SCANNED DEC 1 8 2009

Form **990-EZ** Department of the Treasury

Internal Revenue Service

Open to Public Inspection

OMB No 1545-1150

Short Form
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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

			alendar year, or tax year beginning and ending				
В	Check if applicab Addres change	le Please		ployeri	identification number		
-	Name	ornt or	r	52-2034867			
Ē	lchangi lnitial return	type		E Telephone number			
Ē	Termi	ın- Specific	oles connecticut avenue nw sed sed s	•	362-0030		
Ē		nded tions	0.5 - 4	oup Exe			
	Applica	ation		ımber D			
)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed G Accounting (
			Schedule A (Form 990 or 990-EZ). Other (specific				
1	Websit	te: ▶ <u>S</u> ?	TOPTHEDRUGWAR.ORG H Check ►	ıf t	the organization is not		
<u>J</u>	Organi				Jule B (Form 990, 990-EZ, or 990-PF)		
K	Check	▶	f the organization is not a section 509(a)(3) supporting organization <mark>and</mark> its gross receipts are normally <mark>not</mark> more	than \$2	25,000 A return is not		
			e organization chooses to file a return, be sure to file a complete return				
		es 5b, 6b, a	and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ	<u>▶</u> \$			
P	art I		nue, Expenses, and Changes in Net Assets or Fund Balances (See the instruction	s for Pa			
	1		ions, gifts, grants, and similar amounts received	1	199685.		
	2	-	service revenue including government fees and contracts	2			
	3		hip dues and assessments	3	16		
	4	Investmen		4	16.		
	5a		ount from sale of assets other than inventory t or other basis and sales expenses 5b	-			
	b		t or other basis and sales expenses 5b	5c			
ē	6		vents and activities (complete applicable parts of Schedule G). If any amount is from gaming , check here ▶	36			
enc		•	enue (not including \$				
Revenue	-	reported o					
_	Ь	•	ct expenses other than fundraising expenses 6b	1 1			
	c		ne or (loss) from special events and activities (Subtract line 6b from line 6a)	6c			
	7a		es of inventory, less returns and allowances 7a				
	b		t of goods sold 7b	1			
	C	Gross pro	fit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c			
	8	Other reve	enue (describe ► ADVERTISING)	8	5503.		
	9	Total reve	enue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	205204.		
	10	Grants and	d similar amounts paid (attach schedule)	10			
	11	Benefits p	aid to or for members	11			
enses	12		other compensation, and employee benefits	12	104600.		
ë	13		nal fees and other payments to independent contractors	13	1200.		
Š	14		ry, rent, utilities, and maintenance	14	19041.		
	15		oublications, postage, and shipping enses (describe ► See Statement 1)	15	10457. 94258.		
	16 17		enses. Add lines 10 through 16	16 17	229556.		
_	18		(deficit) for the year (Subtract line 17 from line 9)	18	-24352.		
ets	19		s or fund balances at beginning of year (from line 27, column (A))	''	210021		
\ss			ee with end to vea tigue reperted on prior year's return)	19	62493.		
Net Assets	20		nges in let assets or fund balances (attach explanation)	20			
Z	21		s or tune balances at end of year Combine lines 18 through 20	21	38141.		
P	art II		nce Sheets. If Total assets on Infe25, column (B) are \$2,500,000 or more, file Form 990 instead of Form	990-EZ			
			(See the instructions for Part III) (A) Beginning of year		(B) End of year		
22	Cas	h, savings,	and investments DEN, U1 29864	. 22	7052.		
23	Lan	d and build	dings	23			
24		er assets (d			43868.		
25		al assets	73065		50920.		
26			s (describe ACCOUNTS PAYABLE) 10572		12779.		
27 832	Net 171		fund balances (line 27 of column (B) must agree with line 21) 62 4 9 3	<u>• 27 </u>	38141.		

