

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

OMB No 1545-0047
2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
 ALLIANCE DEFENSE FUND INC
 Doing Business As

D Employer identification number
 54-1660459

E Telephone number
 (480) 444-0020

G Gross receipts \$ 35,364,799

F Name and address of principal officer
 ALAN SEARS
 15100 NORTH 90th STREET
 SCOTTSDALE, AZ 85260

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW.ALLIANCEDEFENSEFUND.ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1993 **M State of legal domicile** VA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO DEFEND THE RIGHT TO HEAR AND SPEAK THE TRUTH THROUGH STRATEGY, TRAINING, FUNDING AND LITIGATION		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of employees (Part V, line 2a)	5	178
	6 Total number of volunteers (estimate if necessary)	6	1,785
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	28,038,171	32,748,370
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	338,178	213,320
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,751,165	1,741,227
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,127,514	34,702,917
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,830,171	2,141,385
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	13,598,513	15,127,452
	16a Professional fundraising fees (Part IX, column (A), line 11e)		592,839
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,283,094		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	14,733,211	14,280,875
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	30,161,895	32,142,551
19 Revenue less expenses Subtract line 18 from line 12	-34,381	2,560,366	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	34,119,291	37,524,821
	21 Total liabilities (Part X, line 26)	2,138,735	3,005,501
22 Net assets or fund balances Subtract line 21 from line 20	31,980,556	34,519,320	

CEO Alan Sears base salary \$354,016; total w/benefits \$368,833. See p. 31.

Part II Signature Block

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

Sign Here

Signature of officer: ***** Date: 2011-03-08
 MARK FEDDERN CFO
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: Jackie Unger Date: _____ Check if self-employed
 Preparer's identifying number (see instructions): _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: LarsonAllen LLP, 1201 South Alma School Road Suite 1, Mesa, AZ 85210
 EIN: _____ Phone no: (480) 615-2300

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
 the ALLIANCE DEFENSE FUND IS A SERVANT ORGANIZATION THAT PROVIDES THE RESOURCES THAT KEEP THE DOOR OPEN FOR THE SPREAD OF THE GOSPEL AND TRANSFORM THE LEGAL SYSTEM THROUGH THE LEGAL DEFENSE AND ADVOCACY OF RELIGIOUS FREEDOM, THE SANCTITY OF LIFE, AND MARRIAGE AND THE FAMILY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
 Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 10,337,320 including grants of \$ 1,721) (Revenue \$ 0)
 PUBLIC EDUCATION TO EDUCATE THE PUBLIC CONCERNING THE DEFENSE OF RELIGIOUS FREEDOM, THE SANCTITY OF HUMAN LIFE AND FAMILY VALUES ADF PROVIDES PRINTED MATERIALS, AUDIO, VIDEO, RADIO, INTERNET AND PERSONAL APPEARANCES PUBLIC EDUCATION IS FURTHERED THROUGH THE ADF LEGAL ACADEMY (FORMERLY NATIONAL LITIGATION ACADEMY) THROUGH THIS PROGRAM, PRACTICING ATTORNEYS ARE PROVIDED INTENSE LEGAL TRAINING ON RELIGIOUS FREEDOM, EQUAL ACCESS, PARENTAL RIGHTS AND FAMILY VALUES PARTICIPATING ATTORNEYS PLEDGE TO PERFORM 450 HOURS OF PRO BONO LEGAL WORK ON ISSUES RELATED TO THEIR TRAINING TO DATE, OVER 1,300 ATTORNEYS HAVE COMPLETED THIS PROGRAM THIS COMMITMENT HAS PROVIDED OVER \$20 MILLION DOLLARS OF LEGAL SERVICE TO LOCAL COMMUNITIES, FAR IN EXCESS OF THE PROGRAM COST MOST STATE BAR ASSOCIATION ACCREDITED THE ADF LEGAL ACADEMY FOR CONTINUING LEGAL EDUCATION CREDIT FOR ATTORNEYS THE ADF BLACKSTONE LEGAL FELLOWSHIP PROGRAM PROVIDES LEGAL EDUCATION TO FIRST YEAR LAW STUDENTS, WITH A DISTINCT CHRISTIAN WORLD VIEW ADF AWARDS THESE PARTICIPATING STUDENTS SUMMER SCHOLARSHIPS AND VOLUNTEER INTERNSHIPS IN THE U S AND ABROAD DURING THE SUMMER MONTHS STUDENTS ALSO ATTEND PROMINENT GUEST LECTURES AND COMPLETE SPECIFIC COURSE WORK DURING THE PROGRAM TO DATE THE PROGRAM HAS GRADUATED OVER 800 LEGAL STUDENTS ADDITIONAL PUBLIC EDUCATION IS PROVIDED THROUGH DAILY EMAIL ALERTS, NEWSLETTERS AND RADIO AND TELEVISION SHOWS AT ADF, WE REQUEST THAT MINISTRY FRIENDS(DONORS) REMEMBER OUR ACTIVITIES IN PRAYER WE PROVIDE INFORMATION TO ASSIST OUR MINISTRY FRIENDS IN PRAYING INTELLIGENTLY, SPECIFICALLY AND WITH PURPOSE EXAMPLES OF THESE MATERIALS INCLUDE, BUT ARE CERTAINLY NOT LIMITED TO, THE FRAMERS' ORIGINAL INTENT FOR THE U S CONSTITUTION AND BILL OF RIGHTS AS IT REFLECTS GOD'S NATURAL LAW AND GOD'S HIGHER LAW, WE INFORM THE PUBLIC ABOUT THOSE ENTITIES THAT SEEK TO RE-DIRECT AND MISUSE THE CONSTITUTION'S ORIGINAL PURPOSE AND INTENT, EXAMPLES OF REAL-LIFE SITUATIONS AND ACTUAL COURT CASES WHERE JUSTICE AND CIVIL LIBERTIES HAVE BEEN THWARTED, SPECIFIC COURT CASES WHERE ADF INVOLVEMENT HAS HELPED OBTAIN JUSTICE, AND OTHER STRATEGIES FOR RECLAIMING THE JUDICIAL SYSTEM AS IT WAS ORIGINALLY ENVISIONED AND INTENDED THE ADF PUBLIC EDUCATION AND COMMUNICATION PROGRAM FURTHER SERVES THE PUBLIC AS A PRIMARY MEDIUM TO BRING CASES TO THE ATTENTION OF ADF ADF MINISTRY FRIENDS AND THE GENERAL PUBLIC ARE THE PRIMARY REFERRAL SOURCE TO ADF FOR CASES AND LEGAL NEEDS

