

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)

2005

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning **1/1/2005**, 2005, and ending **12/31/2005**, 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization AMERICAN KIDNEY FUND INC	D Employer identification number 23 : 7124261
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 6110 Executive Blvd 1010	E Telephone number (301) 881-3052
		City or town, state or country, and ZIP + 4 Rockville, MD 20852	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

G Website: ▶ www.kidneyfund.org

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

K Check here ▶ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **86,585,568**

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶

M Check ▶ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

		(A) Securities	(B) Other		
Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	77,991,090		
	b Indirect public support	1b	456,656		
	c Government contributions (grants)	1c	0		
	d Total (add lines 1a through 1c) (cash \$ 72,823,192 noncash \$ 5,624,554)				1d 78,447,746
	2 Program service revenue including government fees and contracts (from Part VII, line 93)				2 44,503
	3 Membership dues and assessments				3 0
	4 Interest on savings and temporary cash investments				4 224,307
	5 Dividends and interest from securities				5 200,617
	6a Gross rents	6a	0		
	b Less: rental expenses	6b	0		
	c Net rental income or (loss) (subtract line 6b from line 6a)				6c 0
7 Other investment income (describe ▶)				7 0	
8a Gross amount from sales of assets other than inventory		6,939,452	8a	0	
	b Less: cost or other basis and sales expenses	6,539,838	8b	0	
	c Gain or (loss) (attach schedule) Stmt 1	399,614	8c	0	
	d Net gain or (loss) (combine line 8c, columns (A) and (B))				8d 399,614
9 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ <input type="checkbox"/>				9c 51,144	See Statement 2
a Gross revenue (not including \$ 49,650 of contributions reported on line 1a)	9a	161,310			
b Less: direct expenses other than fundraising expenses	9b	110,166			
c Net income or (loss) from special events (subtract line 9b from line 9a)					
10a Gross sales of inventory, less returns and allowances	10a	0			
b Less: cost of goods sold	10b	0			
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)					10c 0
11 Other revenue (from Part VII, line 103)					11 567,633
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)					12 79,935,564
Expenses	13 Program services (from line 44, column (B))				13 68,621,829
	14 Management and general (from line 44, column (C))				14 824,095
	15 Fundraising (from line 44, column (D))				15 2,510,058
	16 Payments to affiliates (attach schedule)				16 0
	17 Total expenses (add lines 16 and 44, column (A))				17 71,955,982
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)				18 7,979,582
	19 Net assets or fund balances at beginning of year (from line 73, column (A))				19 13,563,954
	20 Other changes in net assets or fund balances (attach explanation) Stmt 3				20 405,141
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)				21 21,948,677

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) Stmt 4 (cash \$ <u>142,693</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22	142,693	142,693	
23	Specific assistance to individuals (attach schedule) Stmt 5	23	63,539,488	63,539,488	
24	Benefits paid to or for members (attach schedule)	24	0	0	
25	Compensation of officers, directors, etc.	25	436,135	165,809	226,473
26	Other salaries and wages	26	2,132,704	1,586,957	341,721
27	Pension plan contributions	27	123,375	84,500	16,902
28	Other employee benefits	28	247,263	178,214	30,075
29	Payroll taxes	29	181,253	124,140	24,832
30	Professional fundraising fees	30	190,128	65,552	124,576
31	Accounting fees	31	22,826	16,848	3,052
32	Legal fees	32	163,206	121,394	21,090
33	Supplies	33	177,337	140,829	16,120
34	Telephone	34	64,978	55,325	1,748
35	Postage and shipping	35	1,213,312	424,507	788
36	Occupancy	36	475,079	355,206	59,135
37	Equipment rental and maintenance	37	200,199	145,347	24,240
38	Printing and publications	38	925,642	344,878	3,976
39	Travel	39	171,097	130,701	7,638
40	Conferences, conventions, and meetings	40	184,561	135,082	9,353
41	Interest	41	0	0	0
42	Depreciation, depletion, etc. (attach schedule)	42	139,055	101,116	15,746
43	Other expenses not covered above (itemize): See Statement 7	43a	1,225,651	763,243	137,482
a	.....	43b			
b	.....	43c			
c	.....	43d			
d	.....	43e			
e	.....	43f			
f	.....	43g			
g	.....			
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	71,955,982	68,621,829	824,095

