See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

For calendar year 2008 or other tax year beginning OCT 1, 2008, and ending SEP 30, 2009

A Check box if name changed

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

Print or type

Name of organization (Check box if name changed and see instructions.)
The Union of Concerned Scientists, Inc.

Number, street, and room or suite no. If a P.O. box, see page 9 of instructions.
Two Brattle Square

City or town, state, and ZIP code
Cambridge, MA 02238

Employer identification number
04-2535767

Unrelated business activity codes
(Employees' trust, see instructions for Block D on page 9)

C Book value of all assets at end of year
32245871.

Group exemption number (See instructions for Block F) ▶

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

812930

H Describe the organization's primary unrelated business activity. ▶ Parking Spaces

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes X No

J The books are in care of ▶ Javier Caban Union of Concerned Scientists Telephone number ▶ 617-547-5552

Part I Unrelated Trade or Business Income
(A) Income (B) Expenses (C) Net

1a Gross receipts or sales 20,160. 1c 20,160.

2 Less returns and allowances 2

3 Gross profit. Subtract line 2 from line 1c 20,160.

4 Capital gain net income (attach Schedule D)
4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)
4b Net gain (loss) from dispositions of investments (Form 4797)
4c Capital loss deduction for trusts

5 Income (loss) from partnerships and S corporations (attach statement)
5

6 Rent income (Schedule C)
6

7 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)
7

8 Unrelated debt-financed income (Schedule E)
8

9 Investment income of a section 501(c)(7), (9), or (17) organization
9

10 Exploited exempt activities income (Schedule I)
10

11 Advertising income (Schedule J)
11

12 Other income (See instructions; attach schedule.)
12

13 Total, Combine lines 3 through 12 20,160.

Part II Deductions Not Taken Elsewhere (see 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 3,408.

16 Repairs and maintenance
16

17 Bad debts
17

18 Interest (attach schedule)
18

19 Taxes and licenses
19

20 Charitable contributions (See instructions for limitation rules)
20

21 Depreciation (attach Form 4562)
21

22 Less depreciation claimed on Schedule A and elsewhere on return
22

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 9,693.

30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13
30

31 Net operating loss deduction (limited to the amount on line 30)
31

32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30
32

33 Specific deduction (Generally $1,000, but see instructions for exceptions)
33 1,000.

34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller
34 0.

See Statement 2

21 4,000.

22 4,000.

23

24

25

26

27

28

29 17,101.

30 3,059.

31 3,059.

32 0.

33 1,000.

34 0.

3037051 3-09-09 LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

17400510 794015 04-2535767 2008.05060 The Union of Concerned Scientists 04-253515
Form 990-T (2008)  The Union of Concerned Scientists, Inc.  04-2535767  Page 3

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)  (see instr. on pg 19)

1. Description of property

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

   2. Rent received or accrued

   (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)   |
---|---|---|
Total | 0. | Total |

3. Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)

   (a) 
   (b) Total deductions. Enter here and on page 1, Part I, line 6, column (A)

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 

   |   (1)   |   (2)   |
---|---|---|
Total | 0. | Total |

Schedule E - Unrelated Debt-Financed Income  (See instructions on page 19)

1. Description of debt-financed property

   |   (1)   |   (2)   |
---|---|---|

   2. Gross income from or allocable to debt-financed property

   |   (1)   |   (2)   |
---|---|---|

   3. Deductions directly connected with or allocable to debt-financed property

   (a) Straight line depreciation (attach schedule)
   (b) Other deductions (attach schedule)

   |   (1)   |   (2)   |
---|---|---|

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)

   |   (1)   |   (2)   |
---|---|---|

5. Average adjusted basis of or allocable to debt-financed property (attach schedule)

   |   (1)   |   (2)   |
---|---|---|

6. Column 4 divided by column 5

   |   (1)   |   (2)   |
---|---|---|

7. Gross income reportable (column 2 x column 6)

   |   (1)   |   (2)   |
---|---|---|

8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))

   |   (1)   |   (2)   |
---|---|---|

Totals

   0. 

Total dividends-received deductions included in column 8

   0. 