4b (Code) (Expenses \$ 9,074,329 including grants of \$ 0) (Revenue \$ 0)
 DIRECT LITIGATION IN ADDITION TO FUNDING THIRD PARTY GRANTS FOR LITIGATION, ADF DEFENDS HUMAN AND CIVIL RIGHTS, SECURED BY LAW, THROUGH DIRECT LITIGATION FROM OUR HEADQUARTERS OFFICE IN ARIZONA AND OUR REGIONAL OFFICES THROUGHOUT THE U S RELIGIOUS FREEDOM, EQUAL ACCESS, PARENTAL RIGHTS, SANCTITY OF LIFE, RIGHTS OF CONSCIENCE, HUMAN RIGHTS AND FAMILY VALUES ARE AT THE CORE OF THESE CASES THE ADF LITIGATION TEAM PROVIDES THE COORDINATION AND THE MEANS TO CONSOLIDATE THE CONCERNS OF MULTIPLE INDIVIDUALS AND GROUPS, THUS PROVIDING A MORE EFFICIENT PROCESS FOR OUR JUDICIAL SYSTEM MONTHLY PUBLIC REQUESTS FOR LEGAL AND LITIGATION ASSISTANCE CONTINUE TO ESCALATE, INDICATING AN OVERWHELMING NEED FOR THIS SERVICE FROM THE PUBLIC

4c (Code) (Expenses \$ 4,171,893 including grants of \$ 771,715) (Revenue \$ 0)
 ALLIED SUPPORT AND TRAINING ADF CONTINUES TO BUILD ALLIANCES WITH RELIGIOUS AND SECULAR ORGANIZATIONS WHO SHARE COMMON PURPOSES AND CONCERNS WITH ADF ADF WORKS WITH OUR ALLIES TO DEVELOP EFFECTIVE APPROACHES TO LEGAL CASES THAT COULD RESULT IN IMPORTANT STATE, FEDERAL AND U S SUPREME COURT AND FOREIGN COURT PRECEDENTS A PROMINENT EXAMPLE OF THIS IS FOUND IN COURT ACTIONS UPHOLDING VOTER INITIATIVES AFFIRMING THE TRADITIONAL DEFINITION OF MARRIAGE, BY DEFENDING THE RULE OF LAW IN OUR COURTS AND GOVERNMENTAL BODIES THE ADF ALLIANCE HAS BEEN ON THE LEADING EDGE OF THIS EFFORT

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**
 (Expenses \$ 1,982,929 including grants of \$ 1,359,634) (Revenue \$)

4e Total program service expenses \$ 25,566,471

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)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>		No
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i> <input checked="" type="checkbox"/>	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	◆ 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	◆ 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? <i>If "Yes," complete Schedule D, Part IX.</i>		
	◆ Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/>		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <input checked="" type="checkbox"/>	Yes	No
	<i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> <input checked="" type="checkbox"/>	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
14b	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> <input checked="" type="checkbox"/>	Yes	
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 U S? <i>If "Yes," complete Schedule F, Part II</i> <input checked="" type="checkbox"/>	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? <i>If "Yes," complete Schedule F, Part III</i> <input checked="" type="checkbox"/>	Yes	
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? <i>If "Yes," complete Schedule G, Part I</i> <input checked="" type="checkbox"/>	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> <input checked="" type="checkbox"/>		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> <input checked="" type="checkbox"/>		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No