Stmt 6

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? **Yes** **No**
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 2,152,151.00; (ii) the amount allocated to Program services \$ 675,296;
 (iii) the amount allocated to Management and general \$ 0; and (iv) the amount allocated to Fundraising \$ 1,476,855

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

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

What is the organization's primary exempt purpose? ▶ <u>Direct financial assistance & pub educ</u>	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a <u>See Statement 8</u> (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
b (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
c (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
d (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . ▶	68,621,829

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		0	45	0	
	46 Savings and temporary cash investments		4,107,243	46	7,627,223	
	47a Accounts receivable	47a	629,254			
	b Less: allowance for doubtful accounts	47b	0	189,933	47c	629,254
	48a Pledges receivable	48a	245,744			
	b Less: allowance for doubtful accounts	48b	0	177,558	48c	245,744
	49 Grants receivable			0	49	0
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			0	50	0
	51a Other notes and loans receivable (attach schedule)	51a	0			
	b Less: allowance for doubtful accounts	51b	0	0	51c	0
	52 Inventories for sale or use			267,771	52	3,145,284
	53 Prepaid expenses and deferred charges			75,882	53	96,751
	54 Investments—securities (attach schedule) Stmnt 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV			9,051,057	54	10,591,194
	55a Investments—land, buildings, and equipment: basis	55a	0			
	b Less: accumulated depreciation (attach schedule)	55b	0	0	55c	0
56 Investments—other (attach schedule)			0	56	0	
57a Land, buildings, and equipment: basis	57a	1,007,954				
b Less: accumulated depreciation (attach schedule) Stmnt 10	57b	426,766	282,878	57c	581,188	
58 Other assets (describe ▶)			0	58	0	
59 Total assets (must equal line 74). Add lines 45 through 58.			14,152,322	59	22,916,638	
Liabilities	60 Accounts payable and accrued expenses		435,078	60	724,837	
	61 Grants payable		0	61	0	
	62 Deferred revenue		0	62	0	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
	64a Tax-exempt bond liabilities (attach schedule)			0	64a	0
	b Mortgages and other notes payable (attach schedule)			0	64b	0
	65 Other liabilities (describe ▶ See Statement 11)			153,290	65	243,124
66 Total liabilities. Add lines 60 through 65			588,368	66	967,961	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.					
	67 Unrestricted		12,612,219	67	17,752,217	
	68 Temporarily restricted		776,718	68	3,996,443	
	69 Permanently restricted		175,017	69	200,017	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds			70		
	71 Paid-in or capital surplus, or land, building, and equipment fund			71		
	72 Retained earnings, endowment, accumulated income, or other funds			72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)			13,563,954	73	21,948,677
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.			14,152,322	74	22,916,638

Part VI Other Information *(continued)*

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b <u>443,834</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	<input checked="" type="checkbox"/>
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="text" value="0"/> ; section 4912 <input type="text" value="0"/> ; section 4955 <input type="text" value="0"/>		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	<input checked="" type="checkbox"/>
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<input type="text" value="0"/>
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		<input type="text" value="0"/>
90a	List the states with which a copy of this return is filed <input type="text" value="AL,AK,AZ,AR,CA,CO,CT,DC,GA,IL,IN,KS,KY,LA,ME,MD,MA,MI,I"/>		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b	<input type="text" value="44"/>
91a	The books are in care of <input type="text" value="Managing Dir of Finance and Ops"/> Telephone no. <input type="text" value="301-881-3052"/> Located at <input type="text" value="6110 Executive Blvd 1010, Rockville, MD"/> ZIP + 4 <input type="text" value="20852"/>		
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)? If "Yes," enter the name of the foreign country <input type="text"/>	91b	<input checked="" type="checkbox"/>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <input type="text"/>	91c	<input checked="" type="checkbox"/>
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="text" value="92"/>		

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a Brochures and calendars					24,843
b Conference registration fees					19,660
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	224,307	
96 Dividends and interest from securities			14	200,617	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	399,614	
101 Net income or (loss) from special events					\$51,144
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Royalty Income			15	441,455	
b Rental of membership lists			13	126,178	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		1,392,171	\$95,647
105 Total (add line 104, columns (B), (D), and (E))					1,487,818

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 17

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here

Signature of officer: **LaVarne Burton, CEO** Date: _____

Type or print name and title.