12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Form 990-EZ (2008) DRCNET FOUNDATION)	0348	6 / Page 2
Part III Statement of Program Service Accomplishme	nts (See the instructions for	Part III)			penses
What is the organization's primary exempt purpose? See Statement	: 4		(Required	for 501(c)(3)
Describe what was achieved in carrying out the organization's exempt purposes. In		escribe the services			ganizations and trusts, optional
provided, the number of persons benefited, or other relevant information for each p			T	or others) (lusts, optional
28 SEE STATEMENT ATTACHED 6	_ 			\top	
			-		
(Create #		-	<u>ارا</u>	8a	81135.
(Grants \$) If this amount includes foreign 29 SEE STATEMENT 7	grants, check here		<u> </u>	<u> </u>	01133.
29 SEE STRIEMENT /					
			<u> </u>		
					67615
(Grants \$) If this amount includes foreign	grants, check here		2	9a	67615.
30 SEE STATEMENT 8					
<u> </u>					
(Grants \$ 6000 •) If this amount includes foreign	grants, check here	<u> </u>	<u> </u>	0a	10217.
31 Other program services (attach schedule) See Statement	5				
(Grants \$) If this amount includes foreign	grants, check here	<u> </u>	3	1a	1125.
32 Total program service expenses (add lines 28a through 31a)				32	160092.
Part IV List of Officers, Directors, Trustees, and Key B	mployees. List each one ex	ven if not compensated (S	See the in:	structions f	or Part IV)
				ributions	
(a) Name and address	(b) Title and average hours per week devoted to	(c) Compensation (If not paid, enter		ployee	(e) Expense account and
(a) Native and address	position	-0)		plans & erred	other allowances
	poomon	",		nsation	other allowanees
DAVID BORDEN, 1623 CONNECTICUT	PRESIDENT AND	TREASURE	₹		
AVENUE, NW 3RD FLOOR, WASHINGTON, DC	28.00	25000.	-	0.	0.
JOEY TRANCHINA, 1623 CONNECTICUT	SECRETARY	25555			•
AVENUE, NW 3RD FLOOR, WASHINGTON, DC	1.00	0.		0.	0.
MARIOR WASKE LEGORY WHOMINGTONY BE	1.00	•			<u> </u>
				ļ	
- 10 - 1					
• • • • • • • • • • • • • • • • • • • •					
		1			
		ļ <u>.</u>			<u> </u>
	_				
				ļ	
					-
	1				
	1				
	 -	+			
	-				
	 - -				
	-{				
	 	-			
	4				
832172					
12-17-08				Form	990-EZ (2008)

2008.04051 DRCNET FOUNDATION

, <u>I</u>	art V Other Information (Note the statement requirements in the instructions for Part VI.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	163	X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not			
00	reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T			
	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy		1	
	tax requirements?	35a	х	l
	o If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions			
	Did the organization file Form 1120-POL for this year?	37b	1	Х
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
	in a prior year and still unpaid at the start of the period covered by this return?	38a]	X
	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations Enter			
	Initiation fees and capital contributions included on line 9			
	O Gross receipts, included on line 9, for public use of club facilities 39b N/A	1		
40	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶ 0 • , section 4912 ▶ 0 • , section 4955 ▶ 0 •			
	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or			
	did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b		X
	Enter amount of tax imposed on organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			
	I Enter amount of tax on line 40c reimbursed by the organization			
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed $ ightharpoonup DC$			
42	The books are in care of ► THE ORGANIZATION Telephone no ► 202-36			
	Located at ► 1623 CONNECTICUT AVE., NW, 3RD FL. WASHINGTON, DC ZIP+4 ► 2	000	9	
-	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		Yes	
	account)?	42b		X
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
1	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	L	X
	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here	37 / 3	•	ш
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
			V	NI-
	Didly and the second and decided of the second and decided and the second and the		Yes	NO
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			v
45	Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be			v
_	completed instead of Form 990-EZ	45	00.57	(2008)

