## 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 2008

**Open to Public Inspection** 

I J K	Addr Nam Initia Tern Ame	applicable: ress change ne change al return mination  Please IRS la or pr or ty Se spec Instr	The Good People Func- rint pe. e ific 384 Wyoming Avenue		Room/suite			18872		
J N K Part	Nam Initia Tern Ame	ress change IRS la or property in the change or ty seal return specifications.	The Good People Func- rint pe. e ific 384 Wyoming Avenue		Room/suite	E				
J N K Part	Initia Tern Ame	ne change or ty Se al return spec Instr	Number and street (or P.O. box if mail e a street (or P.O. box		Room/suite	Е				
J N K Part	Initia Tern Ame	Se al return spec Instr	e ific 384 Wyoming Avenue					inc mainib	CI	
J N K Part	Tern	Instr	me   301 Myoming hivehae				(973	3) 76	61-0580	
J N K Part	Ame	tion		State ZIP	code + 4		(370	, , ,	01 0000	
J N K Part	=	and a discount con-			7041	ا			781,227	
J N K Part	Appi	ended return	Millburn ame and address of principal officer:	NJ 0'		) Is this a g	Gross r			X No
J N K Part				! 1 h		) Are all aff			iates? Yes	A No
J N K Part			Lindauer 384 Wyoming Avenue M		7041		tach a list.		ructions)	NO
K Part		exempt status X		4947(a)(1) or	527					
Part	Webs		oodpeoplefund.org	<u> </u>		) Group exe	emption nu	mber -		
		J	prporation Trust Association O	ther► L Year	of Formation:	2008	M s	tate of le	gal domicile: NJ	
		Summary								
	<b>1</b> B	Briefly describe the	organization's mission or most signif	icant activities: <u>GPF i</u>	<u>s dedica</u> t	<u>ed to t</u>	<u>he iden</u>	tific	ation and su	pport
ø			-overhead grass-roots pro-							
Governance			<u>" in both the United Sta</u>							
er.	<u>i</u>	<u>individual or</u>	small group who have recogni						to resolvi	ng it.
λοί		Check this box ►	if the organization discontinued its							
8			nembers of the governing body (Part					3 7	7	
es			dent voting members of the governing				-	4 7	/	
-5			nployees (Part V, line 2a)				-	5 1 6 (		
<b>V</b> cti			lunteers (estimate if necessary)				F		)	
`			ed business revenue from Part VIII, linness taxable income from Form 990-T					7a 7b		0.
	D IV	vet unrelated busil	less taxable income from Form 990-1	, IIIIe 34				7.0		
					_		or Year		Current Ye	
<del>o</del>		-	grants (Part VIII, line 1h)		+		159,4	02.	780,	202.
<b>⊕</b>		•	evenue (Part VIII, line 2g)		+			4.4		005
1 چ			(Part VIII, column (A), lines 3, 4, and	•	_		1	14.	1,	025.
_   '			t VIII, column (A), lines 5, 6d, 8c, 9c,		<del>-</del>		150 5	1.0	7.01	007
			dd lines 8 through 11 (must equal Part				159,5			227.
			amounts paid (Part IX, column (A), lir	•	-		49,4	91.	578,	998.
1			for members (Part IX, column (A), lin		1					
ွှ   1	1 <b>5</b> S	Salaries, other com	npensation, employee benefits (Part I)	K, column (A), lines 5-10	0)		11,3	71.	62 <b>,</b>	476.
Expenses 1	16a P	Professional fundra	aising fees (Part IX, column (A), line 1	1e)						
cbe	<b>b</b> T	Total fundraising ex	xpenses (Part IX, column (D), line 25)	<b>10</b> ,	244.					
			art IX, column (A), lines 11a-11d, 11f-				2,9	52	27	284.
			ld lines 13-17 (must equal Part IX, col		+-		63,8			758.
			nses. Subtract line 18 from line 12		<del>-</del>		95,7			469.
	J 1	revenue less expe	rises. Subtract line 16 from line 12							
ance		5-4-14- (D4)	V. Fra. 16		-	Beginn	ing of Ye		End of Ye	
Asse Balk		•	X, line 16)		<u>-</u>		95,7		208,	<u>.171.</u>
Net Assets or Fund Balances			t X, line 26)		T			0.		0.
			balances. Subtract line 21 from line 2	0			95,7	02.	208,	<u>,171.</u>
Part	ll .	Signature B	SIOCK							
		Under penalties of per	rjury, I declare that I have examined this return, in plete. Declaration of preparer (other than officer)	ncluding accompanying schedule is based on all information of w	es and statem	ents, and to	o the best	of my kn	owledge and belief,	, it is
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			I				
Sign Here		<u> </u>					<u>/01/0</u>	9		
Here	•	Signature of office	er			Date				
		Erik Lin			(	Chairm	nan			
		Type or print nam	ne and title.							
				Date		Chec		Pre (se	parer's identifying e instructions)	number
Paid		Preparer's				self- emp	loyed ►			
Pre-		signature		12/	01/09			_		
pare	r's	Firm's name (or I	RIS B. ROSKEN, CPA, LL	•						
Ùse	,	vours if self-	16 CARNATION DRIVE	-		EIN	•			
	,	address and —	'ARMINGDALE	NY 11735						71
Only		ZIP + 4 <b>F</b>		NY 11735		I Ph∩r	ne no. 🕨	(631	) 379-95	<i>/</i> I

