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Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

2007

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service (77)

For calendar year 2007 or other tax year beginning 10/01/, 2007, and ending 09/30/, 20 08 . See separate instructions.

A Check box if address changed

Name of organization (Check box if name changed and see instructions)

D Employer identification number
(Employees' trust, see instructions for Block D on page 9)

B Exempt under section
 501(c)(3) 220(e)
 408(e) 530(a)
 408A 529(a)

Print or Type

The Ford Foundation
Number, street, and room or suite no. If a P O box, see page 9 of instructions
320 East 43rd Street
City or town, state, and ZIP code
New York, NY 10017

13-1684331
E Unrelated business activity codes
(See instructions for Block E on page 9)
900000

C Book value of all assets at end of year

F Group exemption number (See instructions for Block F on page 9.)

11,045,127,839

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

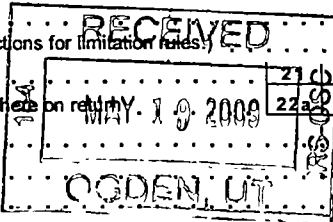
H Describe the organization's primary unrelated business activity. **Investments in partnerships with UBTI.**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **C. F. O.** Telephone number **(212) 573-5000**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales			
b	Less returns and allowances			
c Balance		1c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4 a	Capital gain net income (attach Schedule D)	4a	21,317	21,317
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5	-706,922	-706,922
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See page 11 of the instructions, attach schedule)	12		
13	Total. Combine lines 3 through 12	13	-685,605	-685,605

Part II Deductions Not Taken Elsewhere (See page 12 of the instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)			
14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See page 14 of the instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	
29	Total deductions. Add lines 14 through 28	29	
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-685,605
31	Net operating loss deduction (limited to the amount on line 30)	31	5,158,515
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-5,844,120
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)	33	
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.	34	-5,844,120



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Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation on page 15
 Controlled group members (sections 1564 and 1563) check here See instructions and

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)
 (1) _____ (2) _____ (3) _____

b Enter organization's share of (1) Additional 5% tax (not more than \$11,750) _____
 (2) Additional 3% tax (not more than \$100,000) _____

c Income tax on the amount on line 34 **35c** _____

36 Trusts Taxable at Trust Rates. See instructions for tax computation on page 16 Income tax on
 the amount on line 34 from Tax rate schedule or Schedule D (Form 1041) **36** _____

37 Proxy tax. See page 16 of the instructions **37** _____

38 Alternative minimum tax **38** _____

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies. **39** 0

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) **40a** _____

b Other credits (see page 17 of the instructions) **40b** _____

c General business credit Check here and indicate which forms are attached
 Form 3800 Form(s) (specify) _____ **40c** _____

d Credit for prior year minimum tax (attach Form 8801 or 8827) **40d** _____

e Total credits. Add lines 40a through 40d **40e** 0

41 Subtract line 40e from line 39. **41** 0

42 Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule). **42** _____

43 Total tax. Add lines 41 and 42 **43** 0

44a Payments A 2006 overpayment credited to 2007 **44a** _____

b 2007 estimated tax payments **44b** _____

c Tax deposited with Form 8868 **44c** _____

d Foreign organizations Tax paid or withheld at source (see instructions) **44d** _____

e Backup withholding (see instructions) **44e** _____

f Other credits and payments Form 2439 _____ Form 4136 _____ Other _____ Total **44f** 0

Total payments. Add lines 44a through 44f **45** 0

46 Estimated tax penalty (see page 4 of the instructions) Check if Form 2220 is attached **46** _____

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed **47** 0

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid **48** 0

49 Enter the amount of line 48 you want **Credited to 2008 estimated tax** **Refunded** **49** 0

Part V Statements Regarding Certain Activities and Other Information (see instructions on page 18)

1 At any time during the 2007 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1 If YES, enter the name of the foreign country here **Statement 3** **Yes** **No**
 X

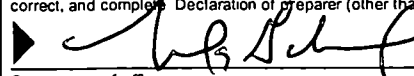
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see page 5 of the instructions for other forms the organization may have to file **Yes** **No**
 X

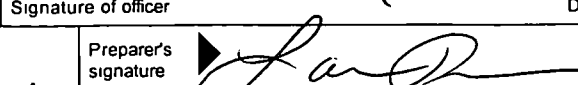
3 Enter the amount of tax-exempt interest received or accrued during the tax year **\$** 0

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1 Inventory at beginning of year 1 _____	6 Inventory at end of year 6 _____
2 Purchases 2 _____	7 Cost of goods sold. Subtract line 6 from line 5 Enter here and in Part I, line 2. 7 0
3 Cost of labor 3 _____	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No X
4a Additional section 263A costs (attach schedule) 4a _____	
b Other costs (attach schedule) 4b _____	
5 Total. Add lines 1 through 4b. 5 _____	