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations  (See instructions on page 20)

1. Name of controlled organization

   |   (1)   |   (2)   |
---|---|---|

   Exempt Controlled Organizations

   2. Employer identification number

   |   (1)   |   (2)   |
---|---|---|

   3. Net unrelated income (loss) (see instructions)

   |   (1)   |   (2)   |
---|---|---|

   4. Total of specified payments made

   |   (1)   |   (2)   |
---|---|---|

   5. Part of column 4 that is included in the controlling organization's gross income

   Add columns 5 and 10  Enter here and on page 1, Part I, line 8, column (A)

   6. Deductions directly connected with income in column 5

   Add columns 6 and 11  Enter here and on page 1, Part I, line 8, column (B)

   Nonexempt Controlled Organizations

   7. Taxable income

   |   (1)   |   (2)   |
---|---|---|

   8. Net unrelated income (loss) (see instructions)

   |   (1)   |   (2)   |
---|---|---|

   9. Total of specified payments made

   |   (1)   |   (2)   |
---|---|---|

   10. Part of column 9 that is included in the controlling organization's gross income

   Add columns 7 and 10  Enter here and on page 1, Part I, line 8, column (A)

   11. Deductions directly connected with income in column 10

   Add columns 8 and 11  Enter here and on page 1, Part I, line 8, column (B)

   Totals

   0. 

583721 03-08-09

8239510 794015 04-2535767  2008.05060  The Union of Concerned Scientists  04-253571
### Part III: Tax Computation

#### 35. Organizations Taxable as Corporations

See instructions for tax computation.

- Controlled group members (sections 1561 and 1563) check here □
- See instructions and:
  - (1) $ __________
  - (2) $ __________
  - (3) $ __________

- Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
  - (1) $ __________
  - (2) $ __________
  - (3) $ __________
  - Income tax on the amount on line 34 □

#### 36. Trusts Taxable at Trust Rates

See instructions for tax computation. Income tax on the amount on line 34 from:
- Tax rate schedule or □ Schedule D (Form 1041)

#### 37. Proxy tax

See instructions □

#### 38. Alternative minimum tax

□

#### 39. Total

Add lines 37 and 38 to line 35c or 36, whichever applies □

### Part IV: Tax and Payments

#### 40. Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

- Other credits (see instructions) □
  - General business credit. Attach Form 3800 □
  - Credit for prior year minimum tax (attach Form 8801 or 8827) □

- Total credits. Add lines 40a through 40d □

#### 41. Subtract line 40e from line 39 □

#### 42. Other taxes. Check if from:

- Form 4255 □
- Form 8611 □
- Form 8697 □
- Form 8866 □
- Other (attach schedule) □

#### 43. Total tax. Add lines 41 and 42 □

#### 44. Payments: A 2007 overpayment credited to 2008

- 2008 estimated tax payments □
- Tax deposited with Form 8856 □
- Foreign organizations: Tax paid or withheld at source (see instructions) □
- Backup withholding (see instructions) □
- Form 2439 □
- Form 4136 □

#### 45. Total payments. Add lines 44a through 44f □

#### 46. Estimated tax penalty (see instructions). Check if Form 2220 is attached □

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

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

#### 49. Enter the amount of line 48 you want credited to 2009 estimated tax □

### Part V: Statements Regarding Certain Activities and Other Information

(See instructions on page 18)

1. At any time during the 2008 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, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here □

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 □

3. Enter the amount of tax-exempt interest received or accrued during the tax year □

### Schedule A - Cost of Goods Sold

Enter method of inventory valuation □

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost of Goods Sold</th>
<th>Inventory at beginning of year</th>
<th>1</th>
<th>0.</th>
<th>6</th>
<th>Inventory at end of year</th>
<th>6</th>
<th>0.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Purchases</td>
<td>2</td>
<td>2</td>
<td></td>
<td>7</td>
<td>Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Cost of labor</td>
<td>3</td>
<td>3</td>
<td></td>
<td>8</td>
<td>Do the rules of section 263 (with respect to property produced or acquired for resale) apply to the organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Additional section 263A costs</td>
<td>6a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Other costs (attach schedule)</td>
<td>6b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total. Add lines 1 through 4b</td>
<td>5</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Sign Here

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.