Part	VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations mus	t answer question	s 46-49 and co	mplet	te the	
•	tables for lines 50 and 51.	<u> </u>					
	id the organization engage in direct or indirect political campaign activities on bef	half of or in opposition to c	andidates for public	r		Yes	No
	ffice? If "Yes," complete Schedule C, Part I			-	46		Х
	id the organization engage in lobbying activities? If "Yes," complete Schedule			-	47	Х	
	the organization operating a school as described in section 170(b)(1)(A)(ii)? If		ule E		48	<u> </u>	X
	id the organization make any transfers to an exempt non-charitable related organ	ization?		}-	49a		X
	"Yes," was the related organization(s) a section 527 organization?			L L	49b	L	<u> </u>
	omplete this table for the five highest compensated employees (other than office) If compensation from the organization. If there is none, enter "None."	rs, directors, trustees and	key employees) who	each received m	ore th	an \$10	0,000
J	n compansation from the organization. It there is note, enter note						
	,	\ T . 1 1	4-1-0	(D) Contribution	; .		
	(a) Name and address of each employee paid more) Title and average hours per week devoted to	(c) Compensation	to employee benefit plans &		E) Expe ccount	
	than \$100,000	position		deferred	other allowa		
	NONE	- · ··		compensation			
					}		
Total nu	umber of other employees paid over \$100,000				<u> </u>		
	omplete this table for the five highest compensated independent contractors who	each received more than	\$100,000 of comper	isation from the o	rganı	zation	If there
IS	none, enter "None "						
	NONE			·			
	(a) Name and address of each independent contractor paid more than S	\$100,000	(b) Type of ser	vice (c	Com	pensat	lion
Total nu	umber of other independent contractors each receiving over \$100,000	buyung echadulas and statemen	te and to the best of my	knowledge and hel	of it is	true	
Ci	Under penalties of perjuny I declare that I have examined this return, including accompa correct, and complete preclaration of preparer (other than officer) is based on all information.	ition of which preparer has any	knowledge	11 /16 /0	۵۰, ۱۲ IS (1		
Sign Here	Signature of officer			Date	7_		
	David Borden Procedurat	& Executiv	e precti) C			
	Type or print name and title	4 GAELUUN	Directi	<i>''</i>			
	7 - 7,	" " " " " " " " " " " " " " " " " " " 					
Paid	Preparer's signature Da	ite Che		arer's Identifying Nu	mber (See inst	r)
Prepare Use Onl		1/13/cq emp	oloyed				
JUJ 0111	Firm's name (or yours MICHAEL L. WEISER, P.C.						
	if self-employed). 1201 15th STREET, NW #34	10	Phone			- - - 4	
	address, and ZIP+4 WASHINGTON, DC 20005		no	202-29	\neg	$\overline{}$	$\overline{}$
May the	RS discuss this return with the preparer shown above? See instructions			<u> </u>	Ye		No
				F	orm 9	90-EZ	(2008)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008 Open to Public

Name of the organization

Inspection Employer identification number

			FOUNDATION						52	<u>-2034</u>	<u>867</u>	
Part I	Reason	for Public Char	ity Status (All organia	zations mu	ist complet	te this par	t.) (see ins	tructions)				
The organ	nization is not a	a private foundation	because it is: (Please ch	neck only o	ne organi	zation.)						
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2 🗀	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗔	A hospital or	a cooperative hospi	tal service organization	described	in section	170(b)(1)	(A)(iii). (At	tach Sche	dule H.)			
4 📖	A medical re	search organization	operated in conjunction	with a hos	spital desci	ribed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	e hospital	's nam	ne,
	city, and stat	te:		_								
5 🔛	An organizat	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describe	d In		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6 🖳	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d ın sectio	n 170(b)(1	1)(A)(v).					
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desci	rıbed ı	ın
	section 170	(b)(1)(A)(vi). (Comple	te Part II.)									
8 🔛	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9	An organizat	on that normally rec	eives: (1) more than 33	1/3% of its	s support f	rom contri	butions, n	nembershi	p fees, and	d gross red	elpts	from
	activities rela	ated to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2	2) no more	than 33 1	1/3% of its	support f	rom gross	ınvest	tment
	income and	unrelated business t	axable income (less sec	tion 511 ta	ex) from bu	sinesses a	acquired b	y the orga	ınızatıon af	fter June 3	0, 197	75.
	See section	509(a)(2) . (Complete	the Part III.)									
10 🖳	An organizat	ion organized and or	perated exclusively to te	st for publ	lic safety. S	See sect io	on 509(a)(4	4). (see ins	tructions)			
11 📖	An organizat	ion organized and op	perated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of,	, or to carr	y out the p	ourposes o	f one	or
	more publicly	y supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se e	ction 509(a)(3). Chec	ck the box	that	
			organization and compl	lete lines 1	1e through	11h.						
_	a Type	I b	_l Type II	с 📖 Тур	e III - Func	tionally in	tegrated		d 🗀	Type III - C	Other	
e 🔙	By checking	this box, I certify that	at the organization is not	controlled	d directly o	r indirectly	by one o	r more dis	qualified p	ersons oth	er tha	ın
	foundation n	nanagers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 509	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box									L_
9	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
	(i) A perso	n who directly or ind	lirectly controls, either al	lone or tog	jether with	persons o	described	ın (II) and (ııı) below,		Yes	No
	the gov	erning body of the si	upported organization?							11g(i)		
	(ii) A famıly	member of a persor	n described in (i) above?	•						11g(ii)		
		•	person described in (i)							11g(iii)		
h	Provide the f	ollowing information	about the organizations	the organ	iization sur	oports.						
		,	· · · · ·	т				1				
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) Is organizatio	the	(vii) Am	ount o	f
org	anization		(described on lines 1-9		sted in your document?		r support?	(i) organiz U S	ed in the	supp	port	
			above or IRC section	Yes	No	Yes	No	Yes	No			
			(see instructions))	1.03	110	103		103	 110			
				1								
				-		-	 		 			
		-		 								
					-		-	 				
									-			
Tatal												
Total	Deliver are A = A :	d Danamusst. Dr. de	ction Act Notice, see t	<u>I</u>	l	000	L	Cabadai	1 <u>1</u>	000 00	0 ET	2000
LITA FOR	Privacy Act ar	ia Paderwork Kedu	CUON ACT NOTICE. See t	ne instruc	เนอทธ เอร ห	-orm 990.		ocneaul	e A (Form	220 OL 33	ひ-にん)	2000