Par	t III	Statement of Program Service Accomplishments (see instructions)				
1	Briefly	describe the organization's mission:				
		is dedicated to the identification and support				
	of sr	mall, low-overhead grass-roots programs and organizations that generally	<u>"fl</u> y	<u>, be</u>	<u> 10w</u>	the
	See Fo	orm 990, Page 2, Part III, Line 1 (continued)				
2		e organization undertake any significant program services during the year which were not listed on the prior	Π,			
		990 or 990-EZ?	י וו	es (	Χ	No
_		,' describe these new services on Schedule O.	П,			
3		e organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X	No
4		,' describe these changes on Schedule O. be the exempt purpose achievements for each of the organization's three largest program services by expenses. Se	otion [	01/0	(2)	
4	and 50	of the exempt purpose achievements for each of the organizations three largest program services by expenses. Se 11(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to of ses, and revenue, if any, for each program service reported.	thers, t	the to	tal	
4a	(Code:	) (Expenses \$ 640,537. including grants of \$ 578,998.) (Revenue \$		781	.,22	27.)
	Prov	vides assistance to those that better our world in numerous ways.				
		s programs support small, low-overhead grass-roots programs and org				
		generally "fly below the radar screen" in both the United States		_Is	<u>rae</u>	1
		non to all is the presence of an individual or small group who have				
	reco	ognized a problem and have dedicated themselves to resolving it.				
4b	(Code:	) (Expenses \$ including grants of \$ ) (Revenue \$				)
4 c	(Code:	) (Expenses \$ including grants of \$ ) (Revenue \$				)
		·				
4d	Other p	program services. (Describe in Schedule O.)				
	(Expen				)	
46	Total n	program service expenses $\blacktriangleright$ \$ 640.537. (Must equal Part IX-Line 25. column (B))				

# Form 990 (2008) The Good People Fund Inc. Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete			
2	Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates			
	for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4		Х
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? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	Х	
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>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		Х
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
I	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i>	15	Х	
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 United States? <i>If 'Yes,' complete Schedule F, Part III</i>	16	Х	
17	3 , , , , , , , , , , , , , , , , ,	17		Х
18	3p	18		X
19	2	19 20		X
20 21	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	21	Х	Х
	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	X	
	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete		71	,,
	Schedule J	23		Х
24 8	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		x
	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		
ď	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27		27		х
_		-	_	_

# Form 990 (2008) The Good People Fund Inc. Part IV | Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively			
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
	<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х

BAA Form **990** (2008)

12a

	m 990 (2008) The Good People Fund Inc. 26-188/24	9		age
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	_		
	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
2	<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
	<b>a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
	b If 'Yes,' enter the name of the foreign country: ►	_		
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts.			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6	a Did the organization solicit any contributions that were not tax deductible?	6a		Х
	<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		Х
	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	+		Х
	<b>g</b> For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	<b>h</b> For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8		Х
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	a Did the organization make any taxable distributions under section 4966?	+		Х
	<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b		Х
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12	-		
	<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter:			
	a Gross income from other members or shareholders	-		
	<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			

**b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year ...... 12b BAA Form **990** (2008)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? .....

