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 2009 or other tax year beginning JUN 1, 2009, and ending MAY 31, 2010

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

THE GERMAN MARSHALL FUND OF US

UNITED STATES

501(c)3

Number, street, and room or suite no. If a P.O. box, see page 8 of instructions.

1744 R. STREET, NW

City or town, state, and ZIP code

WASHINGTON, DC 20009

900000

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

52-0954751

Unrelated business activity codes (See instructions for Block E on page 9)

C Book value of all assets at end of year

206,851,537

D Check organization type

X 501(c) corporation 501(c) trust 401(a) trust Other trust

E Group exemption number (See instructions for Block F)

2009

F Check organization type

X 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. PARTNERSHIP INVESTMENTS

If Yes, enter the name and identifying number of the parent corporation.

J The books are in care of KEN CROGNALE, CPA

Telephone number 202-683-2650

Part I Unrelated Trade or Business Income

1a Gross receipts or sales 1c Balance

1b Less returns and allowances

2 Cost of goods sold (Schedule A, line 7)

3 Gross profit. Subtract line 2 from line 1c

4a Capital gain net income (attach Schedule D)

4b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)

4c Capital loss deduction for trusts

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

6 Rent income (Schedule C)

7a Unrelated debt-financed income (Schedule E)

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

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

10 Exploited exempt activity income (Schedule I)

11 Advertising income (Schedule J)

12 Other income (See instructions; attach schedule.)

13 Total, Combine lines 3 through 12

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)

15 Salaries and wages

16 Repairs and maintenance

17 Bad debts

18 Interest (attach schedule)

19a Taxes and licenses

19b Charitable contributions (See instructions for limitation rules)

21 Depreciation (attach Form 4562)

22 Less depletion claimed on Schedule A and elsewhere on return

23 Contributions to deferred compensation plans

24 Employee benefit programs

25a Excess expenses (Schedule I)

26a Excess readjustment costs (Schedule J)

27a Other deductions (attach schedule)

28a Total deductions. Add lines 14 through 28

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

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

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

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

33 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
**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:
     - a. Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
       1. (1) $ ▶️
       2. (2) $ ▶️
       3. (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. 10,076.

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) ▶️
   - ▶️ 36.

37. **Proxy tax.** See instructions ▶️
   - ▶️ 37.

38. **Alternative minimum tax** ▶️
   - ▶️ 38.

39. **Total.** Add lines 37 and 38 to line 35c or 36, whichever applies ▶️
   - ▶️ 39. 10,076.

**Part IV | Tax and Payments**

40a. **Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)** ▶️
   - ▶️ 40a.

40b. **Other credits (see instructions)** ▶️
   - ▶️ 40b.

40c. **General business credit. Attach Form 3800** ▶️
   - ▶️ 40c.

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

40e. **Total credits** Add lines 40a through 40d ▶️
   - ▶️ 40e.

41. **Subtract line 40e from line 39** ▶️
   - ▶️ 41. 10,076.

42. **Other taxes. Check if from:** ▶️ Form 4255 ▶️ Form 8611 ▶️ Form 8697 ▶️ Form 8666 ▶️ Other (attach schedule) ▶️
   - ▶️ 42.

43. **Total tax.** Add lines 41 and 42 ▶️
   - ▶️ 43. 10,076.

44a. **Payments: A 2009 overpayment credited to 2009** ▶️
   - ▶️ 44a.

44b. **2009 estimated tax payments** ▶️
   - ▶️ 44b.

44c. **Tax deposited with Form 8868** ▶️
   - ▶️ 44c. 11,000.

44d. **Foreign organizations; Tax paid or withheld at source (see instructions)** ▶️
   - ▶️ 44d.

44e. **Backup withholding (see instructions)** ▶️
   - ▶️ 44e.

44f. **Other credits and payments:** ▶️ Form 2439 ▶️ Form 4136 ▶️ Other ▶️ Total ▶️
   - ▶️ 44f.

45. **Total payments.** Add lines 44a through 44f ▶️
   - ▶️ 45. 11,000.

46. **Estimated tax penalty (see 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.

48. **Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid** ▶️
   - ▶️ 48. 662.

49. **Enter the amount of line 48 you want credited to 2010 estimated tax** ▶️
   - ▶️ 49. 662. Refunded ▶️

**Part V | Statements Regarding Certain Activities and Other Information** (See instructions on page 17)

1. At any time during the 2009 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 ▶️ SEE STATEMENT 1 ▶️
   - Yes No ▶️ X

2. During the tax year, did the organization receive a distribution from, or was the grantor of, or transferor to, a foreign trust? If YES, see page 5 of the instructions for the forms for other forms the organization may have to file ▶️
   - ▶️ 2.