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) 2004 **(b)** 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 188966. 200575. 200863. 223734. 814138. include any "unusual grants.") 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 188966 200575. 200863. 223734. 814138. 4 Total. Add lines 1 · 3 5 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) 212338. 601800. 6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 200863 188966 200575 223734 814138. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties 3295. 284 163. 2842. 6. 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 2374. 358. 2732. assets (Explain in Part IV.) 820165. 11 Total support. Add lines 7 through 10 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 73.38 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 % 77.45 15 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f % 16a 33 1/3% support test - 2008. 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 - 2007. 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 - 2008. 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 - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

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

Part III Support Schedule for (Section A. Public Support	<u> </u>			/\-/ (Complete only	/ II you checked the o	OX OII IIIIE 9 OI PAIL
Calendar year (or fiscal year beginning in)	(a) 2004	(h) 2005	(=) 2006	(4) 2007	(a) 2009	/6 Total
• , , , ,	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not				i		
include any "unusual grants.")		 			 	
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-	,					
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						ŀ
the organization without charge						
6 Total. Add lines 1 · 5		<u> </u>		-		
7a Amounts included on lines 1, 2, and				-		
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b				<u> </u>	<u> </u>	
				-	1	
8 Public support (Subtract line 7c from line 6) Section B. Total Support	1	<u>. t</u>		<u> </u>	1	I
	(=) 2004	(b) 2005	(c) 2006	(a) 2007	(e) 2008	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(6) 2006	(d) 2007	(e) 2006	(i) rotai
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses					1	
acquired after June 30, 1975						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is fo	r the organization	's first, second. thi	d, fourth, or fifth to	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here	3			•	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· •
Section C. Computation of Pub	ic Support Pe	ercentage				
15 Public support percentage for 2008 (column (fl)	•	15	
16 Public support percentage from 200		•			16	
Section D. Computation of Inve				• •		
17 Investment income percentage for 20					17	
18 Investment income percentage from		•			18	
19a 33 1/3% support tests - 2008. If the				15 is more than		_
more than 33 1/3%, check this box a						₽
b 33 1/3% support tests - 2007. If the						. —
line 18 is not more than 33 1/3%, ch		stop nere. The orga	anization qualities	as a publicly supp		
20 Private foundation. If the organization				hio hav and :-	otri otiono	-

