SCANNED JAN 2 2 2008

Form **990**

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)

OMB No 1545-0047
2006

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	ror tr	1e 2006 C	aiendar	year, or tax year beginning	May 1	, 2006,	and ending	April 30	
В	Check if	applicable	Please	C Name of organization				D Emplo	yer identification number
	Address	s change	use IRS label or	Global Witness Foundation				94	3399599
_	Name c		print or	Number and street (or PO bo	x if mail is not delivered t	o street add	ress) Room/suite	E Teleph	one number
=	Initial re	•	type. See	268 Bush Street, #2822				() None
=	Final ret		Specific Instruc-	City or town, state or country,	and ZIP + 4			F Accounts	ng method: 🔽 Cash 📄 Accrual
_		ed return	tions.	San Francisco, CA 94104				☐ ot	ther (specify)
_		ion pending	• Sec	ction 501(c)(3) organizations a	nd 4947(a)(1) nonexem	ot charitab			e to section 527 organizations
	77	, p	trus	sts must attach a completed Sc	hedule A (Form 990 or	990-EZ).	H(a) Is this a	group retur	n for affiliates? 🔲 Yes 🗹 No
G	Websit	e: ► N/A					1 ''		per of affiliates ▶
	0				(t)	D c	H(c) Are all a		
<u>.</u>	Organia	zation type	(спеск с	only one) ► 🗾 501(c) () ◀	(Insert no.) 1 4947(a)(1) or 5			t See instructions)
K				organization is not a 509(a)(3) si ore than \$25,000 A return is not re				on covered I	by a group ruling? Yes V No
				e a complete return	equired, but it the organiz	ation choos	~~	xemption N	
_								<u>-</u>	the organization is not required
				s 6b, 8b, 9b, and 10b to line					Form 990, 990-EZ, or 990-PF)
Р	art I	Reven	ue, Ex	penses, and Changes	in Net Assets or	Fund Ba	alances (See ti	he instru	ctions.)
	1	Contribi	utions,	gifts, grants, and similar a	mounts received:			1	
	а	Contribi	utions t	o donor advised funds .		1a			
	b	Direct p	ublic s	upport (not included on lin	e 1a)	1b	214,9	22	
	c	Indirect	public	support (not included on I	ine 1a)	1c			
	d			ontributions (grants) (not in		1d			
	е	Total (ad	dd lines	1a through 1d) (cash \$	214,922 nonca	ısh \$)		214,922
	2	-		e revenue including governn		•		3	
	3								
	4	Interest on savings and temporary cash investments						. 4	
	5	Dividend	ds and	interest from securities .		1 - 1		. 5	
	6a					6a			
				penses		6b			
	1			me or (loss). Subtract line	6b from line 6a .			. <u>6c</u>) 7	
Ĕ	7			ent income (describe	(A) Securities	-TI	(B) Other	<i>,</i>	
Revenue	8a			from sales of assets other		8a	(2) 0		
æ		than inv	=	er basis and sales expenses.		8b		\neg	
	C			attach schedule)		8c			1
	d			s). Combine line 8c, column			······································	8d	
	9	_	•	nd activities (attach schedule)				i 🗀	
	1				of	3		'	
	"			eported on line 1b)		9a			
	b			penses other than fundrag		9b			
	С	Net inco	ome or	(loss) from special events.	Subtract line 9b fr	om line 9	a	9c	
	10a	Gross s	ales of	inventory, less returns and	d allowances	10a			
	b	Less: co	ost of g	joods sold		10b			
	С			oss) from sales of inventory (a		act line 10	b from line 10a	. 10c	
	11			(from Part VII, line 103) .		LREC	JE!VED.	. 11	
_	12			Add lines 1e, 2, 3, 4, 5, 6c,		111		. 12	214,922
Ñ	13			ces (from line 44, column (. טְרָהָ		OSO 14	230,750
inse	14			and general (from line 44, o	column (C)) .	. DEC	2 0 2007 .	O 14 O 15	3,089
Expenses	15		• •	om line 44, column (D)) .		<u></u>	<u> </u>	15 16	
ш	16			ffiliates (attach schedule) . es. Add lines 16 and 44, ce		COU	DEN. UT	- 10 17	233,839
<u>_</u>	+						, , ,	18	(18,917)
set	18			cit) for the year. Subtract				19	48,664
Net Assets	19 20			fund balances at beginning in net assets or fund bala				20	10,004
Ž	21			and balances at end of year				21	29,747

