efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Form 990 ارچە

Department of the

Use Only

NEW YORK, NY 100172013

May the IRS discuss this return with the preparer shown above? (see $\ensuremath{\text{I}}$ For Paperwork Reduction Act Notice, see the separate instructions.

Internal Revenue Service

Treasury

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.IRS.gov/foim990

OMB No 1545-0047

DLN: 93493313020756

Open to Public Inspection

Address change Name change Initial return Final return/terminated Amended return Application pending I Tax-exempt status I Summary I Briefly describe the organ CFR is an independent, no policy choices facing the independent of independent	street (or P O box if mail is not delivered to street address) street (or P O box if mail is not delivered to street address) street (or P O box if mail is not delivered to street address) state or province, country, and ZIP or foreign postal code Y 10065 d address of principal officer IAASS PRESIDENT th Street Y 10065 Solic) ()	Yes
Address change Name change Initial return Final return/terminated Amended return Application pending I Tax-exempt status I Summary I Briefly describe the organ CFR is an independent, no policy choices facing the independent of independent	street (or P O box if mail is not delivered to street address) street (or P O box if mail is not delivered to street address) street (or P O box if mail is not delivered to street address) state or province, country, and ZIP or foreign postal code y 10065 AAASS PRESIDENT th Street y 10065 Solic) () () (insert no) 4947(a)(1) or 527 H(a) Is this a group return for subordinates? Yes Included? If "No," attach a list (see instruction: H(c) Group exemption number \rightarrow H(c) Group exemption number \rightarrow L Year of formation 1921 M State of legal domic anization's mission or most significant activities non-partisan membership organization, think tank, & publisher dedicated to under-standing the foreign the U S & other countries the organization discontinued its operations or disposed of more than 25% of its net assets subers of the governing body (Part VI, line 1a)	No ons) micile N gn 35 34 597 126
Initial return Final return/terminated Amended return Application pending F Name and a RICHARD HA. 58 East 68th Str. New York, NY I Tax-exempt status J Website: ▶ www CFR org K Form of organization Part I Summary 1 Briefly describe the organ CFR is an independent, no policy choices facing the light of the l	street (or P O box if mail is not delivered to street address) street (or P O box if mail is not delivered to street address) state or province, country, and ZIP or foreign postal code Y 10065 d address of principal officer IAASS PRESIDENT th Street Y 10065 501(c) ()	No ons) micile N gn 35 34 597 126
Final return/terminated	street (or P O box if mail is not delivered to street address) Street Street G Gross receipts \$ 142,155,200 d address of principal officer HAASS PRESIDENT th Street Y 10065 S01(c) ()	No ons) micile N gn 35 34 597 126
Teturn/terminated Amended return Application pending F Name and a RICHARD HA. 58 East 68th Str. F Name and a RICHARD HA. 58 East 68th Str. Volume York, NY Tax-exempt status V 501(c)(3) V 601(c)(3) V 601(c)(3) V 701(c)(3) V 701(c)(3) V 701(c)(3) V 801(c)(3) V 701(c)(3) V 801(c)(3) V 801(c)(4) V 801(street (or P O box if mail is not delivered to street address) Street Street G Gross receipts \$ 142,155,200 d address of principal officer HAASS PRESIDENT th Street Y 10065 S01(c) ()	No ons) micile N gn 35 34 597 126
Amended return Application pending F Name and a RICHARD HA. 58 East 68th New York, NY I Tax-exempt status J Website: ► www CFR org K Form of organization Part I Summary 1 Briefly describe the organ CFR is an independent, no policy choices facing the logology choices facing the logology choices facing the logology choices facing the logology choices facing member of independent with the logology choices facing member of independent with the logology choices facing the logology choices facing member of independent with the logology choices facing the	state or province, country, and ZIP or foreign postal code Y 10065 AAASS PRESIDENT th Street Y 10065 Solic) () ✓ (insert no) ✓ 4947(a)(1) or ✓ 527 Trust ✓ Association ✓ Other ► L Year of formation 1921 ✓ State of legal domice anization's mission or most significant activities non-partisan membership organization, think tank, & publisher dedicated to under-standing the foreign ne U S & other countries The organization discontinued its operations or disposed of more than 25% of its net assets Subers of the governing body (Part VI, line 1a)	No ons) micile N gn 35 34 597 126
New York, NY F Name and a RICHARD HA, 58 East 68th, New York, NY I Tax-exempt status	d address of principal officer IAASS PRESIDENT th Street Y 10065 Solico ()	No ons) micile N gn 35 34 597 126
F Name and a RICHARD HA. 58 East 68th New York, NY I Tax-exempt status	d address of principal officer IAASS PRESIDENT the Street Y 10065 Sol(c) ()	No ons) micile N gn 35 34 597 126
RICHARD HA. 58 East 68th New York, NY I Tax-exempt status	AAASS PRESIDENT th Street Y 10065 Sol(c) () ✓ (insert no)	No ons) micile N gn 35 34 597 126
Tax-exempt status I Tax-exempt status V 501(c)(3) J Website: ► www CFR org K Form of organization Part I Summary 1 Briefly describe the organication of the status	th Street Y 10065 501(c) () (insert no) 4947(a)(1) or 527 H(b) Are all subordinates included? If "No," attach a list (see instructions H(c) Group exemption number	No ons) micile N gn 35 34 597 126
Tax-exempt status	H(b) Are all subordinates included? If "No," attach a list (see instructions H(c) Group exemption number ▶ L Year of formation 1921 M State of legal domic anization's mission or most significant activities non-partisan membership organization, think tank, & publisher dedicated to under-standing the foreign to U.S. & other countries The organization discontinued its operations or disposed of more than 25% of its net assets abers of the governing body (Part VI, line 1a)	ons) micile N gn 35 34 597 126
J Website: ▶ www CFR org K Form of organization	Solicition So	ons) micile N gn 35 34 597 126
Part I Summary 1 Briefly describe the organ CFR is an independent, no policy choices facing the policy choices facing the series at the series and the series are series at the series	H(c) Group exemption number ► L Year of formation 1921 M State of legal domic anization's mission or most significant activities non-partisan membership organization, think tank, & publisher dedicated to under-standing the foreign ne U S & other countries the organization discontinued its operations or disposed of more than 25% of its net assets there of the governing body (Part VI, line 1a)	35 34 597
Part I Summary 1 Briefly describe the organ CFR is an independent, no policy choices facing the policy choices facing the series at the series and the series are series at the series	Association Other Learn of formation 1921 M State of legal domice anization's mission or most significant activities non-partisan membership organization, think tank, & publisher dedicated to understanding the foreign ne U.S. & other countries The organization discontinued its operations or disposed of more than 25% of its net assets of the governing body (Part VI, line 1a)	35 34 597 126
Part I Summary 1 Briefly describe the organ CFR is an independent, no policy choices facing the 2 Check this box ▶ ☐ if th 3 Number of voting member 4 Number of independent voting member of voting member of independent voting member of independ	anization's mission or most significant activities non-partisan membership organization, think tank, & publisher dedicated to under- standing the foreign ne U.S. & other countries The organization discontinued its operations or disposed of more than 25% of its net assets where of the governing body (Part VI, line 1a)	35 34 597 126
1 Briefly describe the organ CFR is an independent, no policy choices facing the 2 Check this box ► if th 3 Number of voting member 4 Number of independent v 5 Total number of individual	non-partisan membership organization, think tank, & publisher dedicated to under- standing the foreign ne U.S. & other countries the organization discontinued its operations or disposed of more than 25% of its net assets of the governing body (Part VI, line 1a)	35 34 597 126
1 Briefly describe the organ CFR is an independent, no policy choices facing the 2 Check this box ► if th 3 Number of voting member 4 Number of independent v 5 Total number of individual	non-partisan membership organization, think tank, & publisher dedicated to under- standing the foreign ne U.S. & other countries the organization discontinued its operations or disposed of more than 25% of its net assets of the governing body (Part VI, line 1a)	35 34 597 126
CFR is an independent, no policy choices facing the leading to policy choices facing the leading the leading the leading to policy choices facing the leading the	non-partisan membership organization, think tank, & publisher dedicated to under- standing the foreign ne U.S. & other countries the organization discontinued its operations or disposed of more than 25% of its net assets of the governing body (Part VI, line 1a)	35 34 597 126
2 Check this box ► if th 3 Number of voting member 4 Number of independent v 5 Total number of individual	the organization discontinued its operations or disposed of more than 25% of its net assets of the governing body (Part VI, line 1a)	34 597 126
2 Check this box ► if th 3 Number of voting member 4 Number of independent v 5 Total number of individual 6 Total number of voluntee	bers of the governing body (Part VI, line 1a)	34 597 126
2 Check this box ► ☐ if th 3 Number of voting member 4 Number of independent v 5 Total number of individual 6 Total number of voluntee	bers of the governing body (Part VI, line 1a)	34 597 126
2 Check this box ► if the 3 Number of voting member 4 Number of independent voting member of independent voting member of ordinated and the second	bers of the governing body (Part VI, line 1a)	34 597 126
3 Number of voting member 4 Number of independent v 5 Total number of individual 6 Total number of voluntee	bers of the governing body (Part VI, line 1a)	34 597 126
3 Number of voting member of states of the state of the states of the st	t voting members of the governing body (Part VI, line 1b)	34 597 126
4 Number of independent v 5 Total number of individua 6 Total number of voluntee		597 126
5 Total number of individua 6 Total number of voluntee	duals employed in calendar year 2015 (Part V, line 2a)	126
6 Total number of voluntee	 	
	teers (estimate if necessary)	840
7a Total unrelated business	ess revenue from Part VIII, column (C), line 12	
b Net unrelated business ta	taxable income from Form 990-T, line 34	250,33
	Prior Year Current Year	ear
8 Contributions and grain	rants (Part VIII, line 1h)	238,30
9 Program service rever		590,70
<u> </u>		549,70
The state of the contract of t		74,50
•	lines 8 through 11 (must equal Part VIII, column (A), line 77,485,500 101,55:	
12)	77,463,300 101,33.	
13 Grants and similar am	amounts paid (Part IX, column (A), lines 1-3) 1,894,939 1,255	255,36
14 Benefits paid to or for	for members (Part IX, column (A), line 4)	
	pensation, employee benefits (Part IX, column (A), lines 34,767,500 37,565	61,50
5-10) 16a Professional fundraisi b Total fundraising expenses	Value food (Dark IV, column (A), line 11 a)	
F 16a Professional fundraisi	using fees (Part IX, column (A), line 11e)	
	ses (Part IX, column (D), line 25) ▶4,446,000	
		14,33
	d lines 13–17 (must equal Part IX, column (A), line 25) 64,757,000 69,933	ょそも ついに
	nses Subtract line 18 from line 12	
Total labilities (Part X, I Total labilities (Part X) 22 Net assets or fund bal	Beginning of Current Year End of Year	522,000
20 Total assets (Part X, I	X, line 16)	522,00
Total liabilities (Part)		522,00 ar
Net assets or fund bal	rt X, line 26)	522,000 ar 571,300
- Let assets of fully bal		522,000 ar 571,300