Part IV 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 United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	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 owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 76		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 178		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		No
b	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		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
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?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	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 supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line a or b, 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 arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ▶ AZ , AK , AR , CA , CT , FL , GA , IL , KS , KY , LA , MA , ME , MI , MN , MS , NC , NH , UT , TN , SC , RI , PA , OR , OK , OH , NM , NJ , WV , WI , WA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ MARK FEDDERN 15100 NORTH 90th STREET SCOTTSDALE, AZ 85260 (480) 444-0020

1b Total	2,348,547	0	129,439
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶**37

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
KMA DIRECT COMMUNICATIONS 7160 DALLAS PARKWAY 400 PLANO, TX 75024	CONSULTING	383,184
STRATEGIC ONE LLC 6700 ANTIOCH ROAD 110 OVERLAND PARK, KS 66204	CONSULTING	147,420
BRUSHFIRE MOBILE LLC 522 W FIRST ST 103 TEMPE, AZ 85281	CONSULTING	146,200

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**3

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	32,748,370				
	g	Noncash contributions included in lines 1a-1f \$ 302,033					
	h	Total. Add lines 1a-1f	32,748,370				
Program Service Revenue	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)	215,110			215,110	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a		(i) Real				
			(ii) Personal				
		b	Gross Rents	480,395			
		c	Less rental expenses	211,794			
	d	Rental income or (loss)	268,601				
	e	Net rental income or (loss)	268,601			268,601	
	7a		(i) Securities				
			(ii) Other				
		b	Gross amount from sales of assets other than inventory	447,448	850		
c		Less cost or other basis and sales expenses	447,108	2,980			
d	Gain or (loss)	340	-2,130				
e	Net gain or (loss)	-1,790			-1,790		
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
b	Less direct expenses b						
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities See Part IV, line 19 a						
b	Less direct expenses b						
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances a						
b	Less cost of goods sold b						
c	Net income or (loss) from sales of inventory						
	Miscellaneous Revenue	Business Code					
11a	COURT AWARDED FEES	900,099	1,165,118			1,165,118	
b	MISCELLANEOUS REVENUE	900,099	307,508			307,508	
c							
d	All other revenue						
e	Total. Add lines 11a-11d		1,472,626				
12	Total revenue. See Instructions		34,702,917	0	0	1,954,547	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,280,007	1,280,007		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	723,331	723,331		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	138,047	138,047		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,319,038	1,028,850	125,308	164,880
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	11,214,071	8,748,004	1,065,952	1,400,115
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	344,415	280,619	30,660	33,136
9	Other employee benefits	1,383,699	1,057,262	127,026	199,411
10	Payroll taxes	866,229	672,831	79,296	114,102
11	Fees for services (non-employees)				
a	Management	275,229	169,551	62,344	43,334
b	Legal	19,472	4,323	13,530	1,619
c	Accounting	21,319		21,319	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	592,839			592,839
f	Investment management fees				
g	Other	399,908	329,694	25,119	45,095
12	Advertising and promotion	6,828,328	6,181,500	147,043	499,785
13	Office expenses	1,027,877	534,796	296,343	196,738
14	Information technology				
15	Royalties				
16	Occupancy	884,075	755,408	37,060	91,607
17	Travel	1,400,980	1,026,662	60,846	313,472
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,388,034	1,000,496	80,445	307,093
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,136,708	883,790	61,269	191,649
23	Insurance	99,092	68,506	19,769	10,817
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	MISCELLANEOUS EXPENSES	576,753	459,694	39,657	77,402
b	LITIGATION/COURT FEES	223,100	223,100		
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	32,142,551	25,566,471	2,292,986	4,283,094
26	Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	5,380,098	4,879,680	80,683	419,735

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	372,747	1	1,052,393
	2 Savings and temporary cash investments	7,764,491	2	11,395,272
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	40,672	4	7,971
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	82,718	7	57,001
	8 Inventories for sale or use	36,717	8	86,689
	9 Prepaid expenses and deferred charges	451,269	9	580,569
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	22,354,215		
	b Less accumulated depreciation	4,689,227		
		18,299,611	10c	17,664,988
	11 Investments—publicly traded securities	14,372	11	27,516
	12 Investments—other securities. See Part IV, line 11	7,021,449	12	6,539,595
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	35,245	15	112,827	
16 Total assets. Add lines 1 through 15 (must equal line 34)	34,119,291	16	37,524,821	
Liabilities	17 Accounts payable and accrued expenses	2,076,913	17	2,995,929
	18 Grants payable		18	
	19 Deferred revenue	52,250	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	9,572	25	9,572
	26 Total liabilities. Add lines 17 through 25	2,138,735	26	3,005,501
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	29,609,928	27	30,603,908
	28 Temporarily restricted net assets	2,370,628	28	3,915,412
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	31,980,556	33	34,519,320	
34 Total liabilities and net assets/fund balances	34,119,291	34	37,524,821	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? . . .		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
2d	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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	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?		No
3b	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 . . .		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENSE FUND INC