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 taxpayer) is based on all information of which preparer has any knowledge

Sign Here  **05/08/09** **C.F.O. & Treasurer**
 Signature of officer Date Title

Preparer's Use Only  **05/08/09** **Check if self-employed** Preparer's SSN or PTIN _____

Firm's name (or yours if self-employed), address, and ZIP code **PricewaterhouseCoopers LLP** EIN **13-4008324**
300 Madison Ave. New York, NY 10017 Phone no **(646) 471-3000**

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

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions on page 20)

1 Description of property

(1)
(2)
(3)
(4)

2 Rent received or accrued		3 Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0	0
Total income Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		Total deductions. Enter here and on page 1, line 6, column (B) . . . ▶
		0

Schedule E - Unrelated Debt-Financed Income (see instructions on page 20)

1 Description of debt-financed property	2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		0.0000 %	0	0
(2)		0.0000 %	0	0
(3)		0.0000 %	0	0
(4)		0.0000 %	0	0
Totals ▶			0	0
Total dividends-received deductions included in column 8 ▶				0

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 21)

1 Name of Controlled Organization	2 Employer Identification Number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations				
7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals ▶			0	0

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions on page 22)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col. 3 plus col. 4)
(1)				0
(2)				0
(3)				0
(4)				0
Totals ▶	0			0

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions on page 22)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)			0			0
(2)			0			0
(3)			0			0
(4)			0			0
Totals ▶	0	0				0

Schedule J - Advertising Income (see instructions on page 22)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)). . . . ▶	0	0	0	0	0	0

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

(1)			0			0
(2)			0			0
(3)			0			0
(4)			0			0
(5) Totals from Part I	0	0				0
Totals, Part II (lines 1-5). . . ▶	0	0				0

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions on page 23)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
			%
			%
			%
			%

Total. Enter here and on page 1, Part II, line 14 ▶ 0

THE FORD FOUNDATI

Statement 1

EIN: 13-1684331

Form 990-T - Fiscal Year Ended September 30, 2008

Part I. Line 5 - Income/(Loss) from Partnerships

<u>Income/(Loss) from Partnerships:</u>	<u>Income/(Loss)</u>
BC European Capital VIII-1	\$ (5,989)
BC European Capital VIII-6	(5,828)
Berkshire (AIV direct) Fund VI, L.P.	40,005
Berkshire Fund VI (OS), L.P.	(1,533)
Berkshire Fund VII (OS), L.P.	(1,564)
Elevation Dundee Partners, L.P.	9,251
Enterpse Partners V, L.P.	(9,518)
Flexpoint Fund, L.P.	498,159
Francisco Partners II, L.P.	(445)
Bayside Opportunity Fund, L.P. (F/K/A - H.I.G. Bayside Opportunity Fund, L.P.)	92,073
Harbourvest International Private Equity II - Partnership Fund L.P.	19
Harbourvest International Private Equity III - Partnership Fund L.P.	1,161
JLL Fund V AIF I, L.P.	(1,452,523)
Kleiner Perkins Caufield & Byers VIII, L.P.	(460)
Kleiner Perkins Caufield & Byers IX-A, L.P.	(11,410)
Madison Dearborn Capital Partners II, L.P.	(6,604)
Oak Investment Partners VIII, L.P.	3,928
OCM Opportunities Fund VI, L.P.	(17,975)
Providence Equity Partners IV, L.P.	18,134
Providence Equity Partners V, L.P.	(14,533)
Providence Equity Partners VI, L.P.	3,882
Redpoint Ventures II, L.P.	(7)
Riverside Fund III, LP	187,702
Sageview Capital Partners (B), L.P.	981
Sequoia Capital Growth Fund III, L.P.	(4,736)
Sequoia Capital China II, L.P.	(125)
Sequoia Capital China Growth Fund I, L.P.	(1,175)
Sequoia Capital India Growth Fund I, L.P.	(1,907)
Sequoia Capital India III, L.P.	(861)
Silver Lake Partners TSA, L.P.	1,808
Silver Lake Partners II TSA, L.P.	25,734
Vestar Capital Partners IV, L.P.	49,590
J.H. Whitney V APHM AIV, L.P.	(74,829)
Wingate Partners II, L.P.	(6,010)
Total Net Gain/(Loss) from Partnerships - Fiscal Year Ended September 30, 2008	<u>\$ (685,605)</u>
Capital Gain (Part I, Line 4a)	21,317
Passive Loss (Part I, Line 5)	(706,922)
	<u>\$ (685,605)</u>

Statement 2

THE FORD FOUNDATION
EIN: 13-1684331
Form 990-T - Fiscal Year Ended September 30, 2008
Part II, Line 31 - Net Operating Loss Deduction