Form	1990 (2015)					Page 2
Par	t IIII Statement	of Program Serv	ice Accomp	olishments		
	Check if Sche	edule O contains a res	ponse or note	to any line in this Part	III	
1	Briefly describe the	organization's missioi	ı			
					nization, think tank, and publis	
reso	urce for its members,	government officials, l	ousiness exect	<u>ıtıves, journalists, edi</u>	icators and (continued on sche	dule o)
2		, ,	, ,	<i>.</i>	r which were not listed on	
	the prior Form 990 c	or 990-EZ?				⊤Yes √No
	If "Yes," describe th	iese new services on S	Schedule O			
3		cease conducting, or		_	, , , ,	
						Yes √ No
	If "Yes," describe th	ese changes on Sche	dule O			
4					ree largest program services,	
		01(c)(3) and 501(c)(4 and revenue, if any, foi			t the amount of grants and allo	cations to others,
	the total expenses,	and revenue, it any, for	cach program	Service reported		
4 a	(Code) (Expenses \$	26,557,300	ıncludıng grants of \$	1,255,363) (Revenue \$	0)
					me, part-time, and visiting scholars ai	
					te sector, and provide analysis on the id the world and study topics such as	
	proliferation, terrorism,	global governance, energy	, trade, internatioi	nal economics and finance,	climate change, development, global	health, cyber and digital policy
4b	(Code) (Expenses \$	11,175,200	including grants of \$	0)(Revenue\$	8,690,700)
					d international affairs. It presents clea general readers alike. Reflecting the s	
	nonpartisanship as the	Council itself, Foreign Affaii	s identifies with n		d encourages a wide range of debate	
	thinking for themselves	about America's role in the	world			
	10-1-	\	2 500 000		0.) (D	0.)
4 c	(Code) (Expenses \$	3,589,000		0) (Revenue \$	0)
	and prominent thinkers	With programming in New	York, Washington	n, D C , and throughout the	nbers together with policymakers, woi e country, CFR's Meetings Programs fe	ature a wide range of speakers
	and viewpoints to help	participants to better under	stand the pressing	foreign policy issues of th	e day	
	See Additional Dat	a				
	0.11	(5. 1. 2.1				
4d	. 3	vices (Describe in Sch	•	a.f.¢	0) (Davanus à	0.)
	(Expenses \$	9,145,500 inc			0)(Revenue\$	0)
4e	Total program serv	ice expenses 🟲	50,467,000)		

VIII, IX, or X as applicable

If "Yes," complete Schedule D, Part X 🛸

16

Form	990 (2015)			Page 3
Par	t 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)? If "Yes," complete Schedule A	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? If "Yes," complete Schedule D, Part 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? If "Yes," 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	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Νo

Nο

Νo

Nο

Νo

Nο

Νo

Νo

Νo

Form 990 (2015)

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14h

15

16

17

18

19

20a

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII,

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

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 💆

reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 💆

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

f Did the organization's separate or consolidated financial statements for the tax year include a footnote that

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 🥞

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

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 👺 🔒

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? .

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 🐒

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . 🔀

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?.

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

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 😏 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

instructions for applicable filing thresholds, conditions, and exceptions)

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? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part 22 Yes

Yes 23

Yes

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Form 990 (2015)

Yes

Yes

Nο

Νo Νo Νo Νo Νo

Νo

Νo

Nο

Νo

Νo

Nο

Νo

Νo

Nο

Νo

Νo

orm	990 (2015)			Page 5					
Pa	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>							
			Yes	No					
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 359								
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 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?	3a	Yes						
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O								
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						
b	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?	5a		No					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No					
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?								
7									
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?								
d	d If "Yes," indicate the number of Forms 8282 filed during the year								
е	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		No					
	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	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		<u> </u>					
	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
.0	Section 501(c)(7) organizations. Enter								
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b								
L1	facilities Section 501(c)(12) organizations. Enter	·							
	Gross income from members or shareholders								
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)								
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.								
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							

13b

13c

b Enter the amount of reserves the organization is required to maintain by the states

 \boldsymbol{c} . Enter the amount of reserves on hand

 ${f b}$ If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule ${f O}$.

Νo

14a

14b

year by the following

Section C. Disclosure

a The governing body?

Form

Par

1a

990 ((2015)	Page 6
: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	٧,

describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI								
ction A. Governing Body and Management								
						Ye	es	١
Enter the number of voting members of the governing body at the end of the tax year	1a			3	5			
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

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

2

3

Νo Νo Nο

. 🔽

	ı
	ı
	ı
í es	
res	
res	
/es	

Yes

Nο

Form 990 (2015)

10a

10h

11a

12a

12b

12c

13

15a

16a

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

Nο

No

Νo

5 Did the organization become aware during the year of a significant diversion of the organization's assets? ... Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Did the organization delegate control over management duties customarily performed by or under the direct

supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was

Did the organization contemporaneously document the meetings held or written actions undertaken during the

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

b Each committee with authority to act on behalf of the governing body?