	Do not include amounts reported on lin	е	(A) Total	(B) Program	(C) Management	(D) Fundraising
	6b, 8b, 9b, 10b, or 16 of Part I.		(2) 10121	services	and general	(D) Turidizioning
22a	Grants paid from donor advised funds (attach sch (cash \$ noncash \$					
	If this amount includes foreign grants, check here					
22b	Other grants and allocations (attach sche					
	(cash \$ 230,750 noncash \$)				
	If this amount includes foreign grants, check here	▶ □ 22b	230,750	230,750	1	
23	Specific assistance to individuals (a				, :	
	schedule)		 		-	
24	Benefits paid to or for members (a schedule)					
25a	Compensation of current officers, direct					
	key employees, etc. listed in Part V-A (a	ttach]			
	schedule)	<u>25a</u>				
b	Compensation of former officers, direct key employees, etc. listed in Part V-B (a schedule)	ttach				
_	Compensation and other distributions, not included ab	—				
·	disqualified persons (as defined under section 4958(f)) persons described in section 4958(c)(3)(B) (attach sch	1)) and				<u></u>
26	Salaries and wages of employees not incl					
27	on lines 25a, b, and c	I	 			
	lines 25a, b, and c	27				
28	Employee benefits not included on					
00	25a – 27	· · 	†·· · · · · · · · · · · · · · · · · · ·			
29 30	Payroll taxes					
30 31	Accounting fees	· · —				
32	Legal fees	• • •				
33	Supplies	00				
34	Telephone					
35	Postage and shipping					
36	Occupancy	1 00				
37	Equipment rental and maintenance		ļ			
38	Printing and publications	38	ļ <u>.</u>			
39	Travel	39				
40	Conferences, conventions, and meeting		ļ			
41	Interest		 			
42	Depreciation, depletion, etc. (attach sche		 		···	
43	Other expenses not covered above (item Payment to independent contractors	nize): 43a	979		979	
a	Insurance and miscellaneous office expense		 		2,110	
D						 -
d		40-				
u e		40-	 			
f		404				
g		40-				
44	Total functional expenses. Add lines through 43g. (Organizations comp	22a leting				
	columns (B)-(D), carry these totals to		222 020	220 750	3,089	•
	t Costs. Check ► ☐ if you are following		233,839	230,750	3,009	0

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

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

٧h	at is the organization's primary exempt purpose? ▶ Charitable and educational	Program Service
All o	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
 а	Grants for charitable and educational purposes to other Section 501(c)(3) public charities.	
	•••••••••••••••••••••••••••••••••••••••	
	(Grants and allocations \$ 230,750) If this amount includes foreign grants, check here ▶ ☑	230,750
b		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
С		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
d		
_		
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
е	Other program services (attach schedule)	
	(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	
T	Total of Program Service Expenses (should equal line 44, column (B), Program services)	230,750