Employer identification number

54-1660459

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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.")	25,335,092	30,616,566	30,499,322	28,038,171	32,748,370	147,237,521
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	25,335,092	30,616,566	30,499,322	28,038,171	32,748,370	147,237,521
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)						5,094,326
6 Public Support. Subtract line 5 from line 4						142,143,195

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	25,335,092	1,391,291	30,499,322	28,038,171	32,748,370	147,237,521
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	819,149	1,391,291	1,048,749	799,483	695,505	4,754,177
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets		765,463	546,592	1,667,915	1,472,626	4,452,596
11 Total support (Add lines 7 through 10)						156,444,294
12 Gross receipts from related activities, etc (See instructions)					12	

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	90 860 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	97 530 %

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 **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the 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 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

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 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.")						
2 Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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 \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning 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 on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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 for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation

Schedule A, Part II, Line 10, Explanation of Other Income MISCELLANEOUS REVENUE COURT AWARDED FEES

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2009

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENSE FUND INC

Employer identification number 54-1660459

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 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?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 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
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 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 these items: (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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment %
- b** Permanent endowment %
- c** Term endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,000,000		2,000,000
b Buildings		14,833,593	1,786,544	13,047,049
c Leasehold improvements				
d Equipment		5,520,622	2,902,683	2,617,939
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				17,664,988

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	34,702,917
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	32,142,551
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,560,366
4	Net unrealized gains (losses) on investments	4	-21,602
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-21,602
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,538,764

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	42,984,057
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-21,602
b	Donated services and use of facilities	2b	8,090,948
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	211,794
e	Add lines 2a through 2d	2e	8,281,140
3	Subtract line 2e from line 1	3	34,702,917
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	34,702,917

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	40,445,293
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	8,090,948
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	211,794
e	Add lines 2a through 2d	2e	8,302,742
3	Subtract line 2e from line 1	3	32,142,551
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	32,142,551

Part XIV Supplemental Information

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, 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.

Identifier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		rental expenses 211794
Part XIII, Line 2d - Other Adjustments		rental expenses 211794

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2009

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENSE FUND INC

Employer identification number
54-1660459

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

1 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? **Yes** **No**

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

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (ie, 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
Europe (Including Iceland & Greenland)	1	1	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	276,274
Central America and the Caribbean	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	25,000
North America	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	25,000
South Asia	0	0	PROGRAM SERVICES	HUMAN RIGHTS LEGAL WORK	25,000
Europe (Including Iceland & Greenland)	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	37,991
Central America and the Caribbean	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	18,900
Sub-Saharan Africa	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	6,300
North America	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	74,856
Totals ▶	1	1			489,321

**SCHEDULE G
(Form 990 or 990-EZ)**

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENSE FUND INC

Employer identification number
54-1660459

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and e-mail solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
KMA	CONSULTING ON DIRECT MAIL PROGRAM		No	0	383,184	-383,184
STRATEGIC ONE	DATABASE CONSULTING FOR DIRECT MAIL		No	0	147,420	-147,420
Total					530,604	-530,604

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

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

Part III Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		(event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				
	11 Net income summary Combine lines 3, column d, and line 10. ▶				

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary Combine lines 1, column d, and line 7 ▶					

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13 Indicate the percentage of gaming activity operated in			
a The organization's facility	13a		
b An outside facility	13b		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name ▶ _____			
Address ▶ _____			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
c If "Yes," enter name and address			
Name ▶ _____			
Address ▶ _____			
16 Gaming manager information			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States
Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
Attach to Form 990

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENSE FUND INC

Employer identification number 54-1660459

Part I General Information on Grants and Assistance

- 1 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?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1: See Additional Data Table.

2 Enter total number of section 501(c)(3) and government organizations 30
3 Enter total number of other organizations 0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CASH SCHOLARSHIP FOR LAW SCHOOL	115	723,331	0	N/A	N/A
See Additional Data Table					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 WHEN ADF APPROVES A GRANT, THE FUNDS ARE RETAINED BY ADF AND SET ASIDE TO BE EXCLUSIVELY IN FURTHERANCE OF THE GRANT REQUEST DISTRIBUTIONS ARE MADE PURSUANT TO A WRITTEN INVOICE AND REPORT DEMONSTRATING EVIDENCE OF EXPENSES ACTUALLY INCURRED, TIME ACTUALLY INVESTED IN FURTHERANCE OF THE GOALS SUPPORTED BY THE GRANT, AND A REPORT AS TO THE ACTIVITIES PERFORMED AND GOALS ACHIEVED