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)

State the name, address, and telephone number of the person who possesses the organization's books and records

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

14 Did the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

►KEITH OLSON 58 EAST 68TH STREET New York, NY 10065 (212) 434-9400

List the States with which a copy of this Form 990 is required to be filed▶

Did the organization have a written whistleblower policy? . . .

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Part VII 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
- ullet 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 (B) (F) (A) (C) (D) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations from the 2/1099-MISC) (W-2/1099for related organization and Highest compensati employee Officer Individual trustee or director MISC) organizations Institutional related helow organizations employee dotted line) Trustee £ See Additional Data Table

Yes

(C)

Compensation

939,531

933,841

459,366

398,981

381,270

Form 990 (2015)

(B)

Description of services

Catering

Security

Web/Software Design

Website development

computer security

No

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Position of the Position of th	tion (han d in is l	both ctor	oox, i an o /trus	unless fficer	Former	(D) 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
See Additional Data Table										
1b Sub-Total			٠.			>				<u> </u>
c Total from continuation sheet	•					>		5,396,257	0	537,419
d Total (add lines 1b and 1c) .					· ·		a) w			337,419
2 Total number of individuals (in \$100,000 of reportable compe						i abov	e) Wi	no received more th	lali	

3	Did the organization list any former officer, director or trustee, key employee, or highest compensat
	on line 1a? If "Yes," complete Schedule J for such individual
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation f

_				
3	Did the organization list any former 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	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such individual	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	103	No

	Section	В.	Ind	epei	ndent	Cont	tractor	
_	C I		A1	4 - 1 - 1 -	£	c	la carla a a ta	

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)

Neuman's Kitchen Inc, 203 Chrystie St

NEW YORK, NY 10002

Palantır Net Inc,

2211 N Elston Avenue Suite 400 CHICAGO, IL 60614 Guardsmark LLC,

PO Box 11407 BIRMINGHAM, AL 35246 ROCKSTAR CODERS,

142 TEMPLE STREET 303 NEW HAVEN, CT 06510 STI GROUP LTD,

2 MYRTLE AVE SUITE 250

rs Name and business address

\$100,000 of compensation from the organization \triangleright 26

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 99		· · · · · · · · · · · · · · · · · · ·						Page S
Part V	/1111	Statement o						_
		Check if Schedi	ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 8	1a	Federated cam	paigns 1a					
Grants mounts	b	Membership du	ies 1b	6,484,200				
, Gr	С	Fundraising ev	ents 1 c					
ifts ar A	d	Related organiz	zations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grant	s (contributions) 1e					
tion er S	f	All other contribute	ons, gifts, grants, and 1f	67,754,100				
ibu Af	g	Noncash contributi	ons included in lines	12,451,534				
nd Ort		1a-1f \$. 1. 1.f		74,238,300			
<u>2 £</u>	h	Total. Add lines	s 1a-1f	•	74,238,300			
된	2a	FOREIGN AFFAIRS	PUBLICATION	Business Code 541800	8,690,700	7 002 627	1,687,063	
Program Service Revenue	b	- CREIGN ALLAINS	FODECATION	341600	8,690,700	7,003,637	1,007,003	
ıγ́ CΣ	С							
er Ye	d							
S E	е							
ogra	f	All other progra	am service revenue					
ďΞ	g	Total. Add lines	s 2a-2f	>	8,690,700			
	3		ome (including dividen		2,166,900		481,777	1,685,123
	4		stment of tax-exempt bond	-	0			
	5	Royalties .	<u></u>	🔸	0			
	6 -	C	(i) Real 2,006,800	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses	1,177,000					
	С	Rental income or (loss)	829,800	0				
	d	Net rental inco	me or (loss)	-	829,800			829,800
	7a	Gross amount from sales of assets other than inventory	(i) Securities 54,807,800	(II) Other				
	ь	Less cost or						
		other basis and sales expenses	39,425,000					
	C	Gain or (loss)	15,382,800		15,382,800			15,382,800
nue	d 8a				13,302,000			13,302,000
Other Revenue		\$ of contributions See Part IV , lir						
the	b	Less directex	penses b					
0	С		(loss) from fundraising	events ►	0			
	9a		rom gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti		0			
	10a	Gross sales of returns and allo		P				
	b	Less costofa	oods sold b					
	С		(loss) from sales of inv	entory ▶	0			
		Miscellaneou		Business Code	244 702			244 = 2
	11a	MISCELLANEO	DUS	900099	244,700			244,700
	b c	-						
	d	All other reven	ue					
	e	Total. Add lines		•	244,700			
	12	Total revenue.	See Instructions .		·	7 002 627	2 160 040	10 140 400
		_			101,553,200	7,003,637	2,168,840	18,142,423

Part IX Statement of Functional Expenses

	Statement of Functional Expenses	
ection 501	(c)(3) and $501(c)(4)$ organizations must complete all column	ns. All other organizations must complete column (A.)

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

					· · ·
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,255,363	1,255,363		
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	4,236,557	1,404,464	2,491,834	340,259
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	25,627,743	20,433,836	3,216,366	1,977,541
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,802,200	1,041,200	664,900	96,100
9	Other employee benefits	4,035,600	3,602,900	0	432,700
10	Payroll taxes	1,859,400	1,400,800	329,200	129,400
11	Fees for services (non-employees)	1,039,400	1,400,000	323,200	129,400
a	Management	0			
b	Legal	63,400	46,700	14,600	2,100
c	Accounting	192,100	109,400	72,600	10,100
d	Lobbying	0	221,131	,	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	2,279,900		2,279,900	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	6,129,737	5,079,437	856,100	194,200
12	Advertising and promotion	0			
13	Office expenses	1,879,400	896,600	927,500	55,300
14	Information technology	2,168,800	1,752,500	280,600	135,700
15	Royalties	0			
16	Occupancy	2,209,100	1,489,800	597,500	121,800
17	Travel	2,980,600	2,410,600	134,400	435,600
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,505,200	2,185,700	128,400	191,100
20	Interest	2,553,400	1,458,400	1,023,600	71,400
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,807,400	2,192,600	1,476,300	138,500
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	3,202,600	2,872,000	275,500	55,100
b	MISCELLANEOUS	1,142,700	834,700	248,900	59,100
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	69,931,200	50,467,000	15,018,200	4,446,000
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)				

1

2

3

4

5

6

7

8

9

10a

b

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

Net Assets or Fund Balances

(B)

End of year

8 000

69.805.600

43.102.200

1.864.400

190.300

785,600

74,425,100

108 876 200

208,513,900

507,571,300

7 850 800

4,828,200

57.975.000

15.865.500

86,519,500

61,216,300

161.653.900

198,181,600

421.051.800

507,571,300 Form 990 (2015)

C

C

C

٢

C

(A)

Beginning of year

8 000

79.988.300

27.197.600

2.850,600

n 5

Λ 6

0 7

8

9

10c

11

12

13

16

17

18

19

20

23

25

26

27

28

29

30

31

32

33

0

0 14

0 15

n

n 21

0 22

0

0 24

13,874,100

85,381,300

69,006,500

168.138.000

179,527,900

416,672,400

502.053.700

142 300

530.300

74,623,100

121 993 900

194,719,600

502,053,700

7,113,000

4,789,200

59.605.000

116 798 500

42,373,400

1

2

3

4

3	Bal	la	nce	Sh	ee

II of Schedule L

Cash-non-interest-bearing

Savings and temporary cash investments .

Pledges and grants receivable, net .

Notes and loans receivable, net . .

Prepaid expenses and deferred charges .

Land, buildings, and equipment cost or other basis

Investments—publicly traded securities

Investments—other securities See Part IV, line 11

Investments—program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete

Secured mortgages and notes payable to unrelated third parties . .