Pa	irt IV	Balance Sheets (See the instructions.)			
١	lote:		(A) ginning of year		(B) End of year
	45	Cash—non-interest-bearing	48,664	45	29,747
	46	Savings and temporary cash investments		46	
	47a	Accounts receivable			
	ь	Less: allowance for doubtful accounts . 47b		47c	
		-			
		Pledges receivable			
		Less: allowance for doubtful accounts . 48b		48c	
	49	Grants receivable		49	
	50a	Receivables from current and former officers, directors, trustees, and		50a	
	١.	key employees (attach schedule)		50a	
	D	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	E10	Other notes and loans receivable (attach		-	
S	314	schedule)			
Assets	ь	Less: allowance for doubtful accounts . 51b		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	
	54a	Investments—publicly-traded securities ▶ ☐ Cost ☐ FMV		54a	
	b	Investments—other securities (attach schedule) ▶ ☐ Cost ☐ FMV		54b	
	55a	Investments—land, buildings, and			
		equipment: basis			
	b	Less: accumulated depreciation (attach		55.	
		schedule)		55c	
	56 57-	Investments—other (attach schedule)		30	
		Land, buildings, and equipment: basis . 57a Less: accumulated depreciation (attach			
	В	schedule)		57c	
	58	Other assets, including program-related investments		ĺ	
		(describe ▶		58	
	59	Total assets (must equal line 74). Add lines 45 through 58	48,664	59	29,747
	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	
	62	Deferred revenue		62	.
ilities	63	Loans from officers, directors, trustees, and key employees (attach		63	
Ē	640	schedule)		64a	
Liab	l	Tax-exempt bond liabilities (attach schedule)		64b	· ·
	65	Other liabilities (describe ►		65	
		,			
	66	Total liabilities. Add lines 60 through 65	0	66	0
	Orga	anizations that follow SFAS 117, check here ► 🗹 and complete lines			
S		67 through 69 and lines 73 and 74.	40.004		20.747
ğ	67	Unrestricted	48,664	67 68	29,747
<u>a</u>	68	Temporarily restricted		69	
P	69	Permanently restricted		00	
Fund Balances	urga	anizations that do not follow SFAS 117, check here ► □ and complete lines 70 through 74.			
P	70	Capital stock, trust principal, or current funds		70	
ţş	71	Paid-in or capital surplus, or land, building, and equipment fund .		71	
Net Assets	72	Retained earnings, endowment, accumulated income, or other funds		72	
ţ	73	Total net assets or fund balances. Add lines 67 through 69 or lines			
Ř		70 through 72. (Column (A) must equal line 19 and column (B) must	40.00		00 747
	74	equal line 21)	48,664 48,664		29,747 29,747
		i otal nasintios and not associstiana salantes. Aud illes do and fo	40.004	. / 🕶 /	LD. 141

Pa	rt IV-A	Reconciliation of Revenue per Au instructions.)	dited Financial Statem	ents With Rev	enue pe	r Ret	turn (S	See the	
a b		enue, gains, and other support per aud included on line a but not on Part I, Irr				а			
1		alized gains on investments		b1					
2		services and use of facilities		b2					
3		es of prior year grants		b3					
4	Other (sp	ecify):		b4					
		5 b1 through b4 ,			_	ь			
С			· · · · · · · · · · · · · · · · · · ·			c			
d		included on Part I, line 12, but not on							
1		nt expenses not included on Part I, line		d1					
2		pecify):				1			
				d2		l			
	Add lines	s d1 and d2				d			
е	Total rev	venue (Part I, line 12). Add lines c and				е	<u> </u>		
Pa	rt IV-B	Reconciliation of Expenses per A	udited Financial State	ments With Ex	penses	<u>per R</u>	eturn	N/A	
а		enses and losses per audited financial				a			
b		included on line a but not on Part I, lir							
1		services and use of facilities		b1		-			
2	•	r adjustments reported on Part I, line 2		b2 b3		1			
3		eported on Part I, line 20		D3		┨			
4	Other (sp	ecify):		b4					
	Add lines	h4 through h4				ь			
С		s b1 through b4				C	}		
d		included on Part I, line 17, but not on							
1		nt expenses not included on Part I, line		d1					
2		ecify):							
	Add loss	s d1 and d2		d2		d			
е		penses (Part I, line 17). Add lines c and				e	<u> </u>		
Pa		Current Officers, Directors, Trustee					officer.	director, t	rustee.
		or key employee at any time during the y							
		(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	benefit pla	tions to ea ans & defi asation pla	erred	(E) Expense and other all	
See	attached								
	_								
				· · · · · · · · · · · · · · · · · · ·					
								,	
				L	1	_	_		