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

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

tŀ	ne organization answered	"Yes," t	to Form 990, I	Part IV, line 3	3, or Form 990	-EZ, Part VI, I	ine 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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Section	on 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of o	organization			Empl	oyer identification number
		FOUNDATION			52-2034867
Part I-	To be completed b	y all organizations exem	pt under sectior	າ 501(c) and section 52	27 organizations.
	See the instructions for S	schedule C for details.			<u></u>
1 Prov	ide a description of the organi	zation's direct and indirect politic	al campaign activities	s in Part IV.	
2 Politi	cal expenditures			▶\$	
3 Volui	nteer hours				
Part I-	To be completed b	y all organizations exem	nt under section	501(c)(3)	
	See the instructions for S	-	pt under scottor	1001(0)(0).	
1 Ente		incurred by the organization und	der section 4955	▶ \$	
	•	incurred by organization manag		· ·	
	•	in 4955 tax, did it file Form 4720		. •	Yes No
	a correction made?	., , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		Yes No
b If "Ye	es," describe in Part IV.				
Part I-		y all organizations exem	pt under section	n 501(c), except sectio	n 501(c)(3).
	See the instructions for S	schedule C for details.			
1 Ente	r the amount directly expende	d by the filing organization for se	ction 527 exempt fun	ction activities	
2 Ente	r the amount of the filing organ	ization's funds contributed to ot	her organizations for	section 527	
exen	pt function activities			▶ \$	
3 Total	of direct and indirect exempt	function expenditures. Add lines	1 and 2 and enter he	ere and on	
Form	1120-POL, line 17b			▶\$	
4 Did t	he filing organization file <mark>Form</mark>	1120-POL for this year?			Yes No
5 State	the names, addresses and e	mployer identification number (El	N) of all section 527 p	political organizations to which	h payments were made
		if the amount was paid from the			
		separate political organization,	such as a separate se	egregated fund or a political a	action committee (PAC).
lf add	ditional space is needed, provi	de information in Part IV.		<u>-</u>	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0-	contributions received and promptly and directly
				lutius. It florie, effici -0-	delivered to a separate
					political organization
					If none, enter -0-
				-	
				 	
					

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule C (Form 990 or 990-EZ) 2008

832041 12-18-08

Schedule C (Form 990 or 990-EZ) 2008 I				52-2	034867 Page:			
Part il-A To be completed by a (election under section		-		t filed Form 5768	3			
A Check ► ☐ if the filing organization			ledule C for details.					
B Check if the filing organization	-	• '	ovisions apply					
	on Lobbying Exper	nditures		(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influer	ace public opinion (processors lobbying)		6000.				
b Total lobbying expenditures to influer		-						
c Total lobbying expenditures (add line	•	y (direct loop)ing)		6000.				
d Other exempt purpose expenditures	0 14 4110 10,			223556.				
e Total exempt purpose expenditures (add lines 1c and 1d	i)	Ì	229556.				
f Lobbying nontaxable amount. Enter t		•	h columns.	45911.				
If the amount on line 1e, column (a) or (l		bying nontaxable am						
Not over \$500,000	· I	the amount on line 1e.						
Over \$500,000 but not over \$1,000,0	00 \$100,00	0 plus 15% of the exc	ess over \$500,000.					
Over \$1,000,000 but not over \$1,500	,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000.					
Over \$1,500,000 but not over \$17,00	0,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.					
Over \$17,000,000	\$1,000,0	000.						
				11478.				
g Grassroots nontaxable amount (enter	g Grassroots nontaxable amount (enter 25% of line 1f)							
h Subtract line 1g from line 1a. Enter -0	- If line g is more tha	an line a		0.				
i Subtract line 1f from line 1c. Enter -0-	If line f is more than	n line c		0.				
j If there is an amount other than zero	on either line 1h or l	line 1i, did the organiz	ation file Form 4720	-				
reporting section 4911 tax for this ye	ar?				Yes No			
•	ions that made a s		Section 501(h) n do not have to comp through 2f of the inst					
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total			
2a Lobbying non-taxable amount	42627.	35361.	45790.	45911.	169689			
b Lobbying ceiling amount (150% of line 2a, column(e))					254534			
c_Total lobbying expenditures	9500.	6618.	0.	6000.	22118			
d Grassroots non-taxable amount	10657.	8840.	11448.	11478.	42423			
e Grassroots ceiling amount (150% of line 2d, column (e))					63635			
f Grassroots lobbying expenditures	5000.	6000.	0.	6000.	17000			

0. 6000. 17000. Schedule C (Form 990 or 990-EZ) 2008

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2008 DRCNET FOUNDATION 52-2034867 p