Unrelated Business Loss:

Fiscal Year Ended September 30, 1993	\$ 197,330
Fiscal Year Ended September 30, 1994	247,664
Fiscal Year Ended September 30, 1995	56,835
Fiscal Year Ended September 30, 1997	184,457
Fiscal Year Ended September 30, 1998	854,443
Fiscal Year Ended September 30, 2002	1,918,862
Fiscal Year Ended September 30, 2004	165,131
Fiscal Year Ended September 30, 2006	471,608
Fiscal Year Ended September 30, 2007	<u>1,062,185</u>
Total Net Operating Loss Deduction - Fiscal Year Ended September 30, 2008	<u>\$ 5,158,515</u>

THE FORD FOUNDATION
EIN: 13-1684331
Form 990-T - Fiscal Year Ended September 30, 2008
Part V, Question 1

Name of the countries where the organization had an interest in or a signature or other authority over a financial account in a foreign country.

Brazil
Chile
China
Egypt
India
Indonesia
Kenya
Mexico
Nigeria
Russia
South Africa
Vietnam

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

(Rev. December 2007)

▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning **01/01/07**, and ending **12/31/07**

Attachment Sequence No. **140**

Name of person filing this return
The Ford Foundation

Number, street, and room or suite no. (or P O box number if mail is not delivered to street address)
320 East 43rd Street

City or town, state, and ZIP code
New York, NY 10017

Filer's tax year beginning **10/01/07**, and ending **09/30/08**

Filer's identifying number
13-1684331

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a Name and address of foreign disregarded entity Capital Africa Ltd. 4th Floor, IBL House, Caudan, Port Louis, Mauritius		b U S identifying number, if any N/A	
c Country(ies) under whose laws organized and entity type under local tax law Mauritius and GBL1 Company		d Date(s) of organization 07/06/1998	e Effective date as foreign disregarded entity N/A
f If benefits under a U S tax treaty were claimed with respect to income of the foreign disregarded entity, enter the treaty and article number N/A	g Country in which principal business activity is conducted Mauritius	h Principal business activity Investment Company	i Functional currency US Dollar

2 Provide the following information for the foreign disregarded entity's accounting period stated above

a Name, address, and identifying number of branch office or agent (if any) in the United States N/A	b Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different Capital Africa Ltd. Suite 520, 5th Floor, Barkly Wharf Le Caudan Waterfront, Port Louis, Mauritius
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3 For the tax owner of the foreign disregarded entity (if different from the filer) provide the following:

a Name and address South African Private Equity Fund III, L.P. P.O. Box 908 GT, Walker House Grand Cayman, Cayman Islands	b Annual accounting period covered by the return (see instructions) 12/31/2007	c U S identifying number, if any 98-0199120
	d Country under whose laws organized Cayman Islands	e Functional currency US Dollar

4 For the direct owner of the foreign disregarded entity (if different from the tax owner) provide the following

a Name and address N/A	b Country under whose laws organized N/A	c U S identifying number, if any N/A
		d Functional currency N/A

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.
If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)		
2 Cost of goods sold		
3 Gross profit (subtract line 2 from line 1)	0.00	0.00
4 Other income		
5 Total income (add lines 3 and 4)	0.00	0.00
6 Total deductions		
7 Other adjustments		
8 Net income (loss) per books		

Schedule C-1 Section 987 Gain or Loss Information

		(a)	(b)
		Amount stated in functional currency of foreign disregarded entity	Amount stated in functional currency of recipient
1	Remittances from the foreign disregarded entity		
2	Section 987 gain (loss) of recipient		
		Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the direct owner?		
4	Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittance from the foreign disregarded entity during the tax year?		

Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for foreign disregarded entities that use DASTM.

Assets		(a)	(b)
		Beginning of annual accounting period	End of annual accounting period
1	Cash and other current assets		
2	Other assets		
3	Total assets		
Liabilities and Owner's Equity			
4	Liabilities		
5	Owner's equity		
6	Total liabilities and owner's equity		

Schedule G Other Information

	Yes	No
1		X
2		X
3		
4		
5		

Schedule H Current Earnings and Profits or Taxable Income (see instructions)

Important: Enter the amounts on lines 1 through 6 in functional currency.

1	Current year net income or (loss) per foreign books of account	1	52,797,868
2	Total net additions	2	4,715,773
3	Total net subtractions	3	45,051,276
4	Current earnings and profits (or taxable income - see instructions) (line 1 plus line 2 minus line 3)	4	12,462,365
5	DASTM gain or loss (if applicable)	5	
6	Combine lines 4 and 5	6	12,462,365
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	
Enter exchange rate used for line 7 ▶			