# Form **990**

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <a href="www.IRS.gov/form990">www.IRS.gov/form990</a>

OMB No 1545-0047

Open to Public Inspection

A F	or the 2	014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015				
ВС	heck if ap	plicable C Name of organization Council on Foreign Relations Inc		D Em	ployer	identification number
Га	ddress cha	ange		13	-1628	168
$\Gamma_{N}$	ame chan	% KEITH OLSON  Doing business as				
┌ Ir	ııtıal returi	n		F Tele	ephone r	number
<b>—</b> Fi		Number and street (or P O box if mail is not delivered to street address) Room/suite 58 East 68th Street	е		•	
	turn/term	illiated		(2:	12)434	4-9400
	mended re	New York, NY 10065		<b>G</b> Gro	ss receip	pts \$ 192,832,200
		F Name and address of principal officer	H(a)	Is this a gr	nun ret	urn for
		RICHARD HAASS PRESIDENT		subordinate		┌ Yes  No
		58 East 68th Street New York, NY 10065	H(b)	Are all subo		es
				included?	oramati	es j fesj No
<b>I</b>	ax-exem <sub>l</sub>	ot status		If "No," atta	ach a lı	ist (see instructions)
J V	Vebsite	:► www CFR org	H(c)	Group exer	mption	number ►
<b>K</b> Fo	rm of org	anization	<b>L</b> Yea	r of formation	1921	M State of legal domicile NY
P	art I	Summary				
ıce		riefly describe the organization's mission or most significant activities FR is an independent, non-partisan membership organization, think tank, & publolicy choices facing the US & other countries	isher d	edicated to	under-	- standing the foreign
喜	-					
Governance	2 0	heck this box 🔭 if the organization discontinued its operations or disposed of	more t	han 25% of	its net	t assets
ŝ	- "			25 % 0.		
Activities &	3 N	lumber of voting members of the governing body (Part VI, line 1a) $\cdot\cdot\cdot$ .		3	35	
Ë	<b>4</b> N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	4 34	
돗	<b>5</b> T	otal number of individuals employed in calendar year 2014 (Part V, line 2a) $$ .			5	5 467
ď	6 ⊺	otal number of volunteers (estimate if necessary)			6	
	1	otal unrelated business revenue from Part VIII, column (C), line 12			7	, ,
	<b>b</b> N	let unrelated business taxable income from Form 990-T, line 34			7	
				Prior Year		Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	35,395,			
Rayenue	9 10	Program service revenue (Part VIII, line 2g)			3,400 37,900	
Ě	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			3,400	+
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		- 1,55	,,,,,,,	
		12)		61,05	50,100	77,485,500
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0	· · · · ·
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0
8	15	Salaries, other compensation, employee benefits (Part IX, column (A ), lines $5-10$ )		33,70	900,1	34,767,500
<u>8</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0	0
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶4,308,800				
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		31,02	21,000	28,094,561
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	64,722,			
	19	Revenue less expenses Subtract line 18 from line 12			2,800	12,728,500
Net Assets or Fend Balances			Begi	inning of Cu Year	rrent	End of Year
988 888	20	Total assets (Part X, line 16)		491,86	9,900	502,053,700
절절	21	Total liabilities (Part X, line 26)		84,99	3,900	85,381,300
žΞ	22	Net assets or fund balances Subtract line 21 from line 20		406,87	76,000	416,672,400

#### Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign	
Here	

Signature of officer keith olson exec vp, cfo & treasurer Type or print name and title

# Paid Preparer **Use Only**

Print/Type preparer's name Scott Thompsett Preparer's signature Scott Thompsett Firm's name FGRANT THORNTON LLP

Firm's address ► 757 THIRD AVE 2ND FLOOR

NEW YORK, NY 100172013

May the IRS discuss this return with the preparer shown above? (see instruction

For Paperwork Reduction Act Notice, see the separate instructions.

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part 1</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

# Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 260			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b  0	1	1	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule $O$	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
ь	If "Yes," enter the name of the foreign country ►JA			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	E.		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		Νο
	organization solicit any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
b	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
d	file Form 8282?	<b>7</b> c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
•	III which the organization is neclised to issue qualified health plans	1		
	Enter the amount of reserves on hand	14a	 	No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		1/1/0
U	In 165, has it med a form 720 to report these payments. It ino, provide an explanation in schedule of	1 740	i	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	ection A. Governing Body and Management					
					Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	1a	35			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	34			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	Yes	
8						
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	even	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	tıvıtıe	s of such chapters,	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act	tıvıtıe on's e	s of such chapters, xempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov • •	s of such chapters, exempt purposes? erning body before filing 	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annual	tivitie on's e s gov • • Form 9	s of such chapters, exempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov  Form 9 ly inte 	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with	tivitie on's e s gov  Form 9 ly inte 	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with an Schedule O how this was done.	tivitie on's e s gov Form S ly inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FO Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?	tivitie on's ecs gov	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review of the structure of the process.	tivitie on's e s gov Form 9 ly inte the p	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FOId the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's e s gov  form 9  ly inte the p  lew ar	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	tivitie on's e s gov  form 9  ly inte the p  lew ar	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in th	tivitie on's e s gov  Form 9 ly inte the p lew ar lie deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov  form 9 ly inte the p lew arise deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD or the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	tivitie on's e s gov  form 9 ly inte the p lew arise deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD or the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's e s gov  form 9 ly inte the p lew arise deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official.  Other officers or key employees of the organization.  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's e cs gov	s of such chapters, exempt purposes? erning body before filing erests that could give olicy? If "Yes," describe ad approval by beration and decision? ular arrangement with a to evaluate its s to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b 16a A, HI	Yes Yes Yes Yes Yes Yes	No No

- OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website V Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records ►KEITH OLSON

58 EAST 68TH STREET

New York, NY 10065 (212) 434-9400

Form 990 (2014)	
-----------------	--

)	a	g	e	7
---	---	---	---	---

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ♣ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - ◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	han d n is l	ne l both	box, an d	officer		( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	ed Oral Ing	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations		

1b	Sub-Total	•			
С	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	5,126,934	0	498,138

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►58

			Yes	No		
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No		
4	organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such					
	ındıvıdual	4	Yes			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No		

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Neuman's Kitchen Inc, 203 Chrystie St NEW YORK, NY 10002	Catering	889,295
EW Howell Co LLC, 592 Fifth Avenue 7th Fl NEW YORK, NY 10036	Construction	807,882
Guardsmark LLC, PO Box 11407 BIRMINGHAM, AL 35246	Security	552,382
Palantır Net Inc, 2211 N Elston Avenue Suite 400 CHICAGO, IL 60614	Web/Software Design	547,593
Debevoise Plimpton LLP, 919 Third Avenue 28th Fl NEW YORK, NY 10022	Legal	513,759
2 Total number of independent contractors (including but not limited to those listed above	who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►19

Contributions, Giffs, Grants and Other Similar Amounts	1a t c c f
Program Service Revenue	26 to 00 to
evenue	3 4 5 66 th c c c c 8 8 4
Other B	10a
	11a
	12