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ Preparer's SSN or PTIN (See Gen. Inst. W): _____

EIN: _____ Phone no.: _____

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

OMB No. 1545-0047

2005

Department of the Treasury
Internal Revenue Service

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

Name of the organization

AMERICAN KIDNEY FUND INC

Employer identification number

23 7124261

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Delia Perez 6110 Executive Blvd, Rockville, MD 20852, US	Staff 40	99,006	13,215	0
Phylis Ermann 6110 Executive Blvd, Rockville, MD 20852, US	Staff 40	88,607	12,263	0
Forrest Daniels 6110 Executive Blvd, Rockville, MD 20852, US	Staff 40	83,605	11,786	0
Gwendolyn Dewberry 6110 Executive Blvd, Rockville, MD 20852, US	Staff 40	83,291	11,469	0
Chris Hines 6110 Executive Blvd, Rockville, MD 20852, US	Staff 40	79,953	11,511	0
Total number of other employees paid over \$50,000 ▶	7			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Target MarkeTeam 1050 Crown Pointe Parkway 1850, Atlanta, GA 30338, US	Direct Mail Counsel	188,348
Total number of others receiving over \$50,000 for professional services ▶	0	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Elevative Networks 11654 Plaza America Drive, Reston, VA 20190, US	IT Services and Prog	153368
Akin Gump Straus Hauer 1333 New Hampshire Ave NW 400, Washington, DC 20036, US	Legal services	107193
Jeanne Nametz 19 Stone Road, West Hurley, NY 12491, US	Strategic Plan Cons.	100000
Spencer Stuart 1440 New York Avenue 400, Washington, DC 20005, US	Exec. Search Firm	86882
Total number of other contractors receiving over \$50,000 for other services ▶	0	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>1700</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	✓	
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		✓
b Lending of money or other extension of credit?		✓
c Furnishing of goods, services, or facilities?		✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	✓	
e Transfer of any part of its income or assets?		✓
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) Stmnt 18	✓	
b Do you have a section 403(b) annuity plan for your employees?	✓	
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		✓
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		✓

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state ▶**
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: **(1)** lines 5 through 12 above; or **(2)** sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ▶ Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	18,830,995	22,914,797	17,783,838	11,624,088	71,153,718
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	654,105	633,238	586,569	653,073	2,526,985
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	343,288	239,818	233,128	302,646	1,118,880
19 Net income from unrelated business activities not included in line 18.	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	19,828,388	23,787,853	18,603,535	12,579,807	74,799,583
24 Line 23 minus line 17	19,174,283	23,154,615	18,016,966	11,926,734	72,272,598
25 Enter 1% of line 23	198,284	237,879	186,035	125,798	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶	26a	1,445,452
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶	26b	38,406,549
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶	26c	72,272,598
d Add: Amounts from column (e) for lines: 18 <u>1,118,880</u> 19 <u>0</u> 22 <u>0</u> 26b <u>38,406,549</u> ▶	26d	39,525,429
e Public support (line 26c minus line 26d total) ▶	26e	32,747,169
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶	26f	45 %

27 Organizations described on line 12: **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year:

(2004) _____ (2003) _____ (2002) _____ (2001) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(2004) _____ (2003) _____ (2002) _____ (2001) _____

c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶	27c	
d Add: Line 27a total, _____ and line 27b total ▶	27d	
e Public support (line 27c total minus line 27d total) ▶	27e	
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is— The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40	41	
	Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 . . . \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000. . . \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41).	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		✓	
b Paid staff or management (Include compensation in expenses reported on lines c through h).		✓	
c Media advertisements.		✓	
d Mailings to members, legislators, or the public		✓	
e Publications, or published or broadcast statements		✓	
f Grants to other organizations for lobbying purposes	✓		1,700
g Direct contact with legislators, their staffs, government officials, or a legislative body.		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h).			1,700

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Stmt 20

Statement 1

Form: 990

Page: 1

Part: I

Question: 8

AMERICAN KIDNEY FUND INC

23-7124261

Sales of Assets Other than Inventory

Publicly Traded Securities

Description:

Sold To:

Sales Price: \$6,939,452.00

Date Sold:

Expense of Sale: \$0.00

Date acquired:

Cost or value when acquired: \$6,539,838.00

How acquired:

Depreciation since acquisition: \$0.00

Net Sale: **\$399,614.00**

Statement 2

Form: 990

Page: 1

Part: I

Question: 9

AMERICAN KIDNEY FUND INC**23-7124261****Schedule of Special Events**

Description	Gross Receipts	Contributions	Gross Revenue	Direct Costs	Net Income (Loss)
Atlanta Golf Tournament	\$79,751.00	\$0.00	\$79,751.00	\$45,559.00	\$34,192.00
Tulsa Run	\$59,440.00	\$13,000.00	\$46,440.00	\$53,123.00	-\$6,683.00
Other Events	\$42,005.00	\$26,500.00	\$15,505.00	\$10,996.00	\$4,509.00
DC Wine Tasting	\$29,764.00	\$10,150.00	\$19,614.00	\$488.00	\$19,126.00
Total:	\$210,960.00	\$49,650.00	\$161,310.00	\$110,166.00	\$51,144.00

Statement 3

Form: 990

Page: 1

Part: I

Question: 20

AMERICAN KIDNEY FUND INC

23-7124261

Other changes in Net Assets or Fund Balances

Explanation	Amount
Unrealized appreciation of equities line b1 Part IV-A	\$75,859.00
Net Income over Expenses of Donated Facilities	\$329,282.00
Total:	\$405,141.00

Statement 4

Form: 990

Page: 2

Part: II

Question: 22

AMERICAN KIDNEY FUND INC**23-7124261****Grants and Allocations**

Date:		Name and Address:
Type:	Cash	Jeffery Fadrowski
Number of individuals:		600 N Wolfe Street
Grant Amount	\$30,000.00	Baltimore, MD 21287
Classification	Educational Stipend	United States
Relationship:	None	
Description of Property:		
	How Determined	
Book Value of Property:		
FMV of Property:		
Date:		Name and Address:
Type:	Cash	Eric Taylor
Number of individuals:		75 Francis Street
Grant Amount	\$62,693.00	Boston, MA 02115
Classification	Educational Stipend	United States
Relationship:	None	
Description of Property:		
	How Determined	
Book Value of Property:		
FMV of Property:		
Date:		Name and Address:
Type:	Cash	Krista Lentine
Number of individuals:		3545 Lafayette Ave
Grant Amount	\$25,000.00	St Louis, MO 63104
Classification	Educational Stipend	United States
Relationship:	None	
Description of Property:		
	How Determined	
Book Value of Property:		
FMV of Property:		
Date:		Name and Address:
Type:	Cash	Yoshio Hall
Number of individuals:		3333 California Street
Grant Amount	\$25,000.00	San Francisco, CA 94143
Classification	Educational Stipend	United States
Relationship:	None	
Description of Property:		
	How Determined	
Book Value of Property:		
FMV of Property:		
Total Grants:	\$142,693.00	

Statement 5

Form: 990

Page: 2

Part: II

Question: 23

AMERICAN KIDNEY FUND INC

23-7124261

Specific Assistance to Individuals

Assistance Type	Total Payments
Transportation, Medication, Health Ins.	\$63,539,488.00
Total:	\$63,539,488.00

Statement 6

Form: 990

Page: 2

Part: II

Question: 42

AMERICAN KIDNEY FUND INC

23-7124261

Depreciation and Depletion

Asset	Current Deprec.
Leaseholds	\$17,952.00
Equipment	\$108,310.00
Furniture	\$12,793.00
Total	\$139,055.00

Statement 7

Form: 990

Page: 2

Part: II

Question: 43

AMERICAN KIDNEY FUND INC**23-7124261****Attachment listing other expenses for Part II**

Description	Total:	Pgm Services	Mgt and General	Fundraising
Investment fees	\$94,658.00	\$0.00	\$94,658.00	\$0.00
Dues and Subscriptions	\$70,742.00	\$47,276.00	\$6,665.00	\$16,801.00
Data processing	\$223,270.00	\$73,370.00	\$982.00	\$148,918.00
Other professional fees	\$403,645.00	\$310,313.00	\$33,825.00	\$59,507.00
Fairs and Exhibits	\$209,983.00	\$202,509.00	\$0.00	\$7,474.00
Mailing list rental	\$74,436.00	\$23,731.00	\$0.00	\$50,705.00
Other outside services	\$145,377.00	\$103,430.00	\$880.00	\$41,067.00
Loss on disposal of assets	\$3,540.00	\$2,614.00	\$472.00	\$454.00
Total:	\$1,225,651.00	\$763,243.00	\$137,482.00	\$324,926.00