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENSE FUND INC

Employer identification number

54-1660459

Part I Questions Regarding Compensation

	Yes	No
--	-----	----

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items
- | | |
|---|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

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

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

1b	Yes	
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ALAN SEARS	(i)	354,016	0	1,563	6,304	6,950	368,833	0
	(ii)	0	0	0	0	0	0	0
MARK FEDDERN	(i)	184,375	0	354	7,445	0	192,174	0
	(ii)	0	0	0	0	0	0	0
WAYNE SWINDLER	(i)	212,656	0	455	10,122	5,950	229,183	0
	(ii)	0	0	0	0	0	0	0
GLEN LAVY	(i)	180,609	0	638	7,377	6,700	195,324	0
	(ii)	0	0	0	0	0	0	0
GARY MCCALED	(i)	187,166	0	685	8,465	8,420	204,736	0
	(ii)	0	0	0	0	0	0	0
PAUL WEBER	(i)	200,216	0	270	6,147	5,565	212,198	0
	(ii)	0	0	0	0	0	0	0
BENJAMIN BULL	(i)	288,079	0	1,134	8,319	0	297,532	0
	(ii)	0	0	0	0	0	0	0
JOSEPH INFRANCO	(i)	168,698	0	625	8,396	7,120	184,839	0
	(ii)	0	0	0	0	0	0	0
JORDAN LORENCE	(i)	195,925	0	398	8,067	0	204,390	0
	(ii)	0	0	0	0	0	0	0
KEVIN THERIOT	(i)	176,375	0	152	7,134	0	183,661	0
	(ii)	0	0	0	0	0	0	0
JEFFERY VENTRELLA	(i)	193,795	0	363	7,688	3,270	205,116	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	Part I, Line 1a	FIRST CLASS OR CHARTER TRAVEL IS PROVIDED ON SOME OCCASIONS TO EMPLOYEES FOR AIR TRAVEL OF EXTENDED LENGTH, WHEN AVAILABILITY OF RESERVATIONS IS limited to first class, and/or when there is minimal difference in cost or when "frequent flyer" upgrades can be utilized THIS IS FOR THE CONVENIENCE AND BUSINESS PURPOSE OF THE ORGANIZATION, NOT THE INDIVIDUAL AND IS NOT TREATED AS TAXABLE INCOME TRAVEL FOR COMPANIONS IS PROVIDED WHEN THE COMPANION'S ATTENDANCE AT MEETINGS, CONFERENCES, ETC HAS A BUSINESS PURPOSE TO THE ORGANIZATION IN CONFORMITY WITH WRITTEN POLICY THIS IS NOT TREATED AS TAXABLE COMPENSATION THESE EXPENSE ITEMS ARE NOT LIMITED TO OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED INDIVIDUALS, BUT ARE AVAILABLE TO ALL EMPLOYEES IN THE SITUATIONS DESCRIBED

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENSE FUND INC

Employer identification number

54-1660459

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 3 main columns: (a) Name of disqualified person, (b) Description of transaction, (c) Corrected? (Yes/No)

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Table with 7 main columns: (a) Name of interested person and purpose, (b) Loan to or from the organization?, (c) Original principal amount, (d) Balance due, (e) In default?, (f) Approved by board or committee?, (g) Written agreement?

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 3 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of transaction, (d) Description of transaction, (e) Sharing of organization's revenues?

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization ALLIANCE DEFENSE FUND INC

Employer identification number

54-1660459

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Row 9 shows 47 contributions and 302,033 revenues from stock market quotes.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 0

Table with 3 columns: Question, Yes, No. Contains questions 30a, 31, 32a, and 33 regarding contribution reporting and policies.