Form 99		•						Page <b>9</b>
Part V	/++1	Statement o Check if Schedu	f Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တည	1a	Federated cam	paigns 1a					
Gifts, Grants ilar Amounts	ь	Membership du	es <b>1b</b>	6,263,900				
المِ ق	С	Fundraising eve	ents <b>1c</b>					
iffis ar 4	d	Related organiz	zations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants	s (contributions) <b>1e</b>					
ution: ner Si	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above	45,133,100				
Contrib and Oth	g	1a-1f \$	ons included in lines	642,600	51,397,000			
<u>ರಹ</u>	h	Total. Add lines	sia-ir	<u> </u>	31,397,000			
en	,	FOREIGN AFFAIRC	DUBLICATION	Business Code			2 4 5 222	
even.	2a b	FOREIGN AFFAIRS	PUBLICATION	541800	8,839,000	6,723,100	2,115,900	
Program Serwce Revenue	C							
	d							
	e							
<u>=</u>	f	All other progra	am service revenue					
<u>₹</u>	_	Total Add lines			9 930 000			
	g 3		ome (including dividend		8,839,000			
		and other simila	aramounts)	🟲	1,599,000		463,168	1,135,832
	4		stment of tax-exempt bond p	roceeds .	0			
	5	Royalties	(ı) Real	(II) Personal	0			
	6a	Gross rents	2,072,000	(II) Personal				
	ь	Less rental	1,134,300					
	c	expenses Rental income	937,700	0				
	d	or (loss) Net rental incoi	me or (loss)		937,700			937,700
	_		(ı) Securities	(II) O ther	·			
	7a	Gross amount from sales of assets other	123,470,500	4,986,900				
	ь	than inventory Less cost or						
		other basis and sales expenses	111,617,900	2,594,500				
	С	Gain or (loss)	11,852,600	2,392,400				
	d 8a		rom fundraising		14,245,000			14,245,000
eune		events (not inc						
Other Revenue		See Part IV, lin						
ф	ь		penses b					
0	C		(loss) from fundraising e	vents 🛌	0			
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a					
	ь	Less direct ex	penses b					
	С	Net income or (	loss) from gaming activ	rities	0			
	10a	Gross sales of returns and allo						
	ь	Less cost of a	oods sold <b>b</b>					
			(loss) from sales of inve	ntory 🛌	0			
		Miscellaneous	s Revenue	Business Code				
	11a	MISCELLANEC	ous	900099	467,800			467,800
	ь							
	С							
	d	All other reven	L					
	е	<b>Total.</b> Add lines	s 11a-11d	▶	467,800			
	12	Total revenue.	See Instructions	· · · •	77,485,500	6,723,100	2,579,068	16,786,332

## Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colu
---

	Check if Schedule O contains a response or note to any line in this	Part IX		<u> </u>	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	676,400	676,400		
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,218,539	1,218,539		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,207,500	1,149,700	2,701,300	356,500
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	23,410,200	19,046,200	2,428,000	1,936,000
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	1,684,500	1,026,100	564,900	93,500
9	Other employee benefits	3,756,600	3,150,300	169,000	437,300
10	Payroll taxes	1,708,700	1,406,300	174,200	128,200
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	210,500	128,400	70,400	11,700
c	Accounting	183,800	112,000	61,600	10,200
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	2,306,800		2,306,800	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,727,861	3,647,461	908,800	171,600
12	Advertising and promotion	0			
13	Office expenses	2,054,100	1,047,600	959,600	46,900
14	Information technology	1,418,300	1,169,700	168,100	80,500
15	Royalties	0			
16	Occupancy	2,296,300	1,574,500	590,500	131,300
17	Travel	2,686,900	2,146,900	154,300	385,700
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,233,600	1,843,500	129,100	261,000
20	Interest	2,617,200	1,457,400	1,086,600	73,200
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,090,700	1,618,000	1,352,400	120,300
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PUBLICATION & PRINTING	3,409,200	3,080,500	292,500	36,200
b	MISCELLANEOUS	859,300	607,600	223,000	28,700
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	64,757,000	46,107,100	14,341,100	4,308,800
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form	990 (2	2014)			Page <b>11</b>
Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	8,000	1	8,000
	2	Savings and temporary cash investments	61,780,700	2	79,988,300
	3	Pledges and grants receivable, net	15,681,300	3	27,197,600
	4	Accounts receivable, net	1,655,700	4	2,850,600
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	o	5	0
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			0
82	7	Notes and loans receivable, net	0	7	0
ď	8	Inventories for sale or use	158,700		142,300
	9	Prepaid expenses and deferred charges	607,900		530,300
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  113,139,500			555,555
	ь	Less accumulated depreciation	75,309,800	10c	74,623,100
	11	Investments—publicly traded securities	103,560,100	11	128,881,200
	12	Investments—other securities See Part IV, line 11	233,107,700	12	187,832,300
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	491,869,900	16	502,053,700
	17	Accounts payable and accrued expenses	6,295,900	17	7,113,000
	18	Grants payable	202,300	18	0
	19	Deferred revenue	4,397,100	19	4,789,200
	20	Tax-exempt bond liabilities	61,170,000	20	59,605,000
co.	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ge g		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	12,928,600	25	13,874,100
	26	D	84,993,900	26	85,381,300
	20	Total liabilities. Add lines 17 through 25	04,555,560	20	00,001,000
ф Ф		lines 27 through 29, and lines 33 and 34.			
anc S	27	Unrestricted net assets	135,950,700	27	69,006,500
<u> </u>	28	Temporarily restricted net assets	102,659,300	28	168,138,000
Ā	29	Permanently restricted net assets	168,266,000	29	179,527,900
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
s or	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
ΑS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net .	33	Total net assets or fund balances	406,876,000	33	416,672,400
Z	34	Total liabilities and net assets/fund balances	491,869,900	34	502,053,700
					Form <b>990</b> (2014)

Par	TEXT Reconcilliation of Net Assets  Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A ), line 12)				
2	Total expenses (must equal Part IX, column (A), line 25)	1		77,4	485,500
_		2		64,7	757,000
3	Revenue less expenses Subtract line 2 from line 1	3		12,	728,500
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		406 (	376,000
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities	5		-1,2	242,800
O	Dollated Services and use of lacinities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1 6	589,300
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			572,400
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	וו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		3b		

#### **Additional Data**

Software ID: Software Version:

**EIN:** 13-1628168

Name: Council on Foreign Relations Inc

· · · · · · · · · · · · · · · · · · ·				<u>-</u>	
(Code	) (Expenses \$	490,800	including grants of \$	) (Revenue \$	)
Task Force					
(Code	) (Expenses \$	1,602,600	including grants of \$	) (Revenue \$	)
Education					

1 01111 330, Fait 11.	Line te. Frogra	III SCI VICE A	ecompnishments (See the	instructions)	
(Code	) (Expenses \$	1,157,000	including grants of \$	) (Revenue \$	)
National Program					
(Code	) (Expenses \$	2,481,300	ıncludıng grants of \$	) (Revenue \$	)
Websites					

of in 990, Part III - Line 4c. Program Service Accomplishments (See the Instructions)							
(Code	) (Expenses \$	1,507,600	including grants of \$	) (Revenue \$	)		
O utreach							
(Code	) (Expenses \$	90,000	ıncludıng grants of \$	) (Revenue \$	)		
Global Board of Advisors	s						