Statement 8

Form: 990

Page: 3

Part: III

Question:

AMERICAN KIDNEY FUND INC**23-7124261****Program Services**

Achievement	Pgm. Svc. Exp.
Children & Youth Services, GeneralOther: Community Service projects in the form of pediatric kidney patients attending weekend getaway to the Nations Capitol and being featured in the Kidney Funds Kidney Calendar. (25 Individuals) Grants and Allocations: \$0.00	\$53,974.00
Kidney Diseases Programs: Activities that provide education on prevention, symptoms and treatment of kidney disease and disorders. In 2005, 6 professional conferences were held, 4,864,000 joint educational pieces were mailed and over 2,900 individuals were screened for proper kidney function. (5000000 Individuals) Grants and Allocations: \$0.00	\$2,945,560.00
Kidney Diseases Programs: Research in the form of scholarships for clinical research fellowships in the field of Nephrology. (4 Scholars) Grants and Allocations: \$142,693.00	\$164,989.00
Kidney Diseases Programs: Organ donor activities including distribution of organ donation cards and brochures on organ donation. (5000 Individuals) Grants and Allocations: \$0.00	\$7,821.00
Specialized Human Services Programs, GeneralOther: Provides direct financial grants for treatment related needs of indigent end stage renal patients (medication, transportation, nutritional products, pediatric campership fees, insurance prem. etc) (119000 Individuals) Grants and Allocations: \$0.00	\$65,449,485.00
Total:	\$68,621,829.00

Statement 9

Form: 990

Page: 4

Part: IV

Question: 54

AMERICAN KIDNEY FUND INC**23-7124261****Investments - Securities**

Security	Valuation Type	Amount
Equities	FMV	\$7,796,040.00
Mutual Funds	FMV	\$754,986.00
Corporate Bonds	FMV	\$1,173,432.00
U.S. Government Obligations	FMV	\$866,736.00
Total:		\$10,591,194.00

Statement 10

Form: 990

Page: 4

Part: IV

Question: 57

AMERICAN KIDNEY FUND INC**23-7124261****Schedule of Land, Buildings and Equipment**

Description	Cost	Depreciation	Book Value
Leasehold improv.	\$265,264.00	\$18,249.00	\$247,015.00
Office equipment	\$624,010.00	\$353,596.00	\$270,414.00
Furniture and equip.	\$118,680.00	\$54,921.00	\$63,759.00
Total:	\$1,007,954.00	\$426,766.00	\$581,188.00

Statement 11

Form: 990

Page: 4

Part: IV

Question: 65

AMERICAN KIDNEY FUND INC

23-7124261

Other Liabilities

Liability Description	BOY Amount	EOY Amount
Gift Annuity Payable	\$153,290.00	\$243,124.00
Total:	\$153,290.00	\$243,124.00

Statement 12

Form: 990

Page: 5

Part: IV-A

Question: b(4)

AMERICAN KIDNEY FUND INC

23-7124261

Revenue Audit Line b(4)

Description	Amount
Amounts from supporting org. AKFSO	\$53,963.00
Total:	\$53,963.00

Statement 13

Form: 990

Page: 5

Part: IV-B

Question: b(4)

AMERICAN KIDNEY FUND INC

23-7124261

Expense Audit Line b(4)

Description	Amount
Amounts from supporting org. AKFSO	\$38,711.00
Total:	\$38,711.00

Statement 14

Form: 990

Page: 5

Part: V

Question:

AMERICAN KIDNEY FUND INC**23-7124261****Officers, Directors, Trustees, and Key Employees**