Organizations that do not follow SFAS 117 (ASC 958), check here >

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17-24)

Total liabilities.Add lines 17 through 25 .

Temporarily restricted net assets . . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

lines 27 through 29, and lines 33 and 34.

Unrestricted net assets . . .

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

Inventories for sale or use .

Complete Part VI of Schedule D

Less accumulated depreciation .

Intangible assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

Complete Part X of Schedule D

Grants payable .

Deferred revenue .

Other assets See Part IV, line 11 . . .

Accounts receivable, net . .

10a

10b

FaitA	balance 31
	Check If Sche
-	

UΧ	Balance Snee
	Check if Schedule

Part X	Balance Sheet
	Check if Schedule O contains a response or note to any line in this Dart V

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of

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

101,553,200

69,931,200

31,622,000

416,672,400

-24,363,200

-2,879,400

421,051,800

No

Νo

Νo

Form 990 (2015)

Yes

Yes

Yes

Page **12**

Part XI Reconcilliation of Net Assets

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

Total revenue (must equal Part VIII, column (A), line 12)

Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 . . .

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

Net unrealized gains (losses) on investments . Donated services and use of facilities .

Investment expenses Prior period adjustments .

Other changes in net assets or fund balances (explain in Schedule O) . 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

column (B))

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

Part XII Financial Statements and Reporting Schedule O

1 Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in a separate basis, consolidated basis, or both

2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on Separate basis Consolidated basis

Single Audit Act and OMB Circular A-133?

Schedule O

basis, consolidated basis, or both Separate basis Consolidated basis

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

If the organization changed either its oversight process or selection process during the tax year, explain in

Both consolidated and separate basis

Cash ✓ Accrual Cother

2b

2a

2c

3a

3b

1

2

3

4

5

6

7

8

9

Additional Data

(Code

Education

Software ID: Software Version:

EIN: 13-1628168

including grants of \$

Name: Council on Foreign Relations Inc

0) (Revenue \$

0)

0)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	385,500	including grants of \$	0) (Revenue \$
Tack Force				

2,257,000

(Code) (Expenses \$	385,500 in	icluding grants of \$	0) (F
Task Force				

) (Expenses \$

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 1,339,400 including grants of \$ 0) (Revenue \$ 0)

including grants of \$

0) (Revenue \$

National Program			
------------------	--	--	--

3.167.500

) (Expenses \$

(Code

CFR Digital

(Code) (Expenses \$ 1,556,700 including grants of \$ 0) (Revenue \$ 0)

including grants of \$

0) (Revenue \$

Outreach			

84.300

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

) (Expenses \$

(Code

Global Board of Advisors

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 355,100 including grants of \$ 0) (Revenue \$ 0)

Term member program

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

director

director

director

David G Bradley

R Nicholas Burns

Compensated Employees, and Inde	pendent Co	ntra	ctor	S				1		
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Carla A Hills Co-Chairman	1 0	×		x				0	o	
Robert E Rubin Co-Chairman	10	x		х				0	0	
Richard N Haass President (Non-Voting Board)	35 0	x		х				1,383,635	0	41,80
David M Rubenstein vice chairman	1 0 0 0	x		×				0	0	
John P Abızaid director	1 0 0 0	×						0	0	
Zo Baird director	0 0	x						0	0	
Alan S Blinder director	1 0	×						0	0	
Mary mcinnis Boies	1 0									

0 0 10

0 0 10

0 0

Х

Х

0

0

0

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

director

director

director

Jami Miscik

Eduardo J Padrn

(A)	(B)	1		ıc	٠,		,	(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Steven A Denning	1 0					,				
director	0 0	X				<u> </u>		0	0	
Laurence D Fink director	1 0	x						0	0	
Stephen Friedman director	1 0	x						0	0	
Ann M Fudge director	1 0	x						0	0	
Thomas H Glocer director	1 0	×						0	0	
J Tomilson Hill director	1 0	x						0	0	
Donna J Hrinak director	1 0	×				'		0	0	J
Shirley Ann Jackson	1 0		\vdash		\vdash	\vdash	\vdash			

Х

Х

0 0 10

0 0 10

0 0

0

0

0

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Susan Hockfield

Richard E Salomon

Director

Director

Director

Compensated Employees, and Inde					ıru	stee	es,	Key Employe	es, Highest		
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
John A Paulson	1 0										
director	0 0	X						0	0		
Colin L Powell director	10	×						0	0		
Margaret g Warner director	1 0	x						0	0		
Vin Weber director	1 0	×						0	0		
Christine Todd Whitman director	1 0	×						0	0		
peter b henry director	1 0	×						0	0		
ruth porat director	1 0	х						0	0		
Blair Effron	1 0										

Х

Х

0 0 10

0 0 10

0 0

0

0

0

0

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

Nancy D Bodurtha

Irina Faskianos

Sr VP & Director Of Studies

VP, Meetings and Membership

VP, National Program & Outreach

Compensated Employees, and Inde	pendent Co	ntra	ctor	S				1		
(A) Name and Tıtle	(B) Average hours per week (list any hours for related	(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- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
James G Stavridis	1 0									
Director	0 0	×						0	0	
Daniel H Yergin Director	1 0	×						0	0	
Timothy F Geithner Director	1 0	х						0	0	
Stephen J Hadley Director	1 0	x						0	0	
James Manyıka Dırector	1 0	X						0	0	
Richard L Plepler Director	0 0	×						0	0	
Kerth C Olson Exec VP, CFO & Treasurer	35 0			x				443,446	0	41,809
James M Lindsay	35 0									

0.0 35 0

0 0

44,23

18,95

25,60

0

0

0

388,757

263,068

251,969

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

Compensated Employees, and Inde	pendent Co	ntrac	CTOF	5				ı	i	
(A) Name and Tıtle	(B) A verage hours per week (list any hours for related	more that t unless perso s officer				box, both a		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	from the organization and related organizations
Suzanne E Helm VP, Philanthropy & Relations	35 0			×				332,609	0	40,23
Jan-Mane Hughes VP, HR and Administration	35 0			×				266,723	0	36,89
Lisa K Shields VP,Glob Comm & Media Relations	22 0			х				153,256	0	24,77
Lynda A Hammes Publisher, Foreign Affairs	35 0			×				234,885	0	34,49
Jeffrey A Reinke Secretary of the Corporation	35 0			×				199,417	0	32,660
Caroline N McCall	35 0									

0 0 35 0

0.0 35 0

0.0

VP Education

Gideon G Rose

Robert B Kahn

Mırıam Hıggıns

General Counsel

Christopher Tuttle

Managing Director

Editor, Foreign Affairs

Sr Fellow for Inter Econ

34,99

39,14

19,42

35,50

34,87

0

0

0

0

222,385

285,765

230,467

252,068

236,941

Χ

Χ

Χ

Compensated Employees, and Independent Contractors (A) (B) (C) Name and Title Position (do not check Average

	week (list any hours for related organization: below dotted line)
chael A Levi	35 0

Director, Geoeconomic Studies

	ss pe offi direct	cer	and	а
individual or directo	Institutio	Officer	key empi	Highest o

more than one box,

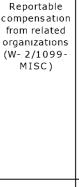
Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

hours per

0 0

erson is both an

(D)



(E)

other compensation from the organization and related organizations

32,01

(F)