01111 330, 1 dit 111	Line te. i regiui	ii Sei Vice A	Accomplishments (See the	instructions,	
(Code	) (Expenses \$	310,800	including grants of \$	) (Revenue \$	)
Term member program					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title				ne b oth ctor/	an of	ınless fficer tee)	_	(D)  Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	<b>(F)</b> Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former			related organızatıons	
(1) Carla A Hills	1 0	x		х				0	0	0	
Co-Chairman (1) Robert E Rubin	0 0										
Co-Chairman	0.0	x		х				0	0	0	
(2) Richard N Haass	35 0	<b>.</b> ,,		.,				4 247 726		20.402	
President (Non-Voting Board)	0 0	Х		Х				1,347,736	0	39,183	
(3) David M Rubenstein	1 0	l x		x				0	0	0	
vice chairman	0 0										
(4) John P Abizaid		x						0	0	0	
director (5) Peter Ackerman	1 0										
Director	0 0	X						0	0	0	
(6) Zo Baırd	1 0	x						0	0	0	
director	0 0	_ ^						0	0		
(7) Alan S Blinder	1 0	x						0	0	0	
director (8) Mary mcinnis Boies	0 0										
		х						0	0	0	
director (9) David G Bradley	1 0										
dırector	0 0	X						0	0	0	
(10) Tom Brokaw	1 0	x						0	0	0	
director	0 0							, and the second			
(11) R Nicholas Burns	1 0	x						0	0	0	
director (12) Steven A Denning	0 0										
director	0 0	X						0	0	0	
(13) Martın S Feldstein	1 0	.,									
director	0 0	Х						0	0	0	
(14) Laurence D Fink	1 0	l x						0	0	0	
director	0.0										
(15) Stephen Friedman	1 0	x						0	0	0	
director (16) Ann M Fudge	1 0										
director	0 0	X						0	0	0	
(17) Pamela brooks Gann	1 0	х						0	0	0	
director	0 0							Ů	0		
(18) Thomas H Glocer	1 0	x x						0	0	0	
director (19) J Tomilson Hill	0 0										
		х						0	0	0	
director (20) Donna J Hrinak	1 0										
director	0 0	X						0	0	0	
(21) Shirley Ann Jackson	1 0	x						0	0	0	
director	0 0								0		
(22) Jamı Mıscık	1 0	x						0	0	0	
director (23) Eduardo J Padrn	0 0						_				
director	0 0	x						0	0	0	
(24) John A Paulson	1 0										
director	0 0	Х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (d nan o n is b	ne b	ox, ι an o	ınless fficer	;	( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee or director		2/1099-MISC)	2/1099-MISC)	organization and related organizations				
(26) Colin L Powell	1 0	х						0	0	0
director (1) Margaret g Warner	0 0									
		x						0	0	0
director (2) Vin Weber	1 0									
director	0 0	X						0	0	0
(3) Christine Todd Whitman	1 0	x						0	0	0
director	0 0	_ ^						Ů	0	
(4) peter b henry	1 0	x						0	0	0
director (5) ruth porat	0 0									
		x						0	0	0
director (6) Blair Effron	1 0									
Director	0 0	X						0	0	0
(7) Susan Hockfield	1 0	, , , , , , , , , , , , , , , , , , ,								0
Director	0 0	Х						0	0	0
(8) Richard E Salomon	1 0	l x						0	0	0
Director	0.0							_	_	
(9) James G Stavndis	1 0	×						0	0	0
Director (10) Daniel H Yergin	0 0									
Director	0 0	X						0	0	0
(11) Keith C Olson	35 0			.,						20.400
Exec VP & CFO	0 0			Х				429,962	0	39,183
(12) James M Lindsay	35 0			x				381,477	0	39,183
Sr VP & Director Of Studies	0 0							,		,
(13) Nancy D Bodurtha	35 0			х				254,981	0	16,860
VP, Meetings and Membership (14) Irina Faskianos	35 0									
VP,National Program & Outreach	0 0			Х				244,981	0	23,851
(15) Suzanne E Helm	35 0									
VP, Philanthropy & Relations	0 0			Х				317,442	0	37,741
(16) Jan-Marie Hughes	35 0			х				249,942	0	34,380
VP, HR and Administration	0 0							,		,
(17) Lisa K Shields	22 0			х				150,500	0	28,545
VP,Glob Comm & Media Relations (18) Lynda A Hammes	35 0									
Publisher, Foreign Affairs	0 0			Х				222,481	0	26,401
(19) Jeffrey A Reinke	35 0			.,						
Secretary of the Corporation	0 0			Х				196,547	0	30,382
(20) Caroline N McCall	35 0			х				169,808	0	32,370
VP Education	0 0								_	
(21) Gideon G Rose	35 0					x		277,481	0	36,783
Editor, Foreign Affairs (22) Robert B Kahn	35 0									
Sr Fellow for Inter Econ	0 0					X		218,234	0	26,654
(23) Paul B Stares	35 0							22:	_	27
Sr Fellow and Director of CPA	0 0					Х		221,985	0	34,544
(24) Valene B Post	35 0					х		220,641	0	27,062
Director of Events	0 0							<u>,</u>		<u>, , , , , , , , , , , , , , , , , , , </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pose to a person individual trustae or director	ion ( nan o n is b	ne b oth	ox, u an of ⁄trus	nless ficer tee)	Forme	( <b>D</b> ) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(51) Michael A Levi Director, Geoeconomic Studies	35 0  0 0					х		222,736	0	25,016

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493308003055

**Employer identification number** 

#### OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization Council on Foreign Relations Inc

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

		Reason for Public Charity Status (All organizations must complete this part.) See instructions.						
	rt I						•	ons.
The d	organı	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)	
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n <b>section 170(</b>	b)(1)(A)(i).	
2	Γ	A school described in	section 170(b	<b>)(1)(A)(ii).</b> (Attach S	chedule E )			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in <b>sec</b>	ction 170(b)(1)	)(A)(iii).	
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the						
_	_	hospital's name, city, An organization opera		afit of a gallage or uni		ar anaratad bu	a gavaramantal vait d	a a sub a d un
5	ı				versity owned t	or operated by	a governmental unit u	escribed in
_	_	section 170(b)(1)(A)				470(1)(	437437	
6	<u> </u>	A federal, state, or loc						
7	⊽	An organization that n described in section 1				om a governme	ental unit or from the <u>c</u>	jeneral public
8	Γ	A community trust de:				rt II )		
9	$\Gamma$	An organization that n	ormally receiv	es (1) more than 331	1/3% of its supp	oort from contri	butions, membership	fees, and gross
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of
		ıts support from gross	ınvestment ın	come and unrelated b	usiness taxabl	e income (less	section 511 tax) from	n businesses
		acquired by the organi	ızatıon after Ju	ine 30, 1975 See <b>sec</b>	tion 509(a)(2).	. (Complete Pa	rt III )	
10	$\sqcap$	An organization organ	ized and opera	ited exclusively to tes	t for public safe	ety See <b>sectio</b>	n 509(a)(4).	
11	Γ	An organization organ	ized and opera	ited exclusively for the	e benefit of, to p	perform the fun	ctions of, or to carry o	out the purposes of
		one or more publicly s						
_	_	the box in lines 11a th						
а	ı	<b>Type I.</b> A supporting of supported organization						
		organization You mus				ty or the arrect	ors or crustees or the	Supporting
b	Γ	Type II. A supporting				n with its suppo	orted organization(s), l	by having control or
		management of the su			same persons t	hat control or r	manage the supported	organization(s) <b>You</b>
_	_	must complete Part IV						
С	ļ	Type III functionally is supported organization						grated with, its
d	Г	Type III non-function						janization(s) that is
	·	not functionally integr						
	_	(see instructions) <b>Yo</b>						
е	ı	Check this box if the c					s a Type I, Type II, T	ype III functionally
f		integrated, or Type III Enter the number of si						
g		Provide the following i						
9					,			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the or	ganızatıon	(v) A mount of	(vi) A mount of
		organization		organization	listed in your		monetary support	other support (see
				(described on lines	docume	ent?	(see instructions)	ınstructions)
1-9 above or IRC								
	section (see Instructions))							
	Yes No							
Tota	ı							