Form 990 (2008) The Good People Fund Inc. 26–1887249 Page
Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u> </u>		Governing Body and Management			
	For each	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, is, or changes in Schedule O. See instructions.		Yes	No
1	,	number of voting members of the governing body			
		e number of voting members that are independent			
2	2 Did any officer, d	officer, director, trustee, or key employee have a family relationship or a business relationship with any other irector, trustee or key employee?	2	х	
3	B Did the o	rganization delegate control over management duties customarily performed by or under the direct supervision s, directors or trustees, or key employees to a management company or other person?	3		x
_		rganization make any significant changes to its organizational documents	4		X
		prior Form 990 was filed?			
Ę		rganization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the	organization have members or stockholders?	6		Х
7	7a Does the governing	organization have members, stockholders, or other persons who may elect one or more members of the g body?	7a		х
	<b>b</b> Are any	decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	B Did the o the follow	rganization contemporaneously document the meetings held or written actions undertaken during the year by ving:			
	<b>a</b> The gove	erning body?	8a	Х	
	<b>b</b> Each cor	nmittee with authority to act on behalf of the governing body?	8b	Х	
9	a Does the	organization have local chapters, branches, or affiliates?	9a		Х
	<b>b</b> If 'Yes,' of and bran	does the organization have written policies and procedures governing the activities of such chapters, affiliates, ches to ensure their operations are consistent with those of the organization?	9b		
10	Was a co describe	ppy of the Form 990 provided to the organization's governing body before it was filed? All organizations must in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	
11	l Is there a	any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the tion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	11		х
۵	ction B.	Policies			
<u> </u>	CHOILD.	Policies			
<u> </u>	ction b.	rollues		Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Yes X	No
	<b>2a</b> Does the <b>b</b> Are office	,	12a 12b	Х	No
	2a Does the b Are office to conflic	organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i> ers, directors or trustees, and key employees required to disclose annually interests that could give rise		Х	No
12	2a Does the b Are office to conflic c Does the Schedule	organization have a written conflict of interest policy? If 'No,' go to line 13	12b	x	No
12	2a Does the b Are office to conflic c Does the Schedule 3 Does the	organization have a written conflict of interest policy? If 'No,' go to line 13	12b 12c	x	
12 13 14	2a Does the b Are office to conflic c Does the Schedule Does the	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in organization have a written whistleblower policy?	12b 12c 13	x	X
12 13 14	2a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orga	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in e O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official?	12b 12c 13	x	X
12 13 14	2a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orga	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in e O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:	12b 12c 13 14	X	X
12 13 14	2a Does the b Are office to conflice c Does the Schedule Does the Does the Did the p persons, a The orga	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in e O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official?	12b 12c 13 14	X	X X
13 14 15	2a Does the b Are office to conflice c Does the Schedule Does the Did the p persons, a The orga b Other off Describe a Did the o	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in e O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official? icers of key employees of the organization?	12b 12c 13 14	X	X X
13 14 15	2a Does the b Are office to conflice c Does the Schedule Does the Does the Did the p persons, a The orga b Other off Describe Did the o entity due b If 'Yes.' If	organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i> ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?  organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in to how this is done</i> organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:  nization's CEO, Executive Director, or top management official?  icers of key employees of the organization?  the process in Schedule O. (see instructions)  rganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?	12b 12c 13 14 15a 15b	X	X X X
13 14 15	2a Does the b Are office to conflice c Does the Schedule Does the	organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i> ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?  organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in e O how this is done</i> organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:  nization's CEO, Executive Director, or top management official?  icers of key employees of the organization?  the process in Schedule O. (see instructions)  reganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?	12b 12c 13 14 15a 15b	X	X X X
13 14 15	2a Does the b Are office to conflice c Does the Schedule Does the Does the Did the p persons, a The orga b Other off Describe Did the o entity du b If 'Yes,' I in joint w status wi	organization have a written conflict of interest policy? If 'No,' go to line 13  ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in one of how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official? icers of key employees of the organization? the process in Schedule O. (see instructions) reganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  nas the organization adopted a written policy or procedure requiring the organization to evaluate its participation enture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt th respect to such arrangements?	12b 12c 13 14 15a 15b	X	X X X
12 13 14 15	2a Does the b Are office to conflice c Does the Schedule 3 Does the 1 Does the 5 Did the p persons, a The orga b Other off Describe 5 Did the o entity du b If 'Yes,' h in joint v status wi	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in organization have a written whistleblower policy? organization have a written document retention and destruction policy? organization have a written document retention and destruction policy? organization have a written document retention and destruction policy? organization have a written document retention and destruction policy? organization have a written document retention and destruction policy? organization's CEO, Executive Director, or top management official? inization's CEO, Executive Director, or top management official? inization's CEO, Executive Director, or top management official? inization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  In as the organization adopted a written policy or procedure requiring the organization to evaluate its participation enture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt the respect to such arrangements?  Disclosures	12b 12c 13 14 15a 15b	X	X X X
13 14 15 16	2a Does the b Are office to conflice c Does the Schedule B Does the Does the Did the p persons, a The orga b Other off Describe a Did the o entity du b If 'Yes,' I in joint v status wi ection C. List the s S Section 6	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests that could give rise to? organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in to how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official? icers of key employees of the organization? the process in Schedule O. (see instructions) rganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  ans the organization adopted a written policy or procedure requiring the organization to evaluate its participation enture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt th respect to such arrangements?  Disclosures  tates with which a copy of this Form 990 is required to be filed  New Jersey  1004 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available forms 1025 (or 1024	12b 12c 13 14 15a 15b 16a	x x	x x x x
13 14 15 16	2a Does the b Are office to conflice c Does the Schedule 3 Does the 1 Does the 5 Did the p persons, a The orga b Other off Describe 6 Did the o entity du b If 'Yes,' h in joint v status wi ection C. 7 List the s 3 Section 6 inspectio	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in to how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision: nization's CEO, Executive Director, or top management official? icers of key employees of the organization? the process in Schedule O. (see instructions) rganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  nas the organization adopted a written policy or procedure requiring the organization to evaluate its participation enture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt the respect to such arrangements?  Disclosures  tates with which a copy of this Form 990 is required to be filed  New Jersey 104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available. Check all that apply.	12b 12c 13 14 15a 15b 16a	x x	x x x x
12 13 14 15 16 17 18	2a Does the b Are office to conflice c Does the Schedule 3 Does the 1 Does the 5 Did the p persons, a The orga b Other off Describe 6 Did the o entity du b If 'Yes,' h in joint v status wi ection C. 7 List the s 6 Section 6 inspectio X Own	organization have a written conflict of interest policy? If 'No,' go to line 13  ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in to have a written whistleblower policy?  organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  organization have a written document retention and destruction policy?  organization have a written document retention and destruction policy?  organization have a written document of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:  nization's CEO, Executive Director, or top management official?  incers of key employees of the organization?  the process in Schedule O. (see instructions)  riganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  instruction invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  Disclosures  that explain and adopted a written policy or procedure requiring the organization to evaluate its participation enture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt the respect to such arrangements?  Disclosures  tates with which a copy of this Form 990 is required to be filed  New Jersey  1010	12b 12c 13 14 15a 15b 16a 16b	X X X	X X X X
13 14 15 16 17 18	2a Does the b Are office to conflice c Does the Schedule 3 Does the 1 Does the 5 Did the p persons, a The orga b Other off Describe 6 Did the o entity du b If 'Yes,' h in joint v status wi ection C. 7 List the s 3 Section 6 inspection X Own 6 Describe statemen	organization have a written conflict of interest policy? If 'No,' go to line 13  ers, directors or trustees, and key employees required to disclose annually interests that could give rise ts?  organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review and approval by independent comparability data, and contemporaneous substantiation of the deliberation and decision:  nization's CEO, Executive Director, or top management official?  icers of key employees of the organization?  the process in Schedule O. (see instructions)  rganization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable ring the year?  ass the organization adopted a written policy or procedure requiring the organization to evaluate its participation enture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt the respect to such arrangements?  Disclosures  tates with which a copy of this Form 990 is required to be filed Page Jersey  104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available Disclosures  104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available Disclosures  105 Disclosures Disclosures  106 Another's website Disclosures	12b 12c 13 14 15a 15b 16a 16b	X X X finance	X X X X