Estimated

amount of

compens 30.00

efi	le GF	RAPHIC pr	int - DO I	NOT PROCES	S As Filed Da	ta -		DLN: 93	3493313020756	
990EZ)			•	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						
Treas	ury		<u>wı</u>	ww.irs.gov/fo	<u>rm990</u> .				Inspection	
		enue Service he organizat	ion					Employer identifie	ation number	
		oreign Relation:						Employer identific	acion number	
		_						13-1628168		
Pa	rt I	Reason	for Publi	ic Charity S	tatus (All organıza	itions must c	omplete this	part.) See instruction	ons.	
The	organı	ızatıon ıs not	a private f	oundation beca	use it is (For lines 1	through 11, cl	heck only one b	ox)		
1		A church,	convention	of churches, o	r association of churc	hes described	ın section 170(b)(1)(A)(i).		
2	Ė	A school d	escribed in	section 170(b)(1)(A)(ii).(Attach So	chedule E (For	m 990 or 990-l	EZ))		
3	Ė	A hospital	or a cooper	ative hospital	service organization o	described in se	ection 170(b)(1)(A)(iii).		
4	H	A medical	research or	ganızatıon ope	rated in conjunction v	with a hospital	described in se	ction 170(b)(1)(A)(ii	i). Enter the	
	'	hospital's	name, city,	and state						
5		170(b)(1)	(A)(iv).(C	omplete Part I	I)			a governmental unit	described in section	
6	<u> </u>			-	or governmental unit				aonaral nublia	
7	✓				i). (Complete Part II		rom a governin	ental unit or from the	general public	
8					ion 170(b)(1)(A)(vi)		rt II)			
9	<u></u>	receipts fi from gross organizati	om activition investmer on after Jun	es related to it nt income and i ne 30, 1975 S	s exempt functions—sunrelated business table esection 509(a)(2).	subject to cert xable income ((Complete Par	ain exceptions, less section 51 t III)	and (2) no more than 1 tax) from business	331/3% of its support	
10	<u>_</u>	_	_	·	ted exclusively to tes	·	•			
11								ctions of, or to carry (509(a)(2) See secti o		
								complete lines 11e,		
а				-				organization(s), typica		
	•		-	, ,		•	rity of the direct	tors or trustees of the	supporting	
h	_	-		•	rt IV, Sections A and I		n with its sunna	orted organization(s),	hy having control or	
_	ı							manage the supported		
		-		V, Sections A		·		3 11	, ,	
C								, and functionally inte	grated with, its	
d	_		-		uctions) You must co	-		, and E. with its supported ord	ranization(e) that is	
u								ement and an attentiv		
				_	te Part IV, Sections A	•	· ·		,	
е				_				ıs a⊤ype I,⊤ype II,⊤	ype III functionally	
£		_			ally integrated suppor 		on			
f	Ente			=	ns			· · · · · · · · —		
g		FIOVIGE CIT	e lollowing i	mormation abo	out the supported orga	inizacion(s)				
		(i)		(ii)EIN	(iii)	(iv	1	(v)	(vi)	
Name of supported organization		ganızatıon	(II)LIN	Type of organization (described on lines 1-9 above (see instructions))	Is the orga listed in your docum	anızatıon r governıng	A mount of monetary support (see instructions)	A mount of other support (see instructions)		
						Yes	No	1		
Tota	<u> </u>									
For F	aperv	work Reduct	on Act Not	ice, see the In	structions for Form 99	90 or 990EZ.	Cat No 112		n 990 or 990-EZ) 2015	

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify un Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 46,650,900 32,692,700 35,395,400 51,397,000 74,238,300 240,374,300 membership fees received (Do not include any unusual grants) 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 240,374,300 Total. Add lines 1 through 3 46,650,900 32,692,700 35,395,400 51,397,000 74,238,300 The portion of total contributions by each person (other than a governmental unit or publicly 30.611.854 supported organization) included on line 1 that exceeds 2% of the

(b)2012

32,692,700

3,998,800

82.800

16a 33 1/3% support test-2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test - 2015. 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

b 10%-facts-and-circumstances test - 2014. 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. The organization qualifies as a publicly

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

b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

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,

(c)2013

35,395,400

4,912,500

146.700

(d)2014

51,397,000

3,671,000

467,800

(e)2015

74,238,300

4,173,700

244,700

12

14

15

	amount snown on line 11,
	column (f)
6	Public support. Subtract li
	from line 4

(or fiscal year beginning in) ▶

Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents,

similar sources

carried on

through 10

organization

instructions

supported organization

VI)

12

15

Section B. Total Support Calendar vear

royalties and income from

Net income from unrelated business activities, whether or not the business is regularly

10 Other income Do not include gain or loss from the sale of

11 Total support. Add lines 7

capital assets (Explain in Part

Gross receipts from related activities, etc. (see instructions)

Section C. Computation of Public Support Percentage

Public support percentage for 2014 Schedule A, Part II, line 14

(a)2011

46,650,900

3,146,019

170,984

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

209.762,446

240,374,300

19,902,019

1,112,984

261,389,303

34,157,177

80 249 %

81 895 %

▶▽

▶□

▶□

Schedule A (Form 990 or 990-EZ) 2015

(f)Total

	c	ıy	_	:	_
	(V	i)	
ı	d	e	r		

18

Part III 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 example the foliate qualify under the tests listed below places complete Dort II \		

Se	ction A. Public Support		,		, ,		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f) ⊤otal
(or f	iscal year beginning in) 🟲	(a)2011	(0)2012	(0)2013	(4)2014	(6)2013	(1) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do						
	not include any "unusual grants")						
2	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						
3	Gross receipts from activities						
_	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
b	A mounts 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						
8	Public support. (Subtract line 7c						
Ŭ	from line 6)						
Se	ction B. Total Support		•	•	•	•	•
	Calendar year	(-)3011	(b) 2012	(2)3013	(4)2014	(0)3015	(f)Total
(or f	iscal year beginning in) 🕨	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
9	Amounts from line 6						
0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b						
c	Net income from unrelated						
11	business activities not included	1					
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)					<u> </u>	<u> </u>
14	First five years.If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(· <u> </u>
_	check this box and stop here						▶ □
	ection C. Computation of Pub	<u> </u>		40 - 1 - 10:			
15	Public support percentage for 2015	• ,	•	e 13, column (f))		15	
16	Public support percentage from 20:	·	·			16	
	ction D. Computation of Inv						
17	Investment income percentage for	2015 (line 10c, c	olumn (f) divided	by line 13, colur	nn (f))	17	

19a 33 1/3% support tests—2015. 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 more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests—2014. 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 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Investment income percentage from 2014 Schedule A, Part III, line 17

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

Se	I, complete Sections A and D, and complete Part V) 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 Part VI 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)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
3а	509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?			
b	If "Yes," answer (b) and (c) below 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 Part VI when and how the organization made the determination	3a 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 Part VI what controls the organization put in place to ensure such use	3c		
4 a	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		
b	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)? 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	4c		
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	Type I or Type II only. 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 Part VI .	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		
9 a	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 Part VI .	9a		
b	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 Part VI .	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 Part VI .	9c		
0a	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		
b	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)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11 a		
b	A family member of a person described in (a) above?	11b		·
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		

Nο

Yes

Yes

No

No

			·	
Section	B. Type	I Supporting	, Organization	s

Section D. All Type III Supporting Organizations

supported organization(s)

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 Part VI 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 Part VI 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		

	tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of		l
	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		

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 Part VI the role the organization's supported organizations played in this regard	з	

Section F. Type III Functionally-Integrated Supporting Organizations

	Section 1. Type 111 I directionally-integrated Supporting Organizations							
1	. Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)							

The organization satisfied the Activities Test Complete line 2 below

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

If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the

organization(s) or (ii) serving on the governing body of a supported organization?