---

Preparer's signature □

Preparer's SSN or PTIN □

Preparer's Use Only □

401 Edgewater Place, Suite 300
Wakefield, MA 01880-6208

(781)245-9999

EIN □

Paid Preparer's Use Only □

Form 990-T (2008)

823711 03-09-09

17400510 794015 04-2535767 2008.05060 The Union of Concerned Scie 04-25351
Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions on page 21)

<table>
<thead>
<tr>
<th>1 Description of income</th>
<th>2 Amount of income</th>
<th>3 Deductions directly connected with production of unrelated business income</th>
<th>4 Set-asides (attach schedule)</th>
<th>5 Total deductions and set-asides (col 3 plus col 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions on page 21)

<table>
<thead>
<tr>
<th>1 Description of exploited activity</th>
<th>2 Gross unrelated business income from trade or business</th>
<th>3 Expenses directly connected with production of unrelated business income</th>
<th>4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols 5 through 7</th>
<th>5 Gross income from activity that is not unrelated business income</th>
<th>6 Expenses attributable to column 5</th>
<th>7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td>Total</td>
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</tr>
</tbody>
</table>

Schedule J - Advertising Income
(see instructions on page 21)

Part I Income From Periodicals Reported on a Consolidated Basis

<table>
<thead>
<tr>
<th>1 Name of periodical</th>
<th>2 Gross advertising income</th>
<th>3 Direct advertising costs</th>
<th>4 Advertising gain or (loss) (col 2 minus col 3). If a gain, compute cols 5 through 7</th>
<th>5 Circulation income</th>
<th>6 Readership costs</th>
<th>7 Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

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.)

<table>
<thead>
<tr>
<th>1 Name of periodical</th>
<th>2 Gross advertising income</th>
<th>3 Direct advertising costs</th>
<th>4 Advertising gain or (loss) (col 2 minus col 3). If a gain, compute cols 5 through 7</th>
<th>5 Circulation income</th>
<th>6 Readership costs</th>
<th>7 Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule K - Compensation of Officers, Directors, and Trustees
(see instructions on page 22)

<table>
<thead>
<tr>
<th>1 Name</th>
<th>2 Title</th>
<th>3 Percent of time devoted to business</th>
<th>4 Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
</tr>
</tbody>
</table>

Total. Enter here and on page I, Part II, line 14

0.
Form 8868
(Rev April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box □
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only □

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6068, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print Name of Exempt Organization Employer identification number

The Union of Concerned Scientists, Inc. 04-2535767

File by the due date for filing your return. See instructions.

Number, street, and room or suite no. If a P.O. box, see instructions.

Two Brattle Square

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

Cambridge, MA 02238

Check type of return to be filed (file a separate application for each return):

☐ Form 990
☐ Form 990-BL
☐ Form 990-EZ
☐ Form 990-PF

☐ Form 990-T (corporation)
☐ Form 990-T (sec. 401(a) or 408(a) trust)
☐ Form 1041-A

☐ Form 4720
☐ Form 5227
☐ Form 6069
☐ Form 8870

Union of Concerned Scientists

Telephone No ▶ 617-547-5552 FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box □
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) □

☐ If this is for the whole group, check this box □

☐ If it is for part of the group, check this box □ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until August 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

☐ calendar year □

☐ tax year beginning OCT 1, 2008 □, and ending SEP 30, 2009 □

2 If this tax year is for less than 12 months, check reason:

☐ Initial return
☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a $ 0.

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b $ 0.

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). 3c $ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

TONNESON & COMPANY CPAS PC 04-2943536
401 EDGEWATER PLACE, STE 300, WAKEFIELD, MA 01880

13240206 794015 04-2535767 2008.05040 The Union of Concerned Scie 04-25351
The Union of Concerned Scientists, Inc.  

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parking Lease Expense</td>
<td>7,693</td>
</tr>
<tr>
<td>Legal And Accounting Expenses</td>
<td>2,000</td>
</tr>
<tr>
<td><strong>Total to Form 990-T, Page 1, line 28</strong></td>
<td><strong>9,693</strong></td>
</tr>
</tbody>
</table>

Form 990-T Other Deductions Statement 2
<table>
<thead>
<tr>
<th>Footnotes</th>
<th>Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOL Carryover from 9/30/07</td>
<td>22,355</td>
</tr>
<tr>
<td>Amount utilized 9/30/08</td>
<td>-1,391</td>
</tr>
<tr>
<td>NOL Carryover to 9/30/09</td>
<td>20,964</td>
</tr>
<tr>
<td>Amount utilized 9/30/09</td>
<td>-3,059</td>
</tr>
<tr>
<td>NOL Carryover to 9/30/10</td>
<td>17,905</td>
</tr>
</tbody>
</table>