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did no	1	ale al	iy O			rector	, uu	1	<b>(E)</b>		
(A)	(B) Average	(c) Position (check all that apply)					lνΔ	(D)	(E)	(F)	
Name and Title	hours per week	andividual frustee or director	anstitutional trustee	Officer	Key amployee	Highlest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations	
Erik LindauerChairman	10.00	Х						0.	0.	0.	
Roni Rubenstein Secretary	5.00	х						0.	0.	0.	
Peter FreimarkBoard Member	5.00	Х						0.	0.	0.	
Alan Dworkin Board Member	5.00	Х						0.	0.	0.	
Rabbi Gordon Fuller Board Member	5.00	Х						0.	0.	0.	
Arthur Brenner Board Member	5.00	Х						0.	0.	0.	
Allen Katzoff Board Member	5.00							0.	0.	0.	
Lisa Lindauer Treasurer	5.00			х				0.	0.	0.	
Naomi Eisenberger Executive Director	40.00	х			х	Х		36,667.	0.	0.	

Part VII   Section A. Officers, Directors, Trust		ey l	Em			es,	anc			loyees		<u>.)                                    </u>
(A)	(B)			((				(D)	(E)		(F)	
Name and Title	Average hours per week			Officer	all Key employee	Mighest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	am co	Estimated jount of oth ompensation from the organization and related rganizations	ner on n d
	-											
	-											
	-											
	_											
	_											
	_											
	_											
	-											
	-											
	-											
2 Total number of individuals (including those in 1a) w								36,667.	0			0.
organization or individuals (including those in ray w	no rece	veu	11101	e ui	Ial I 、	φιυ	0,00	o in reportable col	npensation nom	iie		
											Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	e, k	еу е	mpl	oye	e, o	r hig	hest compensate	d employee	3		Х
4 For any individual listed on line 1a, is the sum of reg	ortable	com	npen	nsatio	on a	and	othe	r compensation fr	om	··· j		
the organization and related organizations greater the individual	nan \$150	),000 	Ĵ? If 	f 'Ye	s' c	omp	olete	Schedule J for su	ıch 	4		Х
5 Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Sch	ompensa ledule J	ation for s	froi	m ar 1 per	ny u rson	nrel	ated	l organization for	services	5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest compensate compensation from the organization.	ed indep	ende	ent o	cont	ract	ors	that	received more that	an \$100,000 of			
(A) Name and business addres	S							Description of	) of Services	Comp	(C) pensation	n
2 Total number of independent contractors (including to compensation from the organization ►	those in	1) w	/ho i	rece	ivec	d mo	ore t	han \$100,000 in				

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Pa	rt VIII   Statement of Revenue				
		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE 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 780,202.   g Noncash contribns included in Ins 1a-1f: \$ 66,359.   h Total. Add lines 1a-1f >	780,202.			
PROGRAM SERVICE REVENUE					
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties  (i) Real (ii) Personal  6a Gross Rents (ii) Real (iii) Personal  6 a Gross Rents (iv) Real (iv) Personal  6 a Gross Rents (iv) Real (iv) Personal (iv) P	1,025.	0.	0.	1,025.
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	781,227.	0.	0.	1,025.

#### **Statement of Functional Expenses** Part IX

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).

	All Other organizations must comp	(A) Total expenses	(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	88,466.	88,466.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	21,924.	21,924.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	468,608.	468,608.		
4	Benefits paid to or for members	100,000.	100,000.		
5	Compensation of current officers, directors, trustees, and key employees	56,693.	39,685.	11,339.	5,669.
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				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,783.	4,048.	1,157.	578.
	Fees for services (non-employees)				
	Management				
	Legal		_		
	Accounting	1,800.	0.	1,800.	0.
	Lobbying				
	e Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
9	g Other	0.45	0.45		
	Advertising and promotion		845.	0.	0.
	Office expenses		985.	281.	141.
14	Information technology				
15	Royalties				
16	Occupancy	0 400	0.400	0	
17 18	Travel	2,499.	2,499.	0.	0.
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,745.	1,221.	349.	175.
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.)				
	Website Design, hosting and other	5,660.	3,962.	1,132.	566.
ŀ	Marketing-Annual report	6,141.	3,685.	0.	2,456.
	Bank charges	4,715.	3,300.	943.	472.
	Postage and shipping	825.	577.	165.	83.
	Payroll processing fee	534.	374.	107.	53.
	All other expenses	1,113.	358.	704.	51.
25	Total functional expenses. Add lines 1 through 24f	668,758.	640,537.	17,977.	10,244.
26	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form <b>990</b> (2008)