- The organization is the parent of each of its supported organizations. Complete line 3 below

- ernment entity (see

C		The organization supported a governmental entity. Describe in Part VI how you supported a go	٥v e
	•	instructions)	

Activities lest Answer (a) and (b) below.	Yes
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the	
supported erganization(s) to which the erganization was responsive?	

supported organization(s) to which the organization was responsive?	
If "Yes," then in Part VI identify those supported organizations and explain 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** 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 **Part VI** 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 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of
- 3а each of the supported organizations? Provide details in Part VI **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each 3b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Type III non-functionally integrated supporting organizations must complete Sections A through E

Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other

	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

5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property 6 held for production of income (see instructions) 7 Other expenses (see instructions) **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4) 8

(B) Current Year (A) Prior Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see 1 instructions for short tax year or assets held for part of year)

Average monthly value of securities **1**a 1b Average monthly cash balances **1**c Fair market value of other non-exempt-use assets

1d Total (add lines 1a, 1b, and 1c) **Discount** claimed for blockage or other factors е (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater 4 amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 035 7 7 Recoveries of prior-year distributions

8 Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1

2 2 Enter 85% of line 1

Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 4 Enter greater of line 2 or line 3 4

5 Income tax imposed in prior year **Distributable Amount.** Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions) 6 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

instructions) Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	ontinued)
Section D - Distributions	(/(/ 11	<u> </u>	Current Year
A mounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furth excess of income from activity		ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
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	ICTIONS		
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 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		, m	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
b c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
а			
<u>b</u>			
c Excess from 2013			
d From 2014			
e From 2015			
		Schedule A	(Form 990 or 990-EZ) (2015

Schedule A	chedule A (Form 990 or 990-EZ) 2015 Page 8						
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					
R	leturn Reference	Explanation					
		Schedule A (Form 990 or 990-i	EZ) 2015				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE D**

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 2015

DLN: 93493313020756

reas	or the Sury nal Revenue Service	Information about Schedule D	FATTACH to Form 99 (Form 990) and its instr		.gov/f	orm 990 .	Inspe	
Na	me of the organiz uncil on Foreign Relat				Empl	oyer identi	fication num	ber
Pa		zations Maintaining Donor				628168 or Accou	nts.	
	33,11,513	are or garnzador anon or	(a) Donor advised fun	•	(b)	Funds and	other accoun	ts
1	Total number	r at end of year						
2	Aggregate va year)	alue of contributions to (during						
3	Aggregate va	alue of grants from (during year)						
4	Aggregate va	alue at end of year						
5	_	ation inform all donors and donor a rganization's property, subject to t	-		or advis	sed	Yes	No
6	used only for ch	ation inform all grantees, donors, a naritable purposes and not for the irmissible private benefit?		2 2		purpose	Yes	□ No
Pa	rt III Consei	rvation Easements. Comple	ete if the organization	n answered "Yes" o	n Forn	n 990, Pai	rt IV, line 7.	·
1	Purpose(s) of c	onservation easements held by th	e organization (check a	ll that apply)				
	Preservation education)	on of land for public use (e g , recr	eation or r	Preservation of an	hictor	ically impo	rtant land are	
	′	of natural habitat	, [Preservation of a				a
	<u>. </u>	on of open space	'	r reservation of a	creme	d motoric s	reractare	
2	Complete lines	2a through 2d if the organization leelast day of the tax year	held a qualified conserv	ation contribution in th	ne form	of a conse	ervation	
						Held at	the End of t	he Year
а	Total number of	f conservation easements			2a			
b	Total acreage r	estricted by conservation easeme	ents		2b			
c		servation easements on a certified		` ′	2 c			
d		servation easements included in (c ire listed in the National Register	c) acquired after 8/17/0	6, and not on a	2d			
3		servation easements modified, trai	nsferred, released, extir	iguished, or terminate	d by the	e organizat	ion during the	2
	tax year ►							
4	Number of state	es where property subject to cons	ervation easement is lo	cated ▶	_			
5		ization have a written policy regar enforcement of the conservation e	,	oring, inspection, hand	ling of	Г	Yes	No
6	Staff and volunt year	teer hours devoted to monitoring,	inspecting, handling of v	violations, and enforci	ng cons	ervation e	asements dui	ing the
7	•	enses incurred in monitoring, inspe	ecting, handling of violat	cions, and enforcing co	nserva	tion easem	nents during t	he year
8		servation easement reported on lir on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy th	e requirements of sect	ion 17	` '` '	_ Yes _	No
9	balance sheet,	escribe how the organization report and include, if applicable, the text	of the footnote to the o					
יוב(י		n's accounting for conservation ea Izations Maintaining Collec		rical Treasures /	r O+h	ar Simil	ar Accets	
4:1		ete if the organization answere			,, Jul	iei Jiiiili	ui A33613.	
1 a	works of art, his	ion elected, as permitted under SF storical treasures, or other similar e, in Part XIII, the text of the footi	assets held for public e	xhibition, education, o	r resea	arch in furth		
b	works of art, his	ion elected, as permitted under SF storical treasures, or other similar e the following amounts relating to	assets held for public e					blic
(ded on Form 990, Part VIII, line 1			▶ \$			

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

▶\$_

(ii) Assets included in Form 990, Part X

Revenue included on Form 990, Part VIII, line 1

	(continued)									
3	Using the organization's acquisition, accollection items (check all that apply)	cession, and other r	ecords	, ched	ckany	of the	following th	nat ai	re a significant u	se of its
а	Public exhibition			d	L r	oan or	r exchange programs			
b	Scholarly research			е	Г о	ther				
c	Preservation for future generations	ons								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII									
5	During the year, did the organization so assets to be sold to raise funds rather t	han to be maintaine								es No
Pa	rt IV Escrow and Custodial Arr Complete if the organization Part X, line 21.		on For	m 99	0, Pa	rt IV,	line 9, or	rep	orted an amou	nt on Form 990,
1 a	Is the organization an agent, trustee, cu included on Form 990, Part X?	nization an agent, trustee, custodian or other intermediary for contributions or other assets not n Form 990, Part X?								
b	If "Yes," explain the arrangement in Part XIII and complete the following table						nount			
C	Beginning balance	Beginning balance 1c								
d	Additions during the year							1d		
е	Distributions during the year							1e		
f	Ending balance							1 f		
2a	Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No									
b	If "Yes," explain the arrangement in Pai									
Pa	rt V Endowment Funds. Compl							-		
1a	Beginning of year balance	(a)Current year 371,346,400	(b)	Prior y 369.	ear 190,5 0 0	b (c)	333,666,0		d) Three years back 301,718,400	(e)Four years back 303,107,500
La	· · · ·	0.270.07.00							3327, 23, 130	000,201,000
b	Contributions	9,159,300		8,3	304,400		5,223,4	00	6,649,000	12,418,800
С	Net investment earnings, gains, and losses	-6,809,500		9,9	916,500		45,273,0	00	44,236,300	1,678,700
d	Grants or scholarships									
e	Other expenditures for facilities and programs	17,383,300		6,9	950,600		6,164,9	00	13,899,300	12,437,400
f	Administrative expenses	2,279,900		9,:	114,400		8,807,0	00	5,038,300	3,049,400
g	End of year balance	354,033,000		371,3	346,400		369,190,5	00	333,666,100	301,718,200
2	Provide the estimated percentage of the	current year end b	alance	(line	1g, col	lumn (a	a)) held as			
а	Board designated or quasi-endowment i	21 360 %								
b	Permanent endowment ► 50 640 %									
c	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c	28 000 % should equal 1009	%							
3a	Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No									
	(i) unrelated organizations			•			•		⊢	a(i) No
b	(ii) related organizations			 on Sc	hedule	 D2	•		<u> </u>	a(ii) No
4	Describe in Part XIII the intended uses		•					•		30
Pa	rt VI Land, Buildings, and Equi	pment.								
	Complete if the organization Description of property	answered 'Yes' to	<u>o Forn</u>	n 990), Part (a)	: IV, lı	<u>ne 11a.Se</u> (b)	ee F	orm 990, Part : Accumulated	
	Description of property				or other ivestme		Cost or other			(d)book value
	Land						7,2	52,000		7,252,000
b	Buildings						46,3	20,000	10,013,10	36,306,900
	Leasehold improvements		• •				•	43,000	+	
	Equipment		• •				20,98	36,600	15,976,8	5,009,800
е	Other						99	96,900		996,900
Tota	al. Add lines 1a through 1e (Column (d) mu			columr	i (B), Ii.	ne 10(d		•	<u></u> ▶	74,425,100