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

**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 | 7 |
| 3. Cost of labor | 3 | from line 5. Enter here and in Part I, line 2 | |
| 4a. Additional section 263A costs | 4a | 8. Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No | |
| b. Other costs (attach schedule) | 4b | ▶️ 8. Yes ▶️ No | |
| 5. Total. Add lines 1 through 4b | 5 |

**Sign Here**

- **Signature of officer** ▶️
- **Date** 4/1/11
- **Title** CHIEF FINANCIAL OFFICER

**Paid Preparer's Use Only**

- **Preparer's signature** ▶️
- **Date** 4/1/11
- **Check if self-employed** ▶️
- **Preparer's SSN or PTIN** 102435012
- **EIN** 41-1944416
- **Phone no.** 703-336-6400

**Preparer's certification**

- **Form 990-T (2009)**

---

82
## Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

<table>
<thead>
<tr>
<th>Description of income</th>
<th>Amount of income</th>
<th>Deductions directly connected (attach schedule)</th>
<th>Set-asides (attach schedule)</th>
<th>Total deductions and set-asides (col. 3 plus col. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(3)</td>
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</tr>
<tr>
<td>(4)</td>
<td></td>
<td>Enter here and on page 1, Part I, line 9, column (A)</td>
<td>Enter here and on page 1, Part I, line 9, column (B)</td>
<td></td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td></td>
<td><strong>0</strong></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description of exploited activity</th>
<th>Gross unrelated business income from trade or business</th>
<th>Expenses directly connected with production of unrelated business income</th>
<th>Net income (loss) from unrelated trade or business (column 2 minus column 3) if a gain, compute cols 5 through 7</th>
<th>Gross income from activity that is not unrelated business income</th>
<th>Expenses attributable to column 5</th>
<th>Excess exempt expenses (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<tr>
<td>(4)</td>
<td></td>
<td>Enter here and on page 1, Part I, line 10, col. (A)</td>
<td>Enter here and on page 1, Part I, line 10, col. (B)</td>
<td>Enter here and on page 1, Part I, line 26</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

## Schedule J - Advertising Income

<table>
<thead>
<tr>
<th>Name of periodical</th>
<th>Gross advertising income</th>
<th>Direct advertising costs</th>
<th>Advertising gain (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7</th>
<th>Circulation income</th>
<th>Readership costs</th>
<th>Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<tr>
<td>(4)</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Totals (carry to Part II, line (5))</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Part II Income From Periodicals Reported on a Separate Basis

<table>
<thead>
<tr>
<th>Name of periodical</th>
<th>Gross advertising income</th>
<th>Direct advertising costs</th>
<th>Advertising gain (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7</th>
<th>Circulation income</th>
<th>Readership costs</th>
<th>Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(4)</td>
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<td></td>
</tr>
<tr>
<td><strong>Totals from Part I</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td><strong>0</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Schedule K - Compensation of Officers, Directors, and Trustees

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Percent of time devoted to business</th>
<th>Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>%</td>
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<td>%</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>Enter here and on page 1, Part II, line 14</strong></td>
<td><strong>0</strong></td>
<td></td>
</tr>
<tr>
<td>DESCRIPTION</td>
<td>AMOUNT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------</td>
<td>-----------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOUGLAS EMMETT PROPERTIES LP</td>
<td>73,321.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL TO FORM 990-T, PAGE 1, LINE 5: 73,321.

<table>
<thead>
<tr>
<th>FORM 990-T</th>
<th>CONTRIBUTIONS</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESCRIPTION/KIND OF PROPERTY</td>
<td>METHOD USED TO DETERMINE FMV</td>
<td>AMOUNT</td>
</tr>
<tr>
<td>CONTRIBUTION CARRYOVER</td>
<td>N/A</td>
<td>2,888,997.</td>
</tr>
</tbody>
</table>

TOTAL TO FORM 990-T, PAGE 1, LINE 20: 2,888,997.
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 8888.

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 8888 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 8888 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, 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 8888. 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
THE GERMAN MARSHALL FUND OF US
UNITED STATES

Employer identification number
52-0954751

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.
1744 R. STREET, NW

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
WASHINGTON, DC 20009

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 990-T (trust other than above)
☐ Form 1041-A
☐ Form 4720
☐ Form 5227
☐ Form 6069
☐ Form 8870

A. MICHAEL GEIGER

Telephone No. ▶ 202-683-2650 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

I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until APRIL 15, 2011 ▶ , 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 JUN 1, 2009 ☐ and ending MAY 31, 2010

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 $ 11,000.

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 $ 11,000.

Caution. If you are going to make an electronic fund withdrawal with this Form 8888, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.
THE GERMAN MARSHALL FUND OF US
UNITED STATES 52-0954751

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instr. on pg 18)

1. Description of property

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

2. Rent received or accrued

<table>
<thead>
<tr>
<th></th>
<th>From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)</th>
<th>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)</th>
<th>Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(2)</td>
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<td>(3)</td>
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<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>0.</td>
<td>Total 0.</td>
<td></td>
</tr>
</tbody>
</table>

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

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

0. 0.

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

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

<table>
<thead>
<tr>
<th></th>
<th>Straight line depreciation (attach schedule)</th>
<th>Other deductions (attach schedule)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
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</tr>
</tbody>
</table>

Totals

Total dividends-received deductions included in column 8

0. 0.

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

1. Name of controlled organization

2. Employer identification number

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

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

Add columns 5 and 10

Enter here and on page 1, Part I, line 8, column (A)

Add columns 6 and 11

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

Totals

0. 0.

923721 01-08-10

83

Form 990-T (2009)