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 (d) 2013 **(b)** 2011 (c) 2012 (e) 2014 (f) Total in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do 47,654,800 46,650,900 32,692,700 35,395,400 51,397,000 213,790,800 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either O paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 47,654,800 46,650,900 32,692,700 35,395,400 51,397,000 213,790,800 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 22,094,288 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 191,696,512 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total beginning in) 🟲 47,654,800 46,650,900 32,692,700 35,395,400 51,397,000 213,790,800 Amounts from line 4 Gross income from interest, dividends, payments received on 3,508,544 3,146,019 3,998,800 4,912,500 3,671,000 19,236,863 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or 111,817 111,817 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 69,600 170,984 82,800 146,700 467,800 937,884 capital assets (Explain in Part VI) 11 Total support Add lines 7 234,077,364 through 10 Gross receipts from related activities, etc (see instructions) 12 12 32,471,588 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 14 81 895 % Public support percentage for 2013 Schedule A, Part II, line 14 15 15 81 211 % 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┡┰ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14

33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 **(e)** 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2013 Schedule A, Part III, line 15 16

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Section D. Computation of Investment Income Percentage

Investment income percentage from 2013 Schedule A, Part III, line 17

Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))

17

18

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

17

18

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ection A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^7$ If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section $501(c)(4)$ , $(5)$ , or $(6)$ ? If "Yes," answer (b) and (c) below.	За		
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	: Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	<b>4</b> c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
Ŀ	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
Ŀ	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
L1	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
ŀ	• A family member of a person described in (a) above?	11a 11b		
	A 135% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
5	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year <b>(see</b>	inctri	ıct ione)	
	The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government elinstructions.)			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	h Did the organization evergise a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

#### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

#### Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
<b>a</b> From 2009			
<b>b</b> From 2010			
<b>c</b> From 2011			
d From 2012			
<b>e</b> From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount  i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 33 and 4c			
8 Breakdown of line 7			
<b>a</b> From 2010			
<b>b</b> From 2011			
<b>c</b> From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493308003055

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

	me of the organization ncil on Foreign Relations Inc	<del></del>	Employer identification number					
		13-1628168						
Pa	rt I Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		unds	or Accounts. Complete if th				
		(a) Donor advised funds		(b) Funds and other accounts				
L	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
ŀ	Aggregate value at end of year							
•	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	-	ıor advı	rsed <b>┌ Yes ┌ No</b>				
5	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?	<del>-</del> _ <del>-</del>						
Pai	rt II Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990, Part IV, line 7.				
!	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of ar Preservation of a	certifie	rically important land area d historic structure n of a conservation				
	easement on the last day of the tax year			Held at the End of the Year				
а	Total number of conservation easements		2a	Held at the End of the Year				
a b	Total acreage restricted by conservation easements		2b					
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c					
<u>.</u>	Number of conservation easements included in (c) acq historic structure listed in the National Register	. ,	2d					
	Number of conservation easements modified, transferr	red. released. extinguished. or terminate	ed by th	ne organization during				
	the tax year ▶  Number of states where property subject to conservate	ion easement is located ▶						
;	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	f violations, and <b>Yes No</b>				
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments c	during the year				
	A mount of expenses incurred in monitoring, inspecting  • \$	g, and enforcing conservation easement	s durin	g the year				
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)				
	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemed	e footnote to the organization's financia ents	l stater	ments that describes				
ar	<b>TIII</b> Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.				
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its reve	or rese	earch in furtherance of public				
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	.16 (ASC 958), to report in its revenue its held for public exhibition, education,	statem	nent and balance sheet				
	(i) Revenue included in Form 990, Part VIII, line 1			<b>▶</b> \$				
	(ii) Assets included in Form 990, Part X			<b>-</b> \$				
	If the organization received or held works of art, histor following amounts required to be reported under SFAS							
а	Revenue included in Form 990, Part VIII, line 1			<b>▶</b> \$				
b	Assets included in Form 990, Part X			<b>►</b> \$				

Part	Organizations Maintaining Co	llections of Art	t, His	toric	al Treas	ures, or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck ar	y of the fo	ollowing that ar	e a sıgnıfıcant use	of its
а	Public exhibition		d	Г	Loan or ex	change progra	ms	
b	Scholarly research		e		Other			
c	Preservation for future generations							
4	Provide a description of the organization's c Part XIII	ollections and expla	ıın hov	v they	further the	e organızatıon's	exempt purpose	ın
5	During the year, did the organization solicit							F., F.,
Dar	assets to be sold to raise funds rather than  t IV Escrow and Custodial Arrange							Yes No
Fal	Part IV, line 9, or reported an air					Jii aliswereu	res to roilli	790,
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	ediary	for co	ntributions	or other asse		┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ving tal	ole			
							An	nount
C	Beginning balance					1	c	
d	Additions during the year					1	d	
е	Distributions during the year						e	
f	Ending balance					_ 1	f	
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21,	for esc	row or cus	stodial account	: liability?	┌ Yes
ь	If "Yes," explain the arrangement in Part XI	II Check here if the	e expla	anatior	n has been	provided in Pa	rt XIII	<u></u> Г
Pa	rt V Endowment Funds. Complete							
4 -	Danimum af was a balanca	(a)Current year 369,190,600	(b)F	7rior yea 333,66		Two years back   1 301,718,400	( <b>d)</b> Three years back 303,107,500	<b>(e)</b> Four years back 262,462,000
1a L	Beginning of year balance	8,304,400			3,400	6,649,000	12,418,800	17,188,500
b	Contributions	8,304,400		3,22	3,400	0,049,000	12,410,600	17,100,500
С	Net investment earnings, gains, and losses	9,916,500		45,27	3,000	44,236,300	1,678,700	39,675,700
d	Grants or scholarships							
е	Other expenditures for facilities and programs	6,950,600			4,900	13,899,300	12,437,400	12,014,600
f	Administrative expenses	9,114,400			7,000	5,038,300	3,049,400	4,204,100
g	End of year balance	371,346,500		369,19	0,600	333,666,100	301,718,200	303,107,500
2	Provide the estimated percentage of the cur	•	ce (lın	e 1g, c	olumn (a)	) held as		
а	Board designated or quasi-endowment 🕨	22 010 %						
b	Permanent endowment ► 45 810 %							
c	Temporarily restricted endowment ► 32 The percentages in lines 2a, 2b, and 2c sho	180 % uld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiz	ation t	hat ar	e held and	administered	for the	
	organization by						[a.	Yes No
	(i) unrelated organizations			•			3a(	
b	(ii) related organizations				le R?.		3	<del></del>
4	Describe in Part XIII the intended uses of t	•						
Par	t VI Land, Buildings, and Equipme	ent. Complete if	the o	rganız	ation ans	swered 'Yes'	to Form 990, Pa	art IV, line
	11a. See Form 990, Part X, line	10.		1 ( ) 6		1 (1) (1)	1,,,	T (D D )
	Description of property				ost or other (investment)			(d) Book value
1a	Land					7,252,0	00	7,252,000
b I	Buildings					46,358,4	00 9,173,90	0 37,184,500
c I	Leasehold improvements					39,425,6	00 15,130,10	0 24,295,500
d I	Equipment					18,348,7	00 14,212,40	0 4,136,300
	Other					1,754,8		1,754,800
Tota	I. Add lines 1a through 1e (Column (d) must o	equal Form 990, Part	X, colu	mn (B)	, line 10(c,	).)	<b></b> ►	74,623,100
							Schedule [	) (Form 990) 2014

