IV

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.) INTERNATIONAL CENTER FOR NOT-FOR-PROFIT Schedule R (Form 990) 2009 LAW, INC.

Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule.		Yes No
Note: Occupate line in any charty to make in a constant of the following transactions with one or more related organizations listed in Parts II-IV?		
Becaint of (1) interest (ii) annuities (iii) royalties or (iv) rent from a control		Ta X
		1b X
		÷
c Giff, grant, or capital contribution from other organization(s)		
d Loans or loan guarantees to or for other organization(s)		
e Loans or loan quarantees by other organization(s)		1e
f Calculate to appear announitability		14 X
		10 ×
g Purchase of assets from other organization(s)		-
h Exchange of assets		
i Lease of facilities, equipment, or other assets to other organization(s)		¥ ;=
i Lease of facilities, equipment, or other assets from other organization(s)		1j X
L Performance of services or membership or fundraising solicitations for other organization(s)		¥
n i communicación de la composición del composición de la composición de la composición de la composición del composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composición de la composició		т Х
		1m X
_		- X
n Sharing of paid employees		
	=	×
o Reimbursement paid to other organization for expenses		Þ
p Reimbursement paid by other organization for expenses		TD A
	-	
a Other transfer of cash or property to other organization(s)		19 X
		1r X
2 If the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ansaction thresholds	
	(4)	
Name of other organization(s)	Transaction	Amount involved
	type (a1)	
(1) RITROPHAN CENTER FOR NOT-FOR-PROFIT LAW	Ţ	58,517.
(2) EUROPEAN CENTER FOR NOT-FOR-PROFIT LAW	Сı	13,547.
(3)		
(4)		
(9)		
37	Sch	Schedule R (Form 990) 2009

INTERNATIONAL CENTER FOR NOT-FOR-PROFIT

Schedule R (Form 990) 2009 LAW, INC.

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

		(3)	5	3	9	(3)	(4)
Name, address, and EIN	Primary activity		Are all partners section 501(c)(3)	$\overline{\Omega}$	٠ ا	Code V-UBI	General or managing
or entity	·	(state or toreign country)	ves No	year assers		of Schedule K-1 (Form 1065)	Yes No
			_				
•							
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				-			
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