			<b>(A)</b> Beginning of year		<b>(E</b> End o	<b>B)</b> f year	
	1	Cash – non-interest-bearing	63,957.	1	•	34 1	26.
	2	Savings and temporary cash investments	25,114.	2		50,1	
	3	Pledges and grants receivable, net	25,114.	3	Τ,	<i>30</i> ,1	<u> </u>
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key employees,		-			
	,	or other related parties. 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			
A S E T S	7	Notes and loans receivable, net		7			
S E	8	Inventories for sale or use		8			
T S	9	Prepaid expenses and deferred charges	6,631.	9		13,9	05.
	10 a	Land, buildings, and equipment: cost basis	·				
		Less: accumulated depreciation. Complete Part VI of					
		Schedule D		10 c			
	11	Investments – publicly-traded securities		11			
	12	Investments – other securities. See Part IV, line 11		12			
	13	Investments – program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	95,702.	16	20	08,1	71.
	17	Accounts payable and accrued expenses	0.	17			0.
	18	Grants payable		18			
	19	Deferred revenue		19			
Ļ	20	Tax-exempt bond liabilities		20			
A B	21	Escrow account liability. Complete Part IV of Schedule D		21			
Ĭ	22	- · · · · · · · · · · · · · · · · · · ·					
Ī		Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II					
- 1		of Schedule L		22			
E S	23	Secured mortgages and notes payable to unrelated third parties		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities. Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	0.	26			0.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines					
		27 through 29 and lines 33 and 34.					
A S E T	27	Unrestricted net assets	52,712.				<u>.66.</u>
Ĭ	28	Temporarily restricted net assets	42,990.	28	2	24,C	05.
S O	29	Permanently restricted net assets		29			
O R		Organizations that do not follow SFAS 117, check here ►					
F U N D		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30			
B A	31	Paid-in or capital surplus, or land, building, and equipment fund		31			
Ā	32	Retained earnings, endowment, accumulated income, or other funds		32			
BALANCES	33	Total net assets or fund balances.	95,702.	33		08,1	
	34	Total liabilities and net assets/fund balances.	95 <b>,</b> 702.	34	2(	08,1	<u>.71.</u>
Pa	rt XI	Financial Statements and Reporting					
_						Yes	No
1			Other				
		re the organization's financial statements compiled or reviewed by an independent ac			+	Х	<del> </del>
		re the organization's financial statements audited by an independent accountant?			2b	Х	
	c If "	Yes' to 2a or 2b, does the organization have a committee that assumes responsibility iew, or compilation of its financial statements and selection of an independent accour	tor oversight of the audatant?	dit,	2c	Х	
3		a result of a federal award, was the organization required to undergo an audit or aud				- 22	
•		dit Act and OMB Circular A-133?			За		Х
	<b>b</b> If '`	Yes,' did the organization undergo the required audit or audits?	<u></u>	<u></u>			
BA						990	(2008)

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

v(1)

Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

2008

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

The Good People Fund Inc. 26-1887249 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: (Please check only one organization.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section** 5 **170(b)(1)(A)(iv).** (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) 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 9 X 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). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 11 describes the type of supporting organization and complete lines 11e through 11h. Type I Type II Type III - Functionally integrated Type III - Other 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (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 supported organization? 11 g (i) a family member of a person described in (i) above? ...... 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? ...... 11 g (iii) Provide the following information about the organizations the organization supports h (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (ii) EIN (v) Did you notify the organization in col. (i) of (i) Name of Supported Organization (vi) Is the organization in col. (i) organized in the U.S.? (iv) Is the (vii) Amount of Support rganization in col your support? governing document? Yes No Yes Yes Total

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

Par	t II Support Schedule for (	-			b)(1)(A)(iv) and	d 1 <b>70(b)(1)(A)(</b> v	i)
Sec	(Complete only if you checketion A. Public Support	ed the box on line	5, 7, or 8 of Part	1.)			
	ndar year (or fiscal year						
begi	nning in) 🟲	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support		-1		1	1	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	
	First five years. If the Form 990 i organization, check this box and	stop here		d, third, fourth, o	r fifth tax year as	a section 501(c)(3)	▶∏
	tion C. Computation of Pub		•	- 11 (0		14	0/
	Public support percentage for 20 Public support percentage for 20	•	• •	• • •			<b>%</b> %
16 a	a 33-1/3 support test — 2008. If the and stop here. The organization	organization did qualifies as a pub	not check the box blicly supported or	on line 13, and ganization.	the line 14 is 33-1	/3 % or more, chec	ck this box
ŀ	33-1/3 support test – 2007. If the and stop here. The organization	organization did qualifies as a pub	not check a box o	on line 13, or 16a, ganization.	and line 15 is 33-	1/3% or more, che	ck this box
17 a	a 10%-facts-and-circumstances ter or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop here	. Explain in Part IV	/ how
ŀ	o 10%-facts-and-circumstances tea or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	and-circumstances	s' test, check this	box and stop here	. Explain in Part IV	/ how the
18	Private foundation. If the organiz	ation did not che	ck a box on line,	13, 16a, 16b, 17a	, or 17b, check this	s box and see instr	uctions ►