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization a	nswered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	( <b>b)</b> Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		Cost of end-of-year market value
(2)Closely-held equity interests		
(3)Other (A) GROWTH ORIENTED HEDGE FUNDS	59,855,400	F
(B) DIVERSIFIERS	98,134,400	F
(C) PRIVATE EQUITY FUNDS	24,943,500	F
(D) PRIVATE RE/NR FUNDS OF FUND	4,899,000	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	, ,	
Part VIII Investments—Program Related. Cor See Form 990, Part X, line 13.	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	,	
Part IX Other Assets. Complete if the organization		Part IV, line 11d See Form 990, Part X, line 15
(a) Descrip	tion	(b) Book value
<b>Part X</b> Other Liabilities. Complete if the organ Form 990, Part X, line 25.		Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	( <b>b)</b> Book value	
Federal income taxes	0	
ACCRUED POSTRETIREMENT	6,048,000	
INTEREST RATE SWAP AGREEMENT	7,826,100	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	13,874,100	

Part		evenue per Audited Financial Statered 'Yes' to Form 990, Part IV, line 1		nts With Revenue p	er R	<b>eturn</b> Complete ıf	
1		support per audited financial statements			1	73,380,900	
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses) o	n investments	2a	-1,242,800			
b	Donated services and use of fa	cilities	2b				
c	Recoveries of prior year grants		2c				
d	Other (Describe in Part XIII )		2d	-1,689,300			
e	Add lines 2a through 2d .		·		2e	-2,932,100	
3	Subtract line <b>2e</b> from line <b>1</b> .				3	76,313,000	
4	Amounts included on Form 990	), Part VIII, line 12, but not on line <b>1</b>					
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b .	4a	2,306,800			
b	Other (Describe in Part XIII )		4b	-1,134,300			
c	Add lines <b>4a</b> and <b>4b</b>		· ·		4c	1,172,500	
5	Total revenue Add lines ${\bf 3}$ and	<b>4c.</b> (This must equal Form 990, Part I, line	12)		5	77,485,500	
Part 2		cpenses per Audited Financial Sta			per	Return. Complete	
		swered 'Yes' to Form 990, Part IV, line				C2 504 500	
1		audited financial statements			1	63,584,500	
2		not on Form 990, Part IX, line 25	ا م	I			
a L		cilities	2a				
b			2b				
C			2c				
d			2d		3-		
e	<u>-</u>				2e	63 594 500	
3 4					3	63,584,500	
		), Part IX, line 25, but not on line 1:  ded on Form 990, Part VIII, line 7b	1 45	2,306,800			
a b			4a 4b	-1,134,300			
C			40	-1,134,300	4c	1,172,500	
5		d <b>4c.</b> (This must equal Form 990, Part I, lin	• • • 18 \		5	64,757,000	
_	XIII Supplemental Info		<del>c 10 )</del>			04,737,000	
Provid	de the descriptions required for /, line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and				de any additional	
	Return Reference	Explanation					
	le D part XI and XII ting for uncertainty in income	Part XI, line 2d Change in value of interest Benefits (\$594,000) Write-off of uncollect line 2D (\$1,689,300) part XI line 4b and X Rental Income on part VIII of the Form 99 The Council on Foreign Relations has adop	able gr XII line 90 (\$1,	ant & contributions (\$87 4b re-classification of 1 134,300)	79,70 rental	0) Total changes in expenses to offset	
taxes	90, Schedule D, Part V	("ASC") 740 accounting for uncertainties in income taxes. Asc 740-10 clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return including issues relating to financial statement recognition and measurement. This section provides that the tax effect from an uncertain tax position can be recognized in the financial statements only if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. CFR is exempt from federal and new York state income taxation by virtue of being an organization described in section 501 (c)(3) of the IRC and similar provisions of the New York State tax code. Nevertheless, CFR may be subjected to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the code. The tax years ending June 30, 2012, 2013, 2014 and 2015 are still open to audit for both federal and state purposes. CFR believes that there are no material uncertain tax positions within its financial statements.  The Council holds a substantial endowment for the purposes of funding future programmatic activities, including seminars, publications, website activities and more. The Council's endowment principal.					
		shall be left untouched, with the earnings of consistent with the Council's tax-exempt	n the i	nvestments to be appro			

Jenedale 2 (1 31111 33 3) 23 13		age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493308003055

**SCHEDULE F** (Form 990)

#### **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

**Employer identification number** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection** 

Council of Foreign Kelations The				13-1628168	
Part I General Informatio "Yes" to Form 990, Pa			ne United States. Co	omplete if the organiz	ation answered
1 For grantmakers. Does the	organization m	aıntaın record	s to substantiate the a	amount of its grants	
and other assistance, the gra	antees' eligibili	ity for the grar	nts or assistance, and	the selection criteria	
used to award the grants or a	assistance?.				┌ Yes ┌ No
2 For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its gran	ts and other
3 Activites per Region (The follow	ving Part I, line 3	3 table can be d	uplicated if additional spa	ace is needed )	
(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	<b>(f)</b> Total expenditures for and investments in region
(1) Central America and the Caribbean			Investments		131,455,432
( 2)					
(3)					
(4)					
(5)					
<b>3a</b> Sub-total					131,455,432
<b>b</b> Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					131,455,43
For Paperwork Reduction Act Notice, see	the Instructions	for Form 990.	Cat	No 50082W Sched	ule F (Form 990) 2014

Pā						<b>ited States.</b> Comp duplicated if additioi			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(	1)								
(	2)								
(	3)								
(	4)								
2						les by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganızatıons or ent	ities					

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
(1)										
( 2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
( 12)										
(13)										
(14)										
( 15)										
( 16)										
( 17)										
(18)										
	•	<u> </u>		•	•		•			

#### Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	দ	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	<u>~</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	দ	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	্ব	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	ঘ	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	_	Yes	굣	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5** 

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

#### 990 Schedule F, Supplemental Information

Return Reference	Explanation
	The Council on Foreign Relations invests in domestic and foreign limited partnerships that may own an interest in a foreign corporation, passive foreign investment company, or fore ign partnership. Nevertheless, CFR's investment activities may not reach the thresholds re quired for filing the Forms 926, 5471, 8621 or 8865. To the extent such a form was complet ed, it has been filed with the Organization's Form 990-T.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493308003055

OMB No 1545-0047

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990.

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service Name of the organization

Council on Foreign Relations Inc

► Information about Schedule I (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Employer identification number

13-1628168

Dart T	General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . . . . . . . . . . . . . .

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Humanity In Action 601 W 26th Street New York, NY 10001	13-3977257	501(c)(3)	676,400				to Support Diversity Efforts

	Enter total number of section $501(c)(3)$ and government organizations listed in the line $1$ table .	
--	---	--

Schedule I (Form 990) 2014							
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.						
	Part III can be duplicated if additional space is needed.						

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Addıtıonal Data Table					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
	As part of a grant from the Robina Foundation, CFR supported Humanity in Action's work to encourage greater diversity in the foreign policy field by recruiting, educating, and mentoring students and young professionals from underrepresented communities. The funds enabled undergraduate and graduate students to participate in two programs, the Humanity in Action Fellowship and the Diplomacy and Diversity Fellowship. The relationship between CFR and Humanity in Action was governed by a formal agreement letter. CFR senior staff monitored compliance with the agreement by requiring Humanity in Action to submit annual narrative and financial reports, through regular discussions with senior HIA staff about their progress, and by sending CFR staff to observe Humanity in Action's programs firsthand.						

# **Additional Data**

Software ID: Software Version:

**EIN:** 13-1628168

Name: Council on Foreign Relations Inc

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

· or mr bbo, benedure 1, r dr t 111, or din	u vv. /				
(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Arthur Ross Book Award Gold Prize Recipient	1	15,000			
Arthur Ross Book Award Silver Prize Recipient	1	7,500			
Hıtachı Japan Fellowshıp	6	161,251			
IAF Fellowship	14	643,091			
Murrow Fellowship	1	75,000			
Stanton Nuclear Security Fellowship	5	183,333			
Studies Adjunct Senior Fellowship	2	87,824			
Studies Senior Fellowship on Global Governance	1	45,540			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493308003055

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Council on Foreign Relations Inc **Employer identification number** 

13-1628168

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
	an ectors, trastees, officers, including the GEO/Executive Director, regarding the items effected in line 14		res	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a	Yes	
	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III	35		110
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

-	T			T		T	
(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of	<b>(F)</b> Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

# Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

- tile complete time parties any addition	nee complete the partie and accurate members						
Return Reference	Explanation						
part ı, line 1a	For a portion of the year and as a condition of his employment, the President was required by the Board to reside in a residence owned by the Council The value of this employer-provided housing was grossed up and included in the President's taxable wages. It is reported in Schedule J, Part II, Column (b) (iii) In July 2014, the Council on Foreign Relations sold the residence used by the President. In accordance with his employment contract, the Council provided the President a housing allowance which is similarly grossed up and included in the his taxable wages. That housing allowance is reflected on Schedule J, Part II, Column (b)(iii). Schedule J, Part II, Column (b)(iii) also reflects tax gross up payments on a portion of the President's compensation paid in light of IRS limits on retirement plan compensation. Part I, Line 5a The Director of Events receives compensation continent on revenues from rental of the organization's facilities.						
part I, line 7	non-fixed payments The Council on Foreign Relations provides discretionary bonuses to officers and key employees reported on the organization's form 990. The process for determining those bonuses has been described in Schedule O. where the Council discusses its compensation process. The Council's compensation and bonuses are determined in the same process.						

Schedule J (Form 990) 2014

Software ID: Software Version:

**EIN:** 13-1628168

Name: Council on Foreign Relations Inc

# Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	<b>(B)</b> Breakdown of <b>(i)</b> Base Compensation		ikdown of W-2 and/or 1099-MISC compensation (ii) Bonus & (iii) Other n incentive reportable compensation compensation		(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
Richard N Haass, President (Non-Voting Board)	(I) (II)		266,000	671,774	20,798 0	19,899	1,388,433	0
1 Keith C Olson, Exec VP & CFO	(I) (II)		85,000	0	20,798 0	19,899 0	470,659 0	0
2 James M Lindsay, Sr VP & Director Of Studies	(I) (II)	0	0	0	20,798 0	19,752 0	422,027	0
3 Nancy D Bodurtha, VP, Meetings and Membership	(I) (II)	0	0	0 0	16,798 0	1,259 0	273,038 0	0
4 Irina Faskianos, VP,National Program & Outreach	(I) (II)		47,500	0 0	15,998 0	9,019 0	269,998 0	0
<b>5</b> Suzanne E Helm, VP, Philanthropy & Relations	(I) (II)		60,000	0	20,769 0	18,295 0	356,506 0	0
<b>6</b> Jan-Mane Hughes, VP, HR and Administration	(I)	) 0	0	0 0	15,995 0	19,525 0	285,462	0
<b>7</b> Lisa K Shields, VP,Glob Comm & Media Relations	(I) (II)		25,000 0	0 0	10,160 0	19,189 0	179,849 0	0
<b>8</b> Lynda A Hammes, Publisher, Foreign Affairs	(I) (II)		50,000	0	13,998 0	13,443 0	249,922	0
<b>9</b> Jeffrey A Reinke, Secretary of the Corporation	(I) (II)	0	0	14,201	11,997 0	19,287 0	227,831 0	0
10 Caroline N McCall, VP Education	(I) (II)		20,000	0 0	13,985 0	19,281 0	203,074	0
<b>11</b> Gideon G Rose, Editor, Foreign Affairs	(I) (II)		50,000	0	18,398 0	19,632 0	315,511	0
12 Robert B Kahn, Sr Fellow for Inter Econ	(I) (II)		7,000	0	17,067 0	10,431 0	245,732	0
13 Paul B Stares, Sr Fellow and Director of CPA	(I) (II)		22,000	0 0	16,159 0	19,229 0	257,373 0	0
14 Valerie B Post, Director of Events	(I) (II)		112,800	0 0	8,719 0	19,038 0	248,398 0	0
<b>15</b> Michael A Levi, Director, Geoeconomic Studies	(I) (II)		16,000	1	17,989 0	7,871 0	248,596 0	0 0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
Schedule K

(Form 990)

Department of the Treasury

financed property?

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

Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 Attach to Form 990.

►Information about Schedule K (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

**DLN: 93493308003055**OMB No 1545-0047

2014

Open to Public Inspection

Schedule K (Form 990) 2014

Internal Revenue Service Name of the organization **Employer identification number** Council on Foreign Relations Inc 13-1628168 Part I Bond Issues (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes 62,680,000 Acquisition/Renovation Office District of Columbia 53-6001131 25483VJU9 09-04-2012 Χ Χ Х Blda **Proceeds** С D Α В Amount of bonds retired 3,075,000 Amount of bonds legally defeased 2 Total proceeds of issue 3 62,680,000 Gross proceeds in reserve funds 4 Capitalized interest from proceeds 5 Proceeds in refunding escrows 6 Issuance costs from proceeds 7 Credit enhancement from proceeds 8 Working capital expenditures from proceeds Capital expenditures from proceeds 10 Other spent proceeds 11 62,680,000 Other unspent proceeds 12 Year of substantial completion 13 2010 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Χ 15 Has the final allocation of proceeds been made? Χ 16 Does the organization maintain adequate books and records to support the final 17 Х allocation of proceeds? Part III **Private Business Use** В C D Α Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned Χ property financed by tax-exempt bonds? Are there any lease arrangements that may result in private business use of bond-2