Pa	TV-A Current Officers, Directors, Trustees, and K	ey Employe	es (continued)			Yes	No
75a	Enter the total number of officers, directors, and trustees p meetings		•	n business at board			
b	Are any officers, directors, trustees, or key employees listed employees listed in Schedule A, Part II, or highest contractors listed in Schedule A, Part II-A or II-B, relationships? If "Yes," attach a statement that identifies the	mpensated pated to	orofessional and other through	other independent family or business	75b		✓
c	c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."						
А	If "Yes," attach a statement that includes the information	described in	the instructions.				,
Par	rt V-B Former Officers, Directors, Trustees, and Key Empofficer, director, trustee, or key employee received coperson below and enter the amount of compensation	ployees That I	Received Comper	nsation or Other Bene escribed below) during	the v	ear. lis	ormei st tha
	(A) Name and address (B) Loans	s and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	accou	Expenint and lowance	other
Par	rt VI Other Information (See the instructions.)		I	· - · · · · · · · · · · · · · · · · · ·	L	Yes	No
76	Did the organization make a change in its activities or medetailed statement of each change			? If "Yes," attach a	76		\ \
77	Were any changes made in the organizing or governing d			the IRS?	77		✓
	If "Yes," attach a conformed copy of the changes.						
	Did the organization have unrelated business gross income this return?				78a		√
	If "Yes," has it filed a tax return on Form 990-T for this ye				78b		✓
79	Was there a liquidation, dissolution, termination, or substate a statement				79		✓
80a	Is the organization related (other than by association with common membership, governing bodies, trustees, offic organization?	cers, etc., to	any other exe	mpt or nonexempt	80a		/
ь	organization?						<u> </u>
	and che	ck whether it	ıs 🗆 exempt o				
81a b	Enter direct and indirect political expenditures. (See line 8 Did the organization file Form 1120-POL for this year? .	31 instructions	s.)		81b		✓

Pai	Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		1
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		1
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b		1
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	85b		
_	received a waiver for proxy tax owed for the prior year.			ĺ
		1		ĺ
d				
e f	Taxable amount of lobbying and political expenditures (line 85d less 85e)			
g		85g		
_				
п	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a	ľ		ĺ
b	Gross receipts, included on line 12, for public use of club facilities	ļ		ĺ
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a	ļ		ĺ
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		√
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b		V
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		✓
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶			
	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶	:		ĺ
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	-	1
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	 	. ✓
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		1
90a	List the states with which a copy of this return is filed ▶ California			
	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)			0
91a	The books are in care of ▶ the organization Telephone no. ▶ ()		None	
	Located at ▶ 212 Jamaica Street, Tiburon, CA ZIP + 4 ▶ 949	20		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		,	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	
	account)?	91b		✓
	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.			

Pá	aq	е	8

Part	Vi Other Information (continued)						Yes	No
92	At any time during the calendar year, did the or If "Yes," enter the name of the foreign country in Section 4947(a)(1) nonexempt charitable trusts that and enter the amount of tax-exempt interest recommendations.	► îling Form 990) in lieu of Form	1041 —Check	here			- □
	VII Analysis of Income-Producing Activ							
	Enter gross amounts unless otherwise		ousiness income		ion 512, 513, or 514		(E)	
indica		(A)	(B)	(C)	(D)		elated opt fun	
93	Program service revenue:	Business code	Amount	Exclusion code	Amount		ncome	
a			 	· · · · · · · · · · · · · · · · · · ·				
b			-	1				
C				-				
d			1	1				
e	NA-d		<u> </u>	 				
f	Medicare/Medicaid payments							
g	Fees and contracts from government agencies		-	+				
94	Membership dues and assessments		·· ·	 				
95	Interest on savings and temporary cash investments							
96	Dividends and interest from securities		+	+				
97	Net rental income or (loss) from real estate:		+					
a	debt-financed property							
b	not debt-financed property		<u> </u>	+				
98	Net rental income or (loss) from personal property		<u> </u>					
99	Other investment income	-						
100	Gain or (loss) from sales of assets other than inventory							
101	Net income or (loss) from special events .							
102	Gross profit or (loss) from sales of inventory			 				
103	Other revenue: a							
b				ļ				
С		ļ		-				
d				_				
e		·	ļ					
104	Subtotal (add columns (B), (D), and (E)) .							
105	Total (add line 104, columns (B), (D), and (E)).							
	Line 105 plus line 1e, Part I, should equal the a			 				
Part								
Line ▼	of the organization's exempt purposes (other				mportantly to the	accor	nplish	ment
	N/A							
							_	
Part			isregarded Enti	ties (See the i	nstructions.)			
		(B) ercentage of ership interest	(C) Nature of a	ctivities	(D) Total income	En	(E) d-of-y assets	ear
N/A		%						
		%						
		%						
		%						
Part	X Information Regarding Transfers Assoc	iated with Per	sonal Benefit Co	ntracts (See ti	he instructions.)			
(a) (b) Not	Did the organization, during the year, receive any funds, directly distributed by the organization, during the year, pay preme: If "Yes" to (b), file Form 8870 and Form 4720	iums, directly	or indirectly, on	•		□ Ye	es 🗸	
						_	000	