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Schedule D (Form 990) 2015	6.1		Page 3
Part VII Investments—Other Securities. C See Form 990, Part X, line 12.	omplete if the organ	ization answered 'Ye	s' on Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	у	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives			- Coot of the or your manner range
(2)Closely-held equity interests (3)Other			
(A) GROWTH ORIENTED HEDGE FUNDS		64,254,600	F
(B) DIVERSIFIERS		112,720,100	F
(C) PRIVATE EQUITY FUNDS		19,590,800	F
(D) PRIVATE RE/NR FUNDS OF FUND		4,918,200	F
			F
(E) DEFLATION HEDGES		7,030,200	Γ
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	208,513,900	
Part VIII Investments—Program Related. Complete if the organization answere	ed 'Yes' on Form 990	, Part IV, line 11c. _{Se}	e Form 990. Part X. line 13.
(a) Description of investment		(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
-			
Part IX Other Assets. Complete if the organizat	cion answered 'Yes' on F	orm 990, Part IV, line 1	1d See Form 990, Part X, line 15
(a) Des		, ,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the ori			
See Form 990, Part X, line 25.			
1. (a) Description of liability	(b) Book value	e	
Federal income taxes		0	
ACCRUED POSTRETIREMENT	6,216	.000	
INTEREST RATE SWAP AGREEMENT	9,649	,500	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, prov	15,865		s financial statements that reports the
organization's liability for uncertain tax positions under			
XIII 🔼			

Schedule D (Form 990) 2015

1

2

b

c

d

е

b

1 2

а

b

d

е

b

Part XIII

information

3

3

Page 4

73,207,700

-27,242,600

100,450,300

Add lines 4a and 4b . Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Other (Describe in Part XIII) Add lines 2a through 2d

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

Supplemental Information

Add lines 2a through 2d . .

Subtract line 2e from line 1 .

Add lines 4a and 4b . .

Return Reference

schedule D part XI and XII

Total revenue, gains, and other support per audited financial statements

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Income (\$1,177,000)

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses and losses per audited financial statements . . . Amounts included on line 1 but not on Form 990, Part IX, line 25

4a 4b 2a 2b

2a

2b

2c

2d

2c 2d

Part XI, line 2d Change in value of interest rate swap agreement (\$1,823,300) Post-Retirement Benefits (\$56,000) Reversal of contribution receivable for endowment (\$1,000,100) Total changes in line 2D (\$2,879,400) part XI line 4b and XII line 4b re-class of rental expenses to offset Rental

2,279,900 -1,177,000

2,279,900

-1,177,000

-24,363,200

-2,879,400

4c 5

> 2e 3

4c

2e

3

1,102,900 101,553,200 68,828,300

68,828,300

1,102,900

69,931,200

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015

efile GRAPHIC print	- DO NOT PROCESS	As Filed Dat	ta -	DLN:	93493313020756
SCHEDULE F (Form 990)	Statement of	OMB No 1545-0047			
(1 01111 330)	► Complet	2015			
Department of the Treasury Internal Revenue Service	▶ Information about Schee		o Form 990. nd its instructions is at w	ww.irs.gov/form990.	Open to Public Inspection
Name of the organization Council on Foreign Relation	ns Inc			Employer idei 13-1628168	ntification number
	formation on Activi the organization answ			14b.	
and other assistan	Does the organization ce, the grantees' eligit grants or assistance?			_	□ Yes □ No
assistance outside	Describe in Part V the the United States (The following Part I, line	,			, ,
(a) Region	(b) Number of offices in the region	f (c) Number of	(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	
(1) Central America and Caribbean	the		Investments		128,608,498
(2)					
(3)					
(4)					
(5)					
3a Sub-total b Total from continuati to Part I					128,608,498
c Totals (add lines 3a a		ns for Form 990	[No.50082W Sche	128,608,498

Schedule F (Form 990) 2015

section

and EIN (if

applicable)

Page 2

(i) Method of

valuation

(book, FMV,

appraisal, other)

organization

(1) (2) (3)

		space is need		s" to Form 990, Par	t IV, line 15, for any	/ recipien
1	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) A mount of	(f) Ma

(d) Purpose of grant	(e) A mount of cash grant

lanner of cash disbursement

of non-cash assistance

(g) A mount

assistance

(h) Description

of non-cash

(4) Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2015

Part III can be	Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				

Fait III call be	duplicated il additio	nai space is n	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	
	(b) Region	' '	l

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

Νo 5713, do not file with Form 990) Yes

Schedule F (Form 990) 2015

(accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete

Page 5

Schedule F (Form 990) 2015

this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference Explanation

Return Reference	Explanation
part iv	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 required for filing the Forms 926, 5471, 8621 or 8865. To the extent such a form was completed, it has been filed with the Organization's Form 990-T.

efile GRAPHIC print - DO NOT PROCESS DLN: 93493313020756 As Filed Data OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number Council on Foreign Relations Inc 13-1628168 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 (c) IRC section **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

sending CFR staff to observe Humanity in Action's programs firsthand

Schedule I (Form 990) 2015

Part III

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Explanation

Return Reference Form 990, Sch I 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

Page 2

Additional Data

Arthur Ross Book Award Gold Prize

Arthur Ross Book Award Silver Prize

Arthur Ross Book Award Bronze Prize

IAF Fellowship on Nuclear Security

Stanton Nuclear Security Fellowship

Studies Fellowship - Int'l & National

Recipient

Recipient

Recipient IAF Fellowship

Murrow Fellowship

Security Law

Hitachi Japan Fellowship

Software ID: Software Version:

1

11

EIN: 13-1628168

Name: Council on Foreign Relations Inc

Form 990, Schedule 1, Part 111, Gra	ints and Other As	ssistance to Dome	istic Individuals.	
(a)Type of grant or accustance	(b)Number of	(c) A mount of	(d) A mount of	

Form 990, Schedule I, Part III,	Grants and Other	Assistance to Dor	nestic Individuals.
(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance

(e)Method of valuation (book, (f)Description of non-cash assistance

15,000

7,500

2,500

587,917

220,982

219,631

116,833

20,000

65,000

FMV, appraisal, other)

DLN: 93493313020756 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2015 **Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** Council on Foreign Relations Inc 13-1628168 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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 Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Νo Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Yes Any related organization? 5b Nο If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a 6h Νo Any related organization? If "Yes," on line 6a or 6b, describe in Part III For persons listed on 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 Were any amounts reported on 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 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Schedule J (Form 990) 2015

Cat No 50053T

section 53 4958-6(c)?

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

Page 2

Schedule J (Form 990) 2015

	ior each histed marvida	al must equal the total	amount of Form 990, i	art vii, Section A, iiik	e Ta, applicable colui	iiii (D) and (E) amount	s for that marvidual
(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	(C) Retirement and	(D) Nontaxable	` '	(F) Compensation in	
	Base	(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(B) reported

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	

Schedule J (Form 990) 2015

as deferred on prior Form 990

See Additional Data Table

Page 3

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

compensation and bonuses are determined in the same process.