Χ

Cat No 50193E

Sche	dule K (Form 990) 2014									Page <b>2</b>	
Par	Private Business Use (Continued)										_
						3		<u>c</u>		D	
			Yes	No	Yes	No	Yes	No	Yes	No	_
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use		Х							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?										
С	Are there any research agreements that may result in private business us financed property?	se of bond-		х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance										
4	Enter the percentage of financed property used in a private business use to other than a section 501(c)(3) organization or a state or local government			0 %							_
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										_
7	Does the bond issue meet the private security or payment test?		Х								_
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bounds sued?			Х							_
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of									_
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		х						1	-
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements un Regulations sections 1 141-12 and 1 145-2?		х								
Par	t IV Arbitrage			<u> </u>			•	<u>'</u>	<u> </u>		
		Α			В		С		D		
		Yes	No	Yes	No	Y	es	No	Yes	No	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		×								
2	If "No" to line 1, did the following apply?										
а	Rebate not due yet?	Х									_
b	Exception to rebate?		Х								
С	No rebate due?		Х							 j	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed					<b> </b>					-
3	Is the bond issue a variable rate issue?		Х								_
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х								_
b	Name of provider	0									
С	Term of hedge										_
d	Was the hedge superintegrated?									<del></del>	
e	Was the hedge terminated?										

		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b	Name of provider	0							
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?	Х							

	Α		В		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Х							

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Schedule K (Form 990) 2014

DLN: 93493308003055

Employer identification number

# OMB No 1545-0047

Open to Public Inspection

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

**Transactions with Interested Persons** ► Complete if the organization answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Part I Exc								3-16	28168			
	ess Benefit Tra	nsactions	(section	501(c)(3), sec	ction 501(c	)(4), and 501				only)		
	plete if the organiza											
1 (a) Nam	ne of disqualified pe	rson (b) F		nip between dis		<b>(c)</b> Desc	ription	ription of transaction		\	(d) Correct	
			person	and organization	on						Yes	No
4958 . 3 Enterthe	amount of tax ıncur • • • • • amount of tax, ıf an						he year	r unde 	rsectior ► \$ ► \$			
Complete ıf th	<b>nd/or From In</b> ne organization ansv mount on Form 990	wered "Yes"	on Form 9	90-EZ, Part V,	, line 38a, c	r Form 990,	Part IV	, line 2	26, or ıf	the org	anızatıor	1
Complete ıf th	ne organization ansv	wered "Yes"	on Form 9 5, 6, or 2 <b>(d)</b> Loar	990-EZ, Part V, 2 n to the	, line 38a, c (e)Original principal amount	( <b>f)</b> Balance due	Part IV (g) defa	In	(h) A ppro-	ved rd or	anızatıor (i)Wrı agreen	tten
Complete if the reported an area.  a) Name of interested	ne organization ansomount on Form 990  (b) Relationship	vered "Yes", Part X, line  (c) Purpose of	on Form 9 5, 6, or 2 (d) Loan or from	990-EZ, Part V, 2 n to the	<b>(e)</b> O riginal principal	( <b>f)</b> Balance	(g)	In	(h) Appro	ved rd or	(i)Wrı	tten
Complete if the reported an arman and arman and arman arman and arman ar	ne organization ansomount on Form 990  (b) Relationship	vered "Yes", Part X, line  (c) Purpose of	on Form 9 5, 6, or 2 (d) Loar or from organizat	n to the	<b>(e)</b> O riginal principal	( <b>f)</b> Balance	(g) defa	In ult?	(h) A ppro- by boar commit	ved rd or	(i)Wrı agreen	tten nent?
Complete if the reported an artical Grant Complete in the rested person that the complete is a second complete in the rested person that the complete is a second complete in the rested person that the rested complete is a second complete in the rested complete in the rested complete is a second complete in the rested co	(b) Relationship with organization	(c) Purpose of loan	on Form 9 5, 6, or 2  (d) Loar or from organizat  To	p90-EZ, Part V, 2 n to the clon? From	(e)Original principal amount	(f)Balance due	(g) defa	In ult?	(h) A ppro- by boar commit	ved rd or	(i)Wrı agreen	tten nent?
Complete if the reported an art iii Grant complete if the reported and art iii Grant complete if the reported art iii Grant complete iii Grant com	(b) Relationship with organization  ants or Assista mplete if the org	(c) Purpose of loan	on Form 9 5, 6, or 2  (d) Loar or from organizat  To	p90-EZ, Part V, 2 n to the clon? From	(e)Original principal amount	(f)Balance due	(g) defa	In ult?	(h) A ppro- by boar commit	ved rd or	(i)Wrı agreen	tten nent?

Part IV Dusiliess Hallsactions	involving Tile ester	i Persons.			
Complete if the organization	<u>n answered "Yes" on I</u>	<del>Form 990, Part IV, lın</del>	e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	f zation's
				Yes	No
(1) J Thomilson Hill	Board Member	· ·	employee spouse's compensation		No

# Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
Form 990, Part VII	J Thomilson Hill is a non-independent member of the board. His spouse, Janine W. hill, is an employee
	of the Council on Foreign Relations and received compensation of \$147,644

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493308003055

OMB No 1545-0047

Inspection

Open to Public

**SCHEDULE M** (Form 990)

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Department of the Treasury Internal Revenue Service

Name of the organization

**Noncash Contributions** 

► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

**Employer identification number** 

if applicable or items contributed amounts reported on Form 990, Part VIII, line 1g  1 Art—Works of art  2 Art—Historical treasures	<b>(d)</b> If determi tribution		
Check if applicable or items contributions or items contribution amounts reported on Form 990, Part VIII, line 1g	f determi		
2 Art—Historical treasures . 3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods 7 Boats and planes 8 Intellectual property 9 Securities—Publicly traded . X 38 642,600 FAIR MARKET V. 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other 15 Real estate—Residential . 16 Real estate—Commercial 17 Real estate—Other		amoun	ts
3 Art—Fractional interests			
4 Books and publications			
5 Clothing and household goods			
goods			
6 Cars and other vehicles			
8 Intellectual property			
9 Securities—Publicly traded . X 38 642,600 FAIR MARKET V.  10 Securities—Closely held stock .  11 Securities—Partnership, LLC, or trust interests  12 Securities—Miscellaneous  13 Qualified conservation contribution—Historic structures  14 Qualified conservation contribution—Other  15 Real estate—Residential .  16 Real estate—Commercial  17 Real estate—Other			
10 Securities—Closely held stock  11 Securities—Partnership, LLC, or trust interests  12 Securities—Miscellaneous  13 Qualified conservation contribution—Historic structures  14 Qualified conservation contribution—Other  15 Real estate—Residential .  16 Real estate—Commercial  17 Real estate—Other			
11 Securities—Partnership, LLC, or trust interests  12 Securities—Miscellaneous  13 Qualified conservation contribution—Historic structures  14 Qualified conservation contribution—Other  15 Real estate—Residential .  16 Real estate—Commercial  17 Real estate—Other	ALUE		
or trust interests  12 Securities—Miscellaneous  13 Qualified conservation contribution—Historic structures  14 Qualified conservation contribution—Other  15 Real estate—Residential .  16 Real estate—Commercial  17 Real estate—Other			
13 Qualified conservation contribution—Historic structures  14 Qualified conservation contribution—Other  15 Real estate—Residential .  16 Real estate—Commercial  17 Real estate—Other			
contribution—Historic structures			
14 Qualified conservation contribution—Other  15 Real estate—Residential .  16 Real estate—Commercial  17 Real estate—Other			
16 Real estate—Commercial 17 Real estate—Other			
17 Real estate—Other			
18 Collectibles			
19 Food inventory			
20 Drugs and medical supplies .			
21 Taxidermy			
22 Historical artifacts			
23 Scientific specimens			
25 Other • ()			
26 Other ► ()			
27 Other • ( )			
28 Other • ()			
29 Number of Forms 8283 received by the organization during the tax year for contributions			
for which the organization completed Form 8283, Part IV , Donee Acknowledgement 29			
		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, th	at		
it must hold for at least three years from the date of the initial contribution, and which is not required to be used			
for exempt purposes for the entire holding period?	30a		No
<b>b</b> If "Yes," describe the arrangement in Part II			
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		No.
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	Yes	
<b>b</b> If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

number of items	received, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
line 32a	To the extent that the Council on foreign relations receives any non-cash donations (usually in the form of securities, bonds, etc.), the organization employs its investment advisor to liquidate the investments.