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

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

Name of the organization

ALLIANCE DEFENSE FUND INC

Employer identification number

54-1660459

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		UPON COMPLETION, THE ADF FINANCE TEAM REVIEWS THE FORM 990 THROUGH THE FOLLOWING PROCESS 1) THE ADF CFO AND INTERNAL AUDITOR OF ADF COMPARE THE FORM 990 TO THE ANNUAL CORPORATE AUDIT AND INTERNAL FINANCIAL REPORTS THE CEO THEN READS THE FORM 990 FOR CONTENT AND CLARITY 2) THE CFO ASSIGNS THE CONTROLLER AND HIS TEAM TO CHECK MATH TOTALS, SPELLING AND REVIEW CONTENT 3) FOLLOWING THE ABOVE REVIEW THE 990 IS DISTRIBUTED TO THE COO, CEO AND CHAIR OF THE FINANCE/AUDIT COMMITTEE 4) CHANGES AND CORRECTIONS FROM THE ABOVE ARE ADDRESSED AT EACH STEP 5) FOLLOWING THE ABOVE, THE CFO SIGNS AND RELEASES THE FORM 990 TO BE FILED WITH THE IRS 6) UPON FILING WITH THE IRS, THE ADF FORM 990 IS MADE AVAILABLE FOR PUBLIC DISTRIBUTION
Form 990, Part VI, Section B, line 12c		THE BOARD MEMBERS OF ADF ANNUALLY CONFIRM THAT THEY DO NOT HAVE ANY CONFLICTS OF INTEREST THE CEO AND COO ARE AWARE OF BOARD MEMBER ASSIGNMENTS AND INTERACTIONS WITH ADF THE CEO, COO AND CFO MONITOR THE DAILY OPERATIONS OF ADF SO AS TO BECOME AWARE SHOULD A CONFLICT ARISE VENDOR PURCHASES AND MAJOR PROJECT FUNDING EXPERIENCE OVERSIGHT FROM FINANCE AND ACCOUNTS PAYABLE FOR PROPER AUTHORIZATION AND VENDOR SELECTION Members of the ADF Board and Team who have a potential or suspected conflict of interest shall refrain from participating in consideration of, or voting on, any proposed transaction relating to such matter However the Board or CEO may request information from the member relating to the transaction
Form 990, Part VI, Section B, line 15		ADF MAINTAINS A COMPENSATION SYSTEM CEO COMPENSATION IS SET BY OUR INDEPENDENT BOARD, SUBJECT TO RECOMMENDATIONS OF THE BOARD COMPENSATION COMMITTEE JOB DESCRIPTIONS ARE EVALUATED AGAINST INDEPENDENT MARKET SOURCES AND REVIEWED BY AN INDEPENDENT COMPENSATION CONSULTANT THE COMPENSATION COMMITTEE APPROVED POSITION GRADES AND PAY RANGES OF ALL OTHER POSITIONS THE BOARD OF DIRECTORS CONSIDERED INFORMATION AS DISCUSSED ABOVE IN ITS APPROVAL PROCESS FOR 2010 COMPENSATION Officer compensation is determined by THE Board approved compensation system OF ADF This system and salary levels are confirmed by third party comparative benchmark data
Form 990, Part VI, Section C, line 19		ADF adheres to a Ministry Friend Bill of Rights for those who contribute to the ministry of ADF Incorporation documents, annual 990 and annual audit are available to the public

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2009

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Department of the Treasury
Internal Revenue Service

Name of the organization
ALLIANCE DEFENSE FUND INC

Employer identification number
54-1660459

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
15100 LLC 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260	OWN REAL PROPERTY	AZ	480,395	15,154,484	N/A

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
ALLIANCE DEFENSE FUND FOUNDATION 15100 NORTH 90TH STREET SCOTTSDALE, AZ 85260 86-1158500	PUBLIC BENEFIT CORPORATION	AZ	501(c)(3)	Line 7	N/A

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m	Yes	
1n	Yes	
1o		No
1p		No
1q		No
1r		No

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Additional Data

Software ID:
Software Version:
EIN: 54-1660459
Name: ALLIANCE DEFENSE FUND INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 1,982,929 including grants of \$ 1,359,634) (Revenue \$ 0)

GRANTS AND FUNDING THE ALLIANCE DEFENSE FUND, INC (ADF) CONTINUES TO FULFILL ITS MISSION BY PROVIDING GRANT FUNDING FOR LEGAL CASES AND PROGRAMS WHICH ADVOCATE OR DEFEND RELIGIOUS FREEDOM, SANCTITY OF HUMAN LIFE AND FAMILY VALUES GRANT FUNDING COVERS EXPENSES FOR LITIGATION, EDUCATION AND TRAINING GRANTS ARE REVIEWED AND RECOMMENDED BY THE GRANTS AND REVIEW COMMITTEE, WHICH IS COMPRISED OF EXPERT ATTORNEYS WHO VOLUNTEER THEIR TIME TO ADF FOR THIS PURPOSE UNDER THE CURRENT BOARD POLICY, NO GRANT IS AWARDED UNTIL IT IS FULLY FUNDED AND SET ASIDE IN SELF-DESIGNATED ACCOUNTS GRANT DISBURSEMENTS ARE MADE UPON PERFORMANCE AND PER THE TERMS OF THE GRANT CONTRACT, AND THEY TYPICALLY SPAN SEVERAL YEARS ADF HAS ISSUED IN EXCESS OF 2,100 GRANTS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHAPMAN COX CHAIRMAN	10 00	X		X				0	0	0
ALLEN GINSBORG VICE PRESIDENT	5 00	X		X				0	0	0
TOM ROGEBERG SECRETARY	2 00	X		X				0	0	0
MARK MADDOUX TREASURER	5 00	X		X				0	0	0
EDWARD CHRISTIE DIRECTOR	2 00	X						0	0	0
MARJORIE DANNENFELSER DIRECTOR	2 00	X						0	0	0
NATHAN ESTRUTH DIRECTOR	2 00	X						0	0	0
TOM MINNERY DIRECTOR	2 00	X						0	0	0
DALE NABB DIRECTOR	2 00	X						0	0	0
CHARLES W PICKERING SR DIRECTOR	2 00	X						0	0	0
JOHN ROGERS DIRECTOR	2 00	X						0	0	0
TERRY SCHLOSSBERG DIRECTOR	2 00	X						0	0	0
ALAN SEARS PRESIDENT & CEO	60 00			X				355,579	0	13,254
MARK FEDDERN EXEC VICE PRES & CFO	55 00			X				184,729	0	7,445
WAYNE SWINDLER EXEC VICE PRES & COO	55 00			X				213,111	0	16,072
GLEN LAVY SENIOR VICE PRESIDENT	55 00				X			181,247	0	14,077
GARY MCCALED SENIOR VICE PRESIDENT	55 00				X			187,851	0	16,885
PAUL WEBER EXECUTIVE VICE PRESIDENT	55 00				X			200,486	0	11,712
BENJAMIN BULL DIRECTOR OF GA	50 00					X		289,213	0	8,319
JOSEPH INFRANCO SENIOR VICE PRESIDENT	50 00					X		169,323	0	15,516
JORDAN LORENCE SENIOR VICE PRESIDENT	50 00					X		196,323	0	8,067
KEVIN THERIOT SENIOR COUNSEL	50 00					X		176,527	0	7,134
JEFFERY VENTRELLA SENIOR VICE PRESIDENT	50 00					X		194,158	0	10,958