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

		(a)	(b))
		Yes	No	Amo	ount
During the year, did the filing organization attempt to influence for	eign, national, state or				
local legislation, including any attempt to influence public opinion	on a legislative matter				
or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses rep	orted on lines 1c through 1i)?				
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, o	- •				
h Rallies, demonstrations, seminars, conventions, speeches, lecture	es, or any other means?				
i Other activities? If "Yes," describe in Part IV					
j Total lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not describ	ed 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 main	agers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form					
Part III-A To be completed by all organizations exen	pt under section 501(c)(4),	section	501(c)(5)	, or sect	ion
501(c)(6). See the instructions for Schedule C for deta	ıls.				
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible	by members?		1		
2 Did the organization make only in-house lobbying expenditures of	\$2,000 or less?		2		
3 Did the organization agree to carryover lobbying and political expenses III-B To be completed by all organizations exen			3		
answered "Yes." See Schedule C instructions for contractions and similar amounts from members	etails.		1		
2 Section 162(e) non-deductible lobbying and political expenditures	(do not include amounts of politi	cal			
expenses for which the section 527(f) tax was paid).					
a Current year			2a		
b Carryover from last year			2b		
c Total			2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of no	ndeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amou	nt on line 3, what portion of the exc	ess			
does the organization agree to carryover to the reasonable estimate	te of nondeductible lobbying and p	olitical			
expenditure next year?			4		
5 Taxable amount of lobbying and political expenditures (line 2c tot	al minus 3 and 4)		5		
Part IV Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line	1; Part I-B, line 4; Part I-C, line 5; an	d Part II-B,	line 1ı. Also	, complete	this pai
for any additional information.					
<u> </u>					
	<u> </u>				

Form 990-EZ	Other Expenses		Statement	1
Description			Amount	
PAYROLL TAXES			838	80.
BANK CHARGES			139	98.
CONFERENCE EXPENSE			132	20.
CONSULTING			593	
CREDIT CARD FEES				14.
DUES AND SUBSCRIPTIONS				10.
FINANCE CHARGES			244	
GRANTS				00.
HEALTH INSURANCE			1101	
INTERNET ACCESS				78.
INSURANCE				71.
TRAVEL			1560	
MEDIA RELATIONS MEETINGS				00. 00.
MEETINGS MEMBER PREMIUMS				49.
PAYROLL ADMINISTRATION			•	49. 10.
TELEPHONE			299	
SCHOLARSHIPS				05.
OFFICE				35.
TRANSLATION SERVICES			521	
UNRELATED BUSINESS INCOME			120	
VIDEO PRODUCTION			1280	
WEB SITE HOSTING				77.
MISCELLANEOUS			23	36.
DEPRECIATION			126	64.
Total to Form 990-EZ, line 16			9425	58.
Form 990-EZ	Other Assets		Statement	2
Description		Beg. of Year	End of Yea	ar
ACCOUNTS RECEIVABLE		40723.	4081	 10 -
Other Depreciable Assets		2478.		58.
Total to Form 990-EZ, line 24		43201.	4386	

FORM 990-	Information Regarding Transfers Associated with Personal Benefit Contracts	Statement			3	
direct	e organization, during the year, receive any funds, by or indirectly, to pay premiums on a personal contract?	[]	Yes	[X]	No
	e organization, during the year, pay premiums, Ly or indirectly, on a personal benefit contract? .	• []	Yes	[X]	No

990-EZ Pg 2

Statement

1

TO EDUCATE THE PUBLIC ON, AND RAISE AWARENESS OF THE IMPACT OF CURRENT DRUG POLICIES; TO PROMOTE DEBATE ON DRUG PROHIBITION AND ALTERNATIVES TO IT; TO PROMOTE POSITIVE REFORMS TO DRUG LAWS AND DRUG POLICIES; TO HELP THE HARMS ASSOCIATED WITH DRUG ABUSE AND DRUG LAWS.

Form 990-EZ	Other Program Services	St	tatement 5
Description		Grants	Expenses
SEE STATEMENT 9		0.	1125.
Total to Form 990-EZ, li	ne 31		1125.

Form 990 EZ	Statement of Program Accomplishments	Statement 6
	Part III	
	i arem	

Explanation

Drug Reform Coordination Network Foundation (DRCNet Foundation) published 49 issues of our acclaimed outline drug policy newsletter, Drug War Chronicle.

Form 990 EZ Statement of Program Accomplishments Statement 7
Part III

Explanation

DRCNet Foundation published the "Speakeasy" daily blog, built our website readership to about 1.5 million people and 2.5 million page views for the year, did work on SWAT raids and collateral consequences of the drug war; as well as other general programmatic work on a day-to-day basis throughout the year.

Form 990 EZ Statement of Program Accomplishments Statement 8

Part III

Explanation

DRCNet Foundation funded grassroots action alerts and related work, produced You Tube video versions of footage from our 2003 Mexico conference; and provided scholarships to financially needy students who lost their college aid because of drug convictions.