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493308003055

OMB No 1545-0047

2014

Open to Public Inspection

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Council on Foreign Relations Inc

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

13-1628168

Return Reference	Explanation
Form 990, Part III, Line 1	students, civic and religious leaders, and OTHER INTERESTED CITIZENS IN ORDER TO HELP THEM BETTER UNDERSTAND THE WORLD AND THE FOREIGN POLICY CHOICES FACING THE UNITED STATES AND OTHER COUNTRIES FOUNDED IN 1921, CPR TAKES NO INSTITUTIONAL POSITIONS ON MATTERS OF POLICY CPR CARRIES OUT ITS MISSION BY MAINTAININS A DIVERSE MEMBERSHIP, INCLUDING SPECIAL PROGRAMS TO PROMOTE INTEREST AND DEVELOP EXPERTISE IN THE NEXT GENERATION OF FOREIGN POLICY LEADERS CONVENING MEETINGS AT ITS HEADQUARTERS IN NEW YORK AND IN WASHINGTON, DC, AND OTHER CITIES WHERE SENIOR GOVERNMENT OFFICIALS, MEMBERS OF CONGRESS, GLOBAL LEADERS, AND PROMINENT THINKERS COME TOGETHER WITH CPR MEMBERS TO DISCUSS AND DEBATE MAJOR INTERNATIONAL ISSUES SUPPORTING A STUDIES PROGRAM THAT FOSTERS INDEPENDENT RESEARCH, EVABLING CPR SCHOLLARS TO PRODUCE ARTICLES, REPORTS, AND BOOKS AND HOLD ROUNDTABLES THAT ANALYZE FORBIGN POLICY SISUES AND MAKE CONCRETE POLICY RECOMMENDATIONS PUBLISHING FOREIGN AFFAIRS, THE PREEMINENT JOURNAL ON INTERNATIONAL AFFAIRS AND US FOREIGN POLICY SONGRING INDEPENDENT TASK FORCES THAT PRODUCE REPORTS WITH DISTINGANCE AND POLICY PRESCRIPTIONS ON THE MOST IMPORTANT FOREIGN POLICY TOPICS PROVIDING UP TO DATE INFORMATION AND ANALYSIS ABOUT WORLD EVENTS AND U.S FOREIGN POLICY TOPICS PROVIDING UP TO DATE INFORMATION AND ANALYSIS ABOUT WORLD EVENTS AND U.S FOREIGN POLICY OTHER WEBSITES. CFR ORG, and TO POLICY FOREIGN AFFAIRS, THE POLICY FOR SERVIDING UP TO DATE INFORMATION AND ANALYSIS AND VICE OF THE POLICY PROVIDED ON THE MOST IMPORTANT FOREIGN POLICY OTHER SENDERGY POLICY FOREIGN AFFAIRS THE POLICY OTHER SENDERGY POLICY FOREIGN AFFAIRS COM Form 1990, Part III, Line 4(d) ALL Other Programmatic Activities Website CFR org, is one of the organization's primary communications channels to its various audiences. The site publishes a rich variety of types of content, including the Daily news Analysis, Backgrounders, interviews, podcasts, opinion pieces, full text of publications from the think tank, resources in support of the various outreach i

Return Reference	Explanation
Form 990, Part VI, Line 6	The Council on Foreign Relations is first and foremost a membership organization. The Council's membership represents a group unmatched in accomplishment and diversity in the field of international affairs. The Council has 5,000 members and term members, comprised of top government officials, renowined scholars, business executives, acclaimed journalists, prominent lawyers, and distinguished nonprofit professionals. The Council also has a corporate membership program that provides a unique forum for business leaders to interact with noted thinkers and practitioners in government, policy, academia, and business through invitations to exclusive events, direct engagement with CFR experts, and virtual access to our members-only website.

Return Reference	Explanation
1	The membership of the council on foreign relations elects all of the voting members of the board of directors. Any changes to the articles of incorporation must be approved by a majority of members of the council on foreign relations.

Return Reference	Explanation
vı, line 11a	Process for reviewing Form 990 The Council on Foreign Relation's Form 990 was prepared by a nationally recognized accounting firm in conjunction with the organization's senior management and Audit Committee of the Board. A draft copy of the Form 990 is reviewed by the Audit Committee of the Board and revised as necessary with their input. Once the Audit Committee approves the Form 990 for filing, a copy is circulated to the full Board for their review and approval. Each director of the Board is given the opportunity to comment on the Form 990 prior to its filing.

Return Reference	Explanation
Form 990, Part VI, Line 12c	Conflict of interest policy enforcement and monitoring Each officer, director, and key employee of the Council on Foreign Relations is required to annually disclose any potential conflicts of interest to the Audit Committee of the Board. The Audit Committee reviews each reported potential conflict of interest and reports it recommendations regarding the reported matters to the full Board for approval. The Council's conflict of interest policy requires any party with a potential conflict to recuse him or herself from the Board's deliberations and also requires that potential conflicts be reported as soon as they arise. Potential conflicts of interest are addressed immediately upon reporting.

Return Reference	Explanation
form 990, part vı, line 15a & 15b	process for determining compensation The Council on Foreign Relations undertakes a thorough process to ensure that the executive compensation paid to its officers and key employees, including the President, is reasonable, given the market in which the organization operates. The Compensation Committee of the Board, which is composed of independent persons that have no personal interest in the proposed compensation, undertakes an annual review and approval of compensation. To assist their deliberations, the Compensation Committee regularly engages an independent compensation consultant to complete a market assessment and competitive position analysis for the organization's officers and key employees, including the President. The compensation consultant utilizes comparability and benchmarking surveys, as well as Form 990s of comparable organizations, to ensure that the Council compensates its executives commensurate with the market. Compensation decisions and reports are contemporaneously documented in the minutes of the meeting of the Compensation Committee.

Return Reference	Explanation
Line 19	availability of documents to the public The Council on Foreign Relations' Form 990, governing documents and conflict of interest policy are available to the public by upon request. The Council's audited financial statements are available on our website, www cfr org

Return Reference	Explanation
Form 990, Part XI, Line 9	Other Changes in Net Assets Change in value of interest rate swap agreement (\$215,600) Post-Retirement Benefits (\$594,000) Write-off of uncollectable grant & contributions (\$879,700) Total changes in net assets (\$1,689,300)