Part	Information Regarding is a controlling organization			ntities. Comple	te only if the oi	rganiz	ation
106	Did the reporting organization mathe Code? If "Yes," complete the				n 512(b)(13) of	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descr	(C) iption of insfer	(D Amount of		er
а							
b							
С							
	Totals						
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"				ection	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descr	(C) iption of nsfer	(D Amount of		er
а							
b							
С							
	Totals						
108	Did the organization have a bindi rents, royalties, and annuities des	scribed in question 107 abo	ove?			Yes	No
Pleas Sign Here	Se Under penalties of perjury, I declare that and belief it strue, correct, and complete the supplier of officer	have examined this return, including the Declaration of preparer (other	ng accompanying s	chedules and statemer d on all information of Date	nts, and to the best of which preparer has a 2//4// o 7-	my kno any kno	wledge wledge
Paid	Preparer's signature		Date	Check if self- employed ▶ □	Preparer's SSN or PTIN	(See Gen	Inst X)
Prepar Use O	r Firm's name for vours k			EIN Phone no	>		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

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

Employer identification number

OMB No 1545-0047

2006

Global Witness Foundation			94 ;	3399599
Compensation of the Five Hig (See page 2 of the instructions.				nd Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
				<u> </u>
Total number of other employees paid over \$50,000 .	•		<u> </u>	
Part II-A Compensation of the Five High (See page 2 of the instructions. Li				
(a) Name and address of each independent contract		T	of service	(c) Compensation
None				
Total number of others receiving over \$50,000 for professional services				
Part II-B Compensation of the Five High (List each contractor who perfor firms. If there are none, enter "N	med services other than p	orofessional serv		dividuals or
(a) Name and address of each independent contract	or paid more than \$50,000	(b) Type	of service	(c) Compensation
None				
Total number of other contractors receiving over \$50,000 for other services	-		·	

sche	dule A (Form 990 or 990-EZ) 2006		P	age 2
Pa	t III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$\Bigsim \text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex	1_		√
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property?	2a		✓
b	Lending of money or other extension of credit?	2b		✓
С	Furnishing of goods, services, or facilities?	2c		✓
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		✓
е	Transfer of any part of its income or assets? . Charitable grants	2e	1	
За	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		✓
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		√
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3d		√
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		1
b	Did the organization make any taxable distributions under section 4966?	4b		\
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		✓
d	Enter the total number of donor advised funds owned at the end of the tax year			0

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year .