## Schedule A (Form 990 or 990-EZ) 2008 The Good People Fund Inc. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you check	•		i Section 509(	ω)( <b>-</b> )		
Section A. Public Support	ted the box on in	10 3 011 411 1.)				
Calendar year (or fiscal yr beginning in)	<b>(a)</b> 2004	<b>(b)</b> 2005	(c) 2006	<b>(d)</b> 2007	<b>(e)</b> 2008	(f) Total
Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')				159,402.	780,202.	939,604.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt				200,1021		
purpose  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 1-5				159,402.	780,202.	939,604.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line						
7c from line 6.)						939,604.
Section B. Total Support					·	
Calendar year (or fiscal yr beginning in) ►	<b>(a)</b> 2004	<b>(b)</b> 2005	<b>(c)</b> 2006	<b>(d)</b> 2007	<b>(e)</b> 2008	(f) Total
9 Amounts from line 6				159,402.	780,202.	939,604.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources				114.	1,025.	1,139.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				114.	1,020.	1,133.
c Add lines 10a and 10b				114.	1,025.	1,139.
11 Net income from unrelated business activities not included inline 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.)						
<ul> <li>13 Total support. (add Ins 9, 10c, 11, and 12.)</li> <li>14 First five years. If the Form 990 is organization, check this box and s</li> </ul>	for the organiza	tion's first, second	d, third, fourth, or	r fifth tax year as a	section 501(c)(3)	940,743. ► x
Section C. Computation of Publ	lic Support Pe	ercentage				
15 Public support percentage for 2008			13 column (f))		15	%
16 Public support percentage from 20						%
Section D. Computation of Inves			9			70
17 Investment income percentage for			hy line 13 colum	n (f))	17	%
18 Investment income percentage for	•	• •	-		-	
19a 33-1/3 support tests – 2008. If the	organization did	I not check the box	x on line 14, and	line 15 is more tha	n 33-1/3%, and lin	e 17 is not
more than 33-1/3%, check this box b 33-1/3 support tests — 2007. If the is not more than 33-1/3%, check the	organization did	I not check a box	on line 14 or 19a,	and line 16 is more	e than 33-1/3%, an	id line 18

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

Schedule A	(Form 990 or 9	90-EZ) 2008	The G	Good Peo	ple	Fund Inc.		26-1887249	Page 4
Part IV	<b>Supplement</b> Part II, line	<b>al Informa</b> 17a or 17l	<b>ation.</b> Con o; or Part	nplete this III, line 12	part 2. Pro	to provide the vide any other	explanation requi additional informa	red by Part II, line ation. (see instruct	10; ions)
	. – – – – –								

#### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Employer Identification number 26-1887249 The Good People Fund Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year ..... 8. 374,814 Aggregate contributions to (during year) . . . . 391,599. Aggregate grants from (during year) . . . . . . . . 24,005. Aggregate value at end of year ..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? ...... Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space 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. Held at the End of the Year 2a a Total number of conservation easements ..... 2b c Number of conservation easements on a certified historic structure included in (a) ...... 2c 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for 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, 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 the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 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:

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

Schedule D (Form 990) 2008

Part III Organizations Maintaini	ng Collection	s of Art, Histo	rical Treasures, or (	Other Similar Asse	ets (continue	∍d)
Using the organization's accession a that apply):	and other records	s, check any of the	e following that are a sign	nificant use of its colle	ction items (che	eck all
a Public exhibition		<b>d</b> Loan	or exchange programs			
<b>b</b> Scholarly research		e Other				
c Preservation for future generation	ons					
4 Provide a description of the organiza Part XIV.	ation's collection	s and explain how	they further the organiza	ation's exempt purpose	e in	
5 During the year, did the organization assets to be sold to raise funds rath	er than to be ma	intained as part of	f the organization's colle	ction?		No
Part IV Trust, Escrow and Custo IV, line 9, or reported ar	odial Arrange n amount on F	ments Comple form 990, Part	ete if organization an X, line 21.	nswered 'Yes' to F	orm 990, Pa	art
1 a Is the organization an agent, trusted included on Form 990, Part X?				r assets not	Yes	No
<b>b</b> If 'Yes,' explain the arrangement in	Part XIV and cor	mplete the followin	ng table:		Amount	
c Beginning balance				1c		
<b>d</b> Additions during the year				1 1		
<b>e</b> Distributions during the year					-	
<b>f</b> Ending balance						
2a Did the organization include an amo					Yes	No
<b>b</b> If 'Yes,' explain the arrangement in		, , -				
Part V Endowment Funds Comp		zation answere	ed 'Yes' to Form 990	, Part IV, line 10.		
	(a) Current year	(b) Prior year		(d) Three years back	(e) Four year	rs back
<b>1 a</b> Beginning of year balance	, ,	, i	,,,,,			
<b>b</b> Contributions						
c Investment earnings or losses						
<b>d</b> Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
<b>g</b> End of year balance						
2 Provide the estimated percentage of	f the year end ba	lance held as:				
a Board designated or quasi-endowme	ent ►	8				
<b>b</b> Permanent endowment ►	8	<u></u>				
c Term endowment	<u> </u>					
3a Are there endowment funds not in the organization by:	•	J			Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations						
<b>b</b> If 'Yes' to 3a(ii), are the related orga		·			3b	
4 Describe in Part XIV the intended us						
Part VI   Investments—Land, Buil						
Description of investment		ost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book V	alue
<b>1a</b> Land						
<b>b</b> Buildings					ļ	
c Leasehold improvements						
<b>d</b> Equipment						
<b>e</b> Other						
Total. Add lines 1a-1e (Column (d) should	l equal Form 990	, Part X, column (	ß), line 10(c).)	▶		
BAA				Sche	edule <b>D</b> (Form 99	90) 2008