Software ID: Software Version:

EIN: 13-1628168

Name: Council on Foreign Relations Inc

Form 990, Schedule J, I	Part:	II - Officers, Dire	ctors, Trustees, K	ey Employees, an	d Highest Comper	sated Employee:	S	
(A) Name and Title			of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1Richard N Haass President (Non-Voting Board)	(1)	441,635	· ·	·	20,997	20,812	1,425,444	0
	(11)	0	0	0	0	0		- 0
1Keith C Olson Exec VP, CFO & Treasurer	(I) (II)	353,446		0	20,997	20,812	485,255	0
2James M Lindsay Sr VP & Director Of Studies	(1)	280,757	108,000	0	20,997	0 23,233	0 432,987	
	(11)	0	0	0	0	- 0	. 0	0
3 Nancy D Bodurtha VP, Meetings and Membership	(I) (II)			0	16,965 	1,989	282,022	0
4Irına Faskıanos VP,National Program &	(1)	201,969	50,000	0	16,157	9,451	0 0	
Outreach	(11)	0	0	0	0	0	, 0	0
5 Suzanne E Helm VP, Philanthropy & Relations	(I)			0	20,997	19,234	372,840	0
6 Jan-Mane Hughes VP, HR and Administration	(1)		61,800	0	16,394	20,497	303,614	0
7 Lısa K Shıelds	(1)		0	0	0	0	172.034	0
VP,Glob Comm & Media Relations	(11)			0	10,261	14,517	178,034	0
8 Lynda A Hammes Publisher, Foreign Affairs	(I)			0	14,591	19,901	269,377	0
9Jeffrey A Reinke Secretary of the Corporation	(1)		35,000	9,494	12,394	20,266	0 232,077	
	(11)		0	0	0	0	, 0	- 0
10Caroline N McCall VP Education	(I)			0	14,591	20,399	257,375	0
11Gideon G Rose Editor, Foreign Affairs	(1)			0	18,581	20,564	324,910	
	(11)		0	0	0	0	0	- 0
12 Robert B Kahn Sr Fellow for Inter Econ	(1)			0	17,237	2,192	249,896	. 0
13Mırıam Hıggıns General Counsel	(1)			0	15,673	19,829	287,570	
14Chnstopher Tuttle	(11)		0	0	0	0	0	0
14Christopher Luttle Managing Director	(1)			0	14,761	20,118	3 271,820 	0
15Michael A Levi Director, Geoeconomic Studies	(1)			0	18,177	13,835	282,878	
	("')		U	U	0	0	o	- 0

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493313020756 OMB No 1545-0047 Schedule K Supplemental Information on Tax Exempt Bonds (Form 990) ▶ 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. Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number Council on Foreign Relations Inc. 13-1628168

2015 Open to Public Inspection

(i) Pool

financing

No

Х

No

No

D

Schedule K (Form 990) 2015

Yes

D

(h) O n behalf of

ıssuer

No

Χ

Yes

(b) Issuer EIN

Bond Issues (a) Issuer name

District of Columbia

Proceeds

Total proceeds of issue

allocation of proceeds?

Private Business Use

53-6001131

Were the bonds issued as part of a current refunding issue?

Were the bonds issued as part of an advance refunding issue?

Does the organization maintain adequate books and records to support the final

25483VJU9

(c) CUSIP #

09-04-2012

(d) Date issued

62,680,000 Acquisition/Renovation Office

(e) Issue price

Blda 4,705,000

0

0

0

0

0

0

Yes

Yes

62,680,000

62,680,000

No

Χ

No

Х

2010

Α

Yes

Χ

Χ

Χ

Yes

В

(f) Description of purpose

No

С

No

Χ

(g) Defeased

Yes

Part I

Part II

2

6

8

Part III

Are there any lease arrangements that may result in private business use of bond-For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Was the organization a partner in a partnership, or a member of an LLC, which owned

Х Cat No 50193E

No

В

Yes

C

Yes

No

No

Yes

Yes

Schedule K (Form 990) 2015 Page 2 Part III Private Business Use (Continued) Α В С D Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use 3a Х If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bondc Х If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside d counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 % other than a section 501(c)(3) organization or a state or local government ▶ Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 6 Does the bond issue meet the private security or payment test? . . . 7 Х Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Х ıssued[?]. If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections С Х Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Arbitrage Α В C Yes No Yes Nο Yes No Yes Nο Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Χ Reduction and Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?.... 2 Rebate not due yet? Х а Exception to rebate? b Х No rebate due? С Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Has the organization or the governmental issuer entered 4a Χ into a qualified hedge with respect to the bond issue? Term of hedge C Was the hedge superintegrated? d Was the hedge terminated? Schedule K (Form 990) 2015

contract (GIC)?

Page 3

D Yes No

No Yes No Yes No Yes 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? **Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

В

В

No

Yes

No

Yes

Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor the requirements of section 148? . . .

Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?

Procedures To Undertake Corrective Action

Were gross proceeds invested in a guaranteed investment

Yes

No

Х

Χ

efile GRAPH	IC print	- DO N	OT PROC	ESS	As	Filed Dat	a - [DLN:	9349	33130	20756
Schedule L Form 990 or 99	90-FZ)		Tra					d Person	S			омві	No 1545	5-0047
	,		"Yes" on	Form 9	► Complete if the organization answered prim 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.									.5
Department of the Freasury		▶Iı	nformation a				990 or 990-EZ) and its instru	uctions	is at			n to P spect	
nternal Revenue Se Name of the or									Er	nplove	r identi	ificatio	n numbe	r
Council on Foreign										3-162			-	
								(4), and 501(d	(29)	organı	zations		406	
	piete if the ne of disqu							<u>25a or 25b, or</u> fied person an			z, Part criptior		400 (d) Cor	rected?
1 (a) name of allequanties person					-	. 01	ganızatıon		`	tran	saction		Yes	No
4958 .								sons during the	٠		> \$			
			, .		•	·	ne organizació		•		· ·			
Co	mplete if t	he organ		wered	"Yes'	Persons. on Form 99 on Part X, lin		line 38a, or Fo	orm 99	00, Pai	t IV, lır	ne 26, d	or if the	
(a) Name of interested person	(b) Relat wit organiz	h '	(c) Purpose of loan		oan to om the izatio	e	(e)Original principal amount	(f)Balance due) In nult?	A ppro by boa	oved ard or	(i)Wr agreer	
				То		From			Yes	No	Yes	No	Yes	No
										+				
	1						1							
Total Part IIII G r	ants or /	A coiota	▶ \$	fitin	a In	terested F	Darconc							
								rt IV, line 27	·.					
(a) Name of pers			Relationshi rested pers organiza	on and		(c) A mount	of assistance	e (d) Type	ofassı	stance	e (e)	Purpo:	se of ass	istance
			organiza	21011										
For Paperwork Re	duction Act	t Notice.	see the Inst	ruction	s for	 Form 990 or 9	90-EZ. (Cat No 50056A		School	dule L (S	orm on	0 or 990-	.F7) 2015
										JUNE	иміс в (Г	J. 111 77	: - 	/

(1) J Tomilson Hill

Part V

Form 990, Part VII

(a) Name of interested person

No

Νo

organization's

revenues?

Page 2

Return Reference

		organization
on Hill		Board Member
Supplemental Informa		
Provide additional information for responses to que		
eturn Reference		
Part VII 1 Tomilson Hill is		milson Hill is a non-

(b) Relationship

between interested

person and the

zation	
er	
to question	s on
,	

Explana	
n Schedule L (see ins	5
154,669	

of the Council on Foreign Relations and received compensation of \$154,669

(c) A mount of

transaction

spouse's compensation tructions) tion

J Tomilson Hill is a non-independent member of the board. His spouse, Janine W. hill, is an employee

(d) Description of transaction

Yes

Schedule L (Form 990 or 990-EZ) 2015

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493313020756 **SCHEDULE M** OMB No 1545-0047 **Noncash Contributions** (Form 990) 2015 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Inspection Treasury Internal Revenue Service **Employer identification number** Name of the organization Council on Foreign Relations Inc 13-1628168 Part I Types of Property (a) (b) (c) (d) Number of contributions Noncash contribution Method of determining Check ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g 1 Art—Works of art . . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles . . 6 7 Boats and planes Intellectual property . . Securities—Publicly traded . 9 Χ 45 12,451,534 FAIR MARKET VALUE 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . . Securities—Miscellaneous .

contribution—Historic structures contribution—Other . . Real estate—Residential . Real estate—Other . . .

13 Qualified conservation 14 Qualified conservation 15 16 Real estate—Commercial . 17 18 Collectibles **19** Food inventory . 20 Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts 23 Scientific specimens . . 24 Archeological artifacts . **25** Other ▶ (___ **26** Other ▶ (_____) **27** Other ▶ (_____ **28** Other ▶ (_____) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used

No

for exempt purposes for the entire holding period? . 30a Νo **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 Νo 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Yes b If "Yes," describe in Part II