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year

Рa	t I	Reason for Non-Private	Foundation S	Status (See pages 4	through 7 of	the instruct	tions.)
cer	tıfy	that the organization is not a privat	te foundation bed	ause it is: (Please check	only ONE app	olicable box.)	
5		A church, convention of churches	, or association of	of churches. Section 170	(b)(1)(A)(i).		
6	☐ A school. Section 170(b)(1)(A)(i). (Also complete Part V.)						
7	☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).						
8	☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).						
9	☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶						
10		An organization operated for the be (Also complete the Support Sched		or university owned or op	perated by a go	vernmental un	ıt. Section 170(b)(1)(A)(ıv)
11a	Ø	An organization that normally received 170(b)(1)(A)(vi). (Also complete the			ı governmental	unit or from th	e general public. Section
11b		A community trust. Section 170(b))(1)(A)(vi). (Also co	omplete the Support Sci	hedule in Part	IV-A.)	
12	An organization that normally receives: (1) more than 33%% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33%% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)						
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:						
		Type II	☐ type t	II-Functionally Integrate	ea L	Type III-Othe	er
		Provide the following info	rmation about th	e supported organizati	i ons. (See pag	e 7 of the inst	ructions.)
•		(a) s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organizatio the sup organiz governing o	pported in porting cation's	(e) Amount of support
					Yes	No	
Γota	١.					🕨	
14		An organization organized and op	erated to test for	public safety. Section 5	i09(a)(4). (See i	page 7 of the	instructions.)

	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e)	Total
15	Gifts, grants, and contributions received. (Do	,					
	not include unusual grants. See line 28.).	172,835	106,600	6,020	60,6	00	346,055
16	Membership fees received						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	f					
18	Gross income from interest, dividends amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	5 1 5					
19	Net income from unrelated business activities not included in line 18	3					
20	Tax revenues levied for the organization's benefit and either paid to it or expended or its behalf.						
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	t f					
22	Other income. Attach a schedule. Do no include gain or (loss) from sale of capital assets						
23	Total of lines 15 through 22		106,600	6,020	60,6	.00	346,055
24	Line 23 minus line 17		106,600	6,020	60,6		346,055
25	Enter 1% of line 23		1,066	60		06	0.10,000
26	Organizations described on lines 10 or 1					6a	6,920
b	Prepare a list for your records to show the governmental unit or publicly supported organizations.	name of and amount	contributed by e	ach person (oth	er than a		
	amount shown in line 26a. Do not file this lis	*	-	-	_	6b	49,160
С	Total support for section 509(a)(1) test: Enter	-				6c	346,055
d	Add: Amounts from column (e) for lines: 1	8	19				
u			OCL				49 160
	2	2				6d	49,160
e f		1)			▶ 2	6e 6f	49,160 296,895 85.8 %
e <u>f</u> 27	Public support (line 26c minus line 26d total Public support percentage (line 26e (num Organizations described on line 12: a person," prepare a list for your records to ship Do not file this list with your return. Enter (2005)	erator) divided by li For amounts include ow the name of, and to the sum of such amount acceived from each pers acceived from each pers acceived that was more es 5 through 11b, as wand the larger amount	ne 26c (denomined in lines 15, 16 total amounts recounts for each you (2003)	nator)) 5, and 17 that we leved in each year: squalified persons of (1) the amount to Do not file this list or (2), enter the stress.	vere received in from, each " (2002) ""), prepare a lon line 25 for lor st with your reum of these did	from a "d disqualified st for your he year or (turn. After fferences (f	296,895 85.8 % Isqualified d person. records t 2) \$5,000 computing the exces
e f 27 b	Public support (line 26c minus line 26d total Public support percentage (line 26e (num Organizations described on line 12: a person," prepare a list for your records to sho Do not file this list with your return. Enter (2005)	erator) divided by li For amounts include ow the name of, and to the sum of such among eccived from each persich year, that was more es 5 through 11b, as wand the larger amount	ne 26c (denomined in lines 15, 16 total amounts recounts for each year (2003) son (other than "die than the larger could as individuals.) described in (1) of (2003)	nator)) 6, and 17 that we elved in each year ear: squalified persons of (1) the amount of not file this liter (2), enter the steep and the second of (2), enter the second of (2), enter the second of (3).	vere received in from, each " (2002) ""), prepare a lon line 25 for lor st with your reum of these did	from a "d disqualified st for your he year or (turn. After fferences (f	296,895 85.8 % Isqualified d person. records t 2) \$5,000 computing the exces
e <u>f</u> 27	Public support (line 26c minus line 26d total Public support percentage (line 26e (num Organizations described on line 12: a person," prepare a list for your records to sho Do not file this list with your return. Enter (2005)	erator) divided by li For amounts include ow the name of, and to the sum of such amounts acceived from each person to the year, that was more es 5 through 11b, as we and the larger amount	ne 26c (denomined in lines 15, 10 total amounts recounts for each year (2003) son (other than "die than the larger cell as individuals.) described in (1) cell (2003)	natori) 6, and 17 that we leved in each year ear: squalified persons of (1) the amount of not file this liver (2), enter the signal of the signal of (2).	vere received in from, each " (2002) "), prepare a fon line 25 for the twith your return of these directions." (2002)	from a "d disqualified st for your he year or (turn. After fferences (f	296,895 85.8 % Isqualified d person. records t 2) \$5,000 computing the exces
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e f 27 b	Public support (line 26c minus line 26d total Public support percentage (line 26e (num Organizations described on line 12: a person," prepare a list for your records to she Do not file this list with your return. Enter (2005)	erator) divided by li For amounts include ow the name of, and to the sum of such amore eserved from each pers ich year, that was more es 5 through 11b, as we and the larger amount 5 and line 27b total dictotal) er amount from line 2 terator) divided by li	ne 26c (denomined in lines 15, 16 total amounts recounts for each year (2003) son (other than "die than the larger of the large	nator)) 5, and 17 that we leved in each year: squalified persons of (1) the amount of Do not file this lier (2), enter the series of (2), enter	// (2002) (2002) (2002) (2002) (2002) (2002) (2002) 2 2 2 2 2 2 2	from a "d disqualified st for your he year or (turn. After fferences (f	296,895 85.8 % Isqualified d person. records t 2) \$5,000 computing the exces