Schedule **D** (Form 990) 2008

	vestments—Other Securities See For			07219 rago 0
	Description of security or category (including name of security)	(b) Book value	(c) Method of valua	ation
			Cost or end-of-year mar	ket value
	atives and other financial products			
	quity interests			
	n) should equal Form 990 Part X, col. (B) line 12.)			
	vestments-Program Related (See Fo		e 13)	
(6	a) Description of investment type	<b>(b)</b> Book value	<b>(c)</b> Method of valua Cost or end-of-year mar	ation ket value
			Cost of end-of-year man	Net value
-				
	(should equal Form 990, Part X, Col. (B) line 13.)			
Part IX O	ther Assets (See Form 990, Part X, Ii			1
	<b>(a)</b> Des	cription		(b) Book value
-				
-				
-				
Total Column	(b) Total (should equal Form 990, Part X, col.(	R) line 15)	<b>&gt;</b>	
	ther Liabilities (See Form 990, Part X			
	(a) Description of Liability	(b) Amount		
Federal Incom	e Taxes			
			_	
			_	
			—	
Total Column (1)	Total (about days) France 000 Part V and (D) France 050			
rotai. Column (b)	Total (should equal Form 990, Part X, col. (B) line 25)	· I		

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

BAA

Pai	t XI	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Tota	I revenue (Form 990, Part VIII,column (A), line 12)		781,227.
2	Tota	l expenses (Form 990, Part IX, column (A), line 25)		668,758.
3	Exce	ess or (deficit) for the year. Subtract line 2 from line 1		112,469.
4	Net ι	unrealized gains (losses) on investments		
5	Dona	ated services and use of facilities		_
6	Inves	stment expenses		_
7	Prior	period adjustments		_
8	Othe	r (Describe in Part XIV)		_
9	Tota	l adjustments (net). Add lines 4-8		
10	Exce	ess or (deficit) for the year per financial statements. Combine lines 3 and 9		112,469.
Pai	t XII	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	ırn	
1	Tota	l revenue, gains, and other support per audited financial statements	1	781,227.
2	Amo	unts included on line 1 but not on Form 990, Part VIII, line 12:		
ä	<b>a</b> Net ι	unrealized gains on investments		
ı	<b>D</b> ona	ated services and use of facilities		
(	Reco	overies of prior year grants		
(	d Othe	r (Describe in Part XIV)		
•	<b>A</b> dd	lines 2a through 2d	2e	
3	Subt	ract line <b>2e</b> from line <b>1</b>	3	781,227.
4	Amo	unts included on Form 990, Part VIII, line 12, but not on line 1:		
ä	nves	stments expenses not included on Form 990, Part VIII, line 7b		
ı	<b>O</b> the	r (Describe in Part XIV)		
•	: Add	lines <b>4a</b> and <b>4b</b>	4c	
5	Tota	I revenue. Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12.)	5	781,227.
Pai	ተ XIII	Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	eturn	
1	Tota	l expenses and losses per audited financial statements	1	668,758.
2	Amo	unts included on line 1 but not on Form 990, Part IX, line 25:		
ā	<b>a</b> Dona	ated services and use of facilities		
		year adjustments		
•	: Loss	es reported on Form 990, Part IX, line 25		
(	d Othe	r (Describe in Part XIV)		
•	<b>A</b> dd	lines <b>2a</b> through <b>2d</b>	2e	
3		ract line <b>2e</b> from line <b>1</b>	3	668,758.
4		unts included on Form 990, Part IX, line 25, but not on line 1:		
		stments expenses not included on Form 990, Part VIII, line 7b		
		r (Describe in Part XIV)		
•	: Add	lines <b>4a</b> and <b>4b</b>	4c	
		expenses. Add lines <b>3</b> and <b>4c</b> (This should equal Form 990, Part I, line 18.)	5	668,758.
Pai	ተ XIV	Supplemental Information		
line	4; Par	this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.  Line 9There are no conservation easements to report.		
				. <b></b> .

#### Schedule F (Form 990)

### Statement of Activities Outside the United States

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, line 15, or line 16.

Open to Public Inspection

Name of the organization Employer identification number The Good People Fund Inc. 26-1887249 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? . . . . X Yes No 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (f) Total offices in the employees or region (by type) (i.e., (d) is a program expenditures in region agents in fundraising, program service, describe region services, grants to recipients specific type of region located in the region) service(s) in region 0 Middle East 0 grants to recipients 468,608.

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

Schedule F (Form 990) (2008)

468,608.

	eople Fund Inc.				26-18		Page
Form 990, Part IV, line 15, for a Use Schedule F-1 (Form 990) if	ny recipient who recei	ived more than \$5	<b>Jnited States.</b> Co ,000. Check this	omplete if the obox if no one r	organization ans recipient receive	swered 'Yes' to ed more than \$5	,000 ▶□
(a) Name of organization sec	b) IRS code ction and EIN f applicable) (c) Req	gion (d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	Middle	East purchase of fo	5,135.	check			
	Middle	East loans for sel	5,750.	check			
	Middle	East economic & soo	i 6,532.	check			
	Middle	East youth at risk	p 7,500.	check			
	Middle	East health care wo	s, 154.	check			
	Middle	East Animal therap	10,351.	check			
	Middle	East Food and neces	s 11,000.	check			
	Middle	East school supplie	s 11,000.	check			
	Middle	East Big brother bi	g 15,906.	check			
	Middle	East children's pri	v 16,606.	check			
	Middle	East therapeuticho	r 19,075.	check			
	Middle	East support and co	m 27,240.	check			
	Middle	East food & educati	56,394.	check			
	Middle	East provides sund	i 218,663.	check			

2	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3)
	equivalency letter

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Food	Middle East	75	9,700.	check			
_							
			<u> </u>				F (F 000) 0000

Complete this par	<b>Information</b> t to provide the information required in Part I, line 2, and any other additional information.
Pt I Line 2	We monitor the use of grant funds, by receiving financial reports
	from each organization about the success of each program and how our
	grants were spent including the number of people we helped.
	Annually, we visit the programs in Israel, to ensure the programs are
	running effectively and our mission is being carried out.
Part III Col (C)	The organization recieves reports on the number of people helped.
	Either by receiving invoices from a third party and paying that expense
	directly for a specific person or family, or from social
	workers stating how much food was purchased which includes the number of
	people in each family our grant assisted.

#### SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Open to Public Inspection

name of the organization						2.6 1.007.0	
The Good People Fund Inc.  Part I General Information on Gr	rants and Assista	ance				26-18872	<del>4</del> 3
Does the organization maintain record the selection criteria used to award the     Describe in Part IV the organization's	ne grants or assistand procedures for moni	ce?toring the use of gr	ant funds in the United S	tates.			X Yes No
Part II Grants and Other Assistan		•		•	•		
990, Part IV, line 21 for an Part IV and Schedule I-1 (							
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC 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
Family to Family 6 Circle Drive Hastings-on-Huds NY 10706	57-1169066	501(c)(3)	10,075.				Hunger grant
Project Ezra 465 Grand St 4th Fl	13-2739211	501(c)(3)	5,280.				Food to elderl
Rock and Wrap It Up 405 Oceanpoint Avenue	11-3-25-848	501(c)(3)	5,600.				Hunger relief
The Redistribution Center 12681 West 49th Ave	84-1155394	501 (c) (3)	13,100.				Food & Clothin
2 Enter total number of section 501(c)(3 3 Enter total number of other organization	, ,	•					35

TEEA3901 12/19/08

(a) Type of grant or assistance	<b>(b)</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
Self sufficiency	312	21,924.			
art IV   Supplemental Information. Co	omplete this part to pro	ovide the information	on required in Par	t I, line 2, and any other	er additional information.
t I Line 2 We support	other organizati	ons who help o	other individu	uals in crisis.	We
t I Line 2 receive re	ports from each o	rganization o	n the success	of the program as	nd how our
t I Line 2 money was	spent including t	he number of p	people we hel	ped	
BAA					Schedule I (Form 990

#### **SCHEDULE M** (Form 990)

#### Non-Cash Contributions

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► To be completed by organizations that answered 'Yes' on Form 990. Part IV. lines 29 or 30. ► Attach to Form 990.

Employer identification number

26-1887249 The Good People Fund Inc. Part I Types of Property (a) (b) (c) (d) Check if Number of Revenues reported Method of determining on Form 990, Part VIII, line 1g applicable Contributions revenues Art-Works of art ..... Art-Historical treasures ..... 3 Art-Fractional interests ..... 4 Clothing and household goods ..... 6 Cars and other vehicles ..... Boats and planes ..... 7 8 9 Х 2 66,359. Selling price 10 Securities-Closely held stock ..... Securities-Partnership, LLC, or trust interests . . . 11 Securities-Miscellaneous ..... Qualified conservation contribution (historic structures) . . . . 13 Qualified conservation contribution (other) . . . . . 14 15 Real estate-Residential ..... 16 17 18 Collectibles ..... 19 Food inventory ...... 20 21 Taxidermy ..... 22 23 Scientific specimens ..... 24 25 26 27 Other ► ( 28 Other ► Number of Forms 8283 received by the organization during the tax year for contributions for which the 29 organization completed Form 8283, Part IV, Donee Acknowledgement ...... 29 Yes No **30a** During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30 a Х **b** If 'Yes,' describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32 a Х **b** If 'Yes,' describe in Part II. If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

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

Schedule M (Form 990) 2008

Schedule	eM (Form 990) 2008 The Good People Fund Inc.	26-1887249	Page 2
Part II	Supplemental Information. Complete this part to provide the information read 33. Also complete this part for any additional information.	equired by Part I, lines 30b,	32b,

### SCHEDULE O (Form 990)

### **Supplemental Information to Form 990**

OMB No. 1545-0047

2008

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

Name of the organization	Employer identification number
The Good People Fund Inc.	26-1887249
Pt VI-A, Line 2 The Chairman of the Board, Erik Lindauer, is m	arried to the
treasurer, Lisa Lindauer.	
Pt VI-A, Line 10 Before filing the Form 990, a copy of the Form	is distributed
to every board member for review. The board m	embers_have
10 days to respond, make comments or have item	s_clarified,
if necessary.	
Pt VI-B, Line 12cGPF has in place a policy prohibiting any tran	saction
financial or otherwise that would create a con	flict
of interest. There is a periodic review of al	l_arrangements
All arrangements are recorded and ensured that t	here are no activites
that could jeopardize its tax-exempt status.	
Pt VI-B, Line 15 The salary of the executive director and key p	ersonnel if
applicable, is determined by the board of dire	ctors.
Pt VI-C, Line 19 The organization makes its financials document	s, conflict of
interest policy and other governing documents	available
for download on the organization's website: ww	w.goodpeoplefund.org.
Hard_copies_of_these_documents_may_be_requested,	by email. postal mail,
facsimile or telephone.	

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

radar screen" in both the United States and Israel. Common to all is the presence of an individual or small group who have recognized a problem and have dedicated themselves to resolving it.