Software ID:
Software Version:
EIN: 54-1660459
Name: ALLIANCE DEFENSE FUND INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS FAMILY INSTITUTE INC100 SYLVAN ROAD 625 WOBURN, MA 01801	04-3113783	501(C)(3)	6,955		N/A	N/A	FAMILY VALUES LEGAL WORK
MORALITY IN MEDIA475 RIVERSIDE DRIVE 239 NEW YORK, NY 10115	13-2608326	501(C)(3)	8,000		N/A	N/A	FAMILY VALUES LEGAL WORK
OPTIMA ENRICHMENT4020 N 128TH STREET BROOKFIELD, WI 53005	20-0476818	501(C)(3)	7,500		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
CHRISTIAN RIGHTS MINISTRIES133 MOUNT PLEASANT ROAD CHESAPEAKE, VA 23322	20-0486782	501(C)(3)	10,000		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
MARRIAGE LAW FOUNDATION1868 NORTH 800 EAST LEHI, UT 84043	20-1893725	501(C)(3)	5,808		N/A	N/A	FAMILY VALUES LEGAL WORK
FIDELIS CENTER FOR LAW AND POLICY180 WADAMS STREET FLOOR 3 CHICAGO, IL 60603	20-2787890	501(C)(3)	85,000		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
FIDELIS CENTER FOR LAW AND POLICY180 WADAMS STREET FLOOR 3 CHICAGO, IL 60603	20-2787890	501(C)(3)	40,000		N/A	N/A	FAMILY VALUES LEGAL WORK
INDEPENDENCE LAW CENTER23 N FRONT STREET HARRISBURG, PA 17101	23-2509197	501(C)(3)	9,841		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
INDEPENDENCE LAW CENTER23 N FRONT STREET HARRISBURG, PA 17101	23-2509197	501(C)(3)	78,546		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
INDEPENDENCE LAW CENTER23 N FRONT STREET HARRISBURG, PA 17101	23-2509197	501(C)(3)	59,457		N/A	N/A	FAMILY VALUES LEGAL WORK

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CITIZENS FOR COMMUNITY VALUES 11175 READING ROAD 103 CINCINNATI, OH 45241	31-1075684	501(C)(3)	33,579		N/A	N/A	FAMILY VALUES LEGAL WORK
CITIZENS FOR COMMUNITY VALUES 11175 READING ROAD 103 CINCINNATI, OH 45241	31-1075684	501(C)(3)	29,225		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
AMERICANS UNITED FOR LIFE 5803 SHERBROOKE OAK SAN ANTONIO, TX 78249	36-3706065	501(C)(3)	10,000		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
CIVIL LIBERTIES FOR URBAN BELIEVERS ONE N LASALLE STREET 600 CHICAGO, IL 60602	36-3855952	501(C)(3)	24,521		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
WORLD OUTREACH CONFERENCE CENTER FOUR E 111TH STREET CHICAGO, IL 60528	36-4116641	501(C)(3)	25,000		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
THE THOMAS MORE SOCIETY 29 S LASALLE STREET 440 CHICAGO, IL 60603	36-4270023	501(C)(3)	41,243		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
THE THOMAS MORE SOCIETY 29 S LASALLE STREET 440 CHICAGO, IL 60603	36-4270023	501(C)(3)	21,664		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
CHRISTIAN LEGAL SOCIETY 8001 BRADDOCK ROAD 300 SPRINGFIELD, VA 22151	36-6101090	501(C)(3)	101,944		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
FIRST FREEDOMS FOUNDATION INC 20975 SWENSON DRIVE 125 WAUKESHA, WI 53186	39-1962608	501(C)(3)	20,000		N/A	N/A	FAMILY VALUES LEGAL WORK
GRACE CHRISTIAN REFORMED CHURCH 3540 75TH STREET E INVER GROVE HEIGHTS, MN 55076	41-1493170	501(C)(3)	6,150		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK