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

	rt VI-A Lobbying Expenditures by El (To be completed ONLY by ar	n eligible organ	ization that file	ed Form 5	768)			
Che	ck ▶ a ☐ If the organization belongs to an affilia	ated group Che	ck ▶ b 🔲 if	you checked	"a" an	d "limited contro	" provisions apply.	
	Limits on Lobbyi (The term "expenditures" mea	-				(a) Affiliated group totals	(b) To be completed for all electing	
						 	organizations	
36	Total lobbying expenditures to influence public				36			
37	Total lobbying expenditures to influence a legis				37			
38	Total lobbying expenditures (add lines 36 and 37)							
39	Other exempt purpose expenditures							
40					40			
41	Lobbying nontaxable amount. Enter the amour		•					
		obbying nontaxa				•		
	Not over \$500,000	of the amount on						
	Over \$1,000,000 but not over \$1,000,000 . \$175,				41			
	Over \$1,500,000 but not over \$1,500,000 . \$775,000,000 . \$225,000 . \$225,000 . \$225,000 .							
		0,000						
42	Grassroots nontaxable amount (enter 25% of I				42			
43	Subtract line 42 from line 36. Enter -0- if line 4				43			
44	Subtract line 41 from line 38. Enter -0- if line 4				44			
	Caution: If there is an amount on either line 43	3 or line 44, you n	nust file Form 47	20.			·	
	See the instructions f		bying Expenditu			 	eriod	
	Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004		(d) 2003	(e) Total	
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
49	Grassroots ceiling amount (150% of line 48(e))		· · · · · · · · · · · · · · · · · · ·					
50	Grassroots lobbying expenditures							
Pa	t VI-B Lobbying Activity by Nonelection (For reporting only by organization)			Part VI-A)	(See	page 13 of the	ne instructions.)	
Duri	ng the year, did the organization attempt to influ	ience national, sta	ate or local legis	lation, includ	ding a	^{ny} Yes No	Amount	
atte	npt to influence public opinion on a legislative m	natter or referende	um, through the	use of:	-	103 100	Amount	
а	Volunteers							
b	Paid staff or management (Include compensati			c through h.	.)		_	
С	Media advertisements						<u> </u>	
d	Mailings to members, legislators, or the public					.		
е	Publications, or published or broadcast statem	ents						
f	Grants to other organizations for lobbying purp	oses				.		
9	Direct contact with legislators, their staffs, government							
h	Rallies, demonstrations, seminars, conventions		res, or any other	means .		.	 	
i	Total lobbying expenditures (Add lines c through	gh h.)				·	1	
_	If "Yes" to any of the above, also attach a stat	ement giving a de	etailed descriptio	n of the lob	Dying	activities.		