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
Carol Lynn Halal 6110 Executive Blvd Rockville, MD 20852 United States Compensation Explanation: Served as Managing Director of Programs	Staff	40	\$96,853.00	\$9,576.00	\$0.00
Donald Roy 6110 Executive Blvd Rockville, MD 20852 United States Compensation Explanation: Donald Roy served as Interim Executive Director for the period 5/1/05 through 9/30/05 and maintained the position of Managing Director of Finance and Operations.	Staff	40	\$137,192.00	\$11,161.00	\$0.00
LaVarne Burton 6110 Executive Blvd Rockville, MD 20852 United States Compensation Explanation: LaVarne Burton joined the Kidney Fund as CEO effective October 1, 2005.	Exec Director/CEO	40	\$53,752.00	\$854.00	\$0.00
Vinod K Bansal MD FACP FASN 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Chair Med. Affairs	2	\$0.00	\$0.00	\$0.00
Judy Beto PhD RD 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Secretary	2	\$0.00	\$0.00	\$0.00
Robert J Burnstein CPA 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Kenneth K Chen 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Immediate Past Chair	2	\$0.00	\$0.00	\$0.00
Frank M Corso Jr 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Paul W Crawford MD 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Gary C Curhan MD ScD	Trustee	2	\$0.00	\$0.00	\$0.00

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States					
Elisabeth Enright CSW 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Ronald E Frieson 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Andrew T Givens 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Chairman	2	\$0.00	\$0.00	\$0.00
Michael Hartness 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Lori Hartwell 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Anthony Messana 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
John M Newmann PhD MPH 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Frank D Pelliccione 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Conchita Robinson 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Treasurer	2	\$0.00	\$0.00	\$0.00
David R Stokey CPCU 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Susan Vogel MHA RN CNN	Trustee	2	\$0.00	\$0.00	\$0.00

Name and Address	Title	Hrs	Comp.	Benefits	Expenses
6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States					
Newton Walpert 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Margaret S Washington MSW MSPH 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
Phyllis Ziegler 6110 Executive Blvd Suite 1010 Rockville, MD 20852 United States	Trustee	2	\$0.00	\$0.00	\$0.00
TOTALS			\$287,797.00	\$21,591.00	\$0.00

Statement 15

Form: 990

Page: 6

Part: V-B

Question:

AMERICAN KIDNEY FUND INC**23-7124261****Former Officers, Directors, Trustees, and Key Employees**

Name and Address	Loans and Advances	Comp.	Benefits	Expenses
Karen Sendelback 6110 Executive Blvd Rockville, MD 20852 United States	\$0.00	\$148,338.00	\$10,534.00	\$0.00
TOTALS	\$0.00	\$148,338.00	\$10,534.00	\$0.00

Statement 16

Form: 990

Page: 6

Part: VI

Question: 80 b

AMERICAN KIDNEY FUND INC

23-7124261

Related Organizations

Description	Exempt
American Kidney Fund Service Organization	Yes

Statement 17

Form: 990

Page: 8

Part: VIII

Question:

AMERICAN KIDNEY FUND INC

23-7124261

Relationship of Activities

Line No	Relationship of Activities to the Accomplishment of Exempt Purposes
101	Special events provide an opportunity to educate the participants about the Kidney Fund and its programs.
93 a	Defrays the cost of production of informational brochures distributed to the public.
93 b	Defrays part of the costs of running professional education conferences.

Statement 18
Form: Schedule A
Page: 2
Part: III
Question: 3

AMERICAN KIDNEY FUND INC
23-7124261

Explanation of Grant Determination

Explanation of grant qualifications

The American Kidney Fund launched the Clinical Scientist in Nephrology Program fifteen years ago. This program enables promising young nephrologists to conduct clinical research and pursue academic careers for the benefit of patients with kidney disease. A nationally recognized panel of experts in the field selects award recipients based upon the application and personal interviews of the top candidates. In 2005, four clinical scholars from four different Universities were supported. Awards totaled \$142,693 in 2005.

Statement 20
Form: Schedule A
Page: 5
Part: VI-B
Question:

AMERICAN KIDNEY FUND INC
23-7124261

Description of Lobbying Activity

Explanation of Lobbying Activities

The American Kidney Fund is a member of Kidney Care Partners and pays annual dues of \$2,000. Kidney Care Partners is an industry membership organization focusing on kidney related issues. Kidney Care Partners provided an estimate to its members that 85% of its dues are used for lobbying activities. The Fund itself does not conduct any form of lobbying activities.