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HOME SCHOOL FOUNDATION ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	52-1354365	501(C)(3)	2,914		N/A	N/A	FAMILY VALUES LEGAL WORK
HOME SCHOOL FOUNDATION ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	52-1354365	501(C)(3)	10,000		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
ADVOCATES INTERNATIONAL 8001 BRADDOCK ROAD 300 SPRINGFIELD, VA 22151	54-1646669	501(C)(3)	15,000		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
ADVOCATES INTERNATIONAL 8001 BRADDOCK ROAD 300 SPRINGFIELD, VA 22151	54-1646669	501(C)(3)	15,000		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
CONSTITUTIONAL RESTORATION INSTITUTE 408 W CHESTNUT STREET LANCASTER, PA 17603	58-2673573	501(C)(3)	479		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
CONSTITUTIONAL RESTORATION INSTITUTE 408 W CHESTNUT STREET LANCASTER, PA 17603	58-2673573	501(C)(3)	20,000		N/A	N/A	FAMILY VALUES LEGAL WORK
AMERICAN LIBERTIES INSTITUTE PO BOX 547503 ORLANDO, FL 32854	59-3309465	501(C)(3)	24,980		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
ALASKA FAMILY COUNCIL 12900 CUMBERLAND CIRCLE ANCHORAGE, AK 99516	65-1263366	501(C)(3)	15,000		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
LIBERTY INSTITUTE 2001 PLANO PARKWAY PLANO, TX 75075	75-1403169	501(C)(3)	47,500		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
NATIONAL LEGAL FOUNDATION 2224 VIRGINIA BEACH BOULEVARD 204 VIRGINIA BEACH, VA 23454	86-0662348	501(C)(3)	44,615		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK

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NATIONAL LEGAL FOUNDATION 2224 VIRGINIA BEACH BOULEVARD 204 VIRGINIA BEACH, VA 23454	86-0662348	501(C)(3)	9,563		N/A	N/A	FAMILY VALUES LEGAL WORK
NATIONAL LEGAL FOUNDATION 2224 VIRGINIA BEACH BOULEVARD 204 VIRGINIA BEACH, VA 23454	86-0662348	501(C)(3)	38,966		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
JUSTICE ADVOCATES 15192 ROSEWOOD LEAWOOD, KS 66224	86-0837674	501(C)(3)	961		N/A	N/A	FAMILY VALUES LEGAL WORK
JUSTICE ADVOCATES 15192 ROSEWOOD LEAWOOD, KS 66224	86-0837674	501(C)(3)	9,438		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
SOUTH MOUNTAIN COMMUNITY CHURCH 12411 SOUTH 265 WEST DRAPER, UT 84020	87-0581349	501(C)(3)	5,934		N/A	N/A	FAMILY VALUES LEGAL WORK
SOUTH MOUNTAIN COMMUNITY CHURCH 12411 SOUTH 265 WEST DRAPER, UT 84020	87-0581349	501(C)(3)	2,905		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
HUMAN LIFE OF WASHINGTON 14400 BEL-RED ROAD 207 BELLEVUE, WA 98007	91-1308745	501(C)(3)	15,000		N/A	N/A	SANCTITY OF LIFE LEGAL WORK
PACIFIC JUSTICE INSTITUTE PO BOX 276600 SACRAMENTO, CA 95827	91-1823641	501(C)(3)	19,963		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
CONCERNED WOMEN FOR AMERICA 1015 15TH STREET NW 1100 WASHINGTON, DC 20005	95-3580834	501(C)(3)	6,500		N/A	N/A	FAMILY VALUES LEGAL WORK
CATHOLIC ANSWERS ONE SIXTH STREET TERRE HAUTE, IN 47807	95-3754404	501(C)(3)	20,000		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL RELIGIOUS BROADCASTERS 9510 TECHNOLOGY DRIVE MANASSAS, VA 20110	22-1841274	501(C)(3)	10,000		N/A	N/A	RELIGIOUS LIBERTY LEGAL WORK
PROPOSITION 8 LEGAL DEFENSE FUND 2150 RIVER PLAZA DRIVE 150 SACRAMENTO, CA 95833	26-3689861	501(C)(3)	150,000		N/A	N/A	FAMILY VALUES LEGAL WORK