Sche	dule A	(Form 990 or 990-EZ)	2006		_			Page	<u>7</u>
Pai	t VI	_		ransfers To and Transa e page 13 of the instruction		Relationships With	Nonc	charitabl	e
51				indirectly engage in any of the 1(c)(3) organizations) or in section				d in section	on
а	Trai	nsfers from the rep	orting organization	to a noncharitable exempt orga	nization of			Yes No	<u> </u>
_							51a(i)	✓	
		Other assets					a(ii)	✓	
ь		er transactions							
~			es of assets with a	noncharitable exempt organiza	tion		b(i)	1	
	(ii)			table exempt organization			b(ii)	✓	_
	(iii)			ner assets			b(iii)	1	_
							b(iv)	✓	_
							b(v)	 	
		_		ship or fundraising solicitations			b(vi)	√	_
_				sts, other assets, or paid emplo			C	√	_
	If th	ne answer to any of ds, other assets, o	the above is "Yes," r services given by	complete the following schedule the reporting organization if the column (d) the value of the good	. Column (b) sh he organization	nould always show the fair received less than fair	market market	value of th	ne ny
Line	a) e no	(b) Amount involved	Name of nonc	(c) haritable exempt organization	Description of	(d) transfers, transactions, and s	haring arr	angements	
									_
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	des	scribed in section 5 Yes," complete the	01(c) of the Code (ne or more tax in section 5271	? ▶	☐ Ye	s 🛭 N	о —
		(a) Name of organiz	zation	(b) Type of organization		(c) Description of relationsh	ıp		
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GLOBAL WITNESS FOUNDATION 268 BUSH STREET, #2822 SAN FRANCISCO, CALIFORNIA 94104 (94-3399599)

ATTACHMENT TO FORM 990 (2006)

PART II, LINE 22b: Grants and Allocations

Global Witness Ltd.	\$200,000.00	June 26, 2006
Global Witness Ltd.	750.00	November 29, 2006
Global Witness Ltd.	30,000.00	December 19, 2006
Total:	\$230,750.00	

GLOBAL WITNESS FOUNDATION 268 BUSH STREET, #2822 SAN FRANCISCO, CALIFORNIA 94104 (94-3399599)

ATTACHMENT TO FORM 990 (2006)

PART V-A: List of Officers and Directors

1. Patrick Alley
President and Director
PO Box 6042
London N19 5WP England
United Kingdom
Hours per week: As needed
No compensation or expense allocation or allowances

Jonathan Winer
 Director
 The Atlantic Building
 950 F Street, NW
 Washington, DC 20004-1404
 Hours per week: As needed
 No compensation or expense allocation or allowances

3. Stafford Matthews
Secretary and Director
c/o 268 Bush Street, #2822
San Francisco, CA 94105
Hours per week: As needed
No compensation or expense allocation or allowances

GLOBAL WITNESS FOUNDATION 268 BUSH STREET, #2822 SAN FRANCISCO, CALIFORNIA 94104 (94-3399599) ATTACHMENT TO FORM 990 (2006)

PART V-A, LINE 75c: Current Officers, Directors, Trustees, and Key Employees

Patrick Alley, a director and the president of the organization, receives compensation from Global Witness Limited, a Section 501(c)(3) tax exempt public charity, EIN 94-0493088. Mr. Alley is a managing director of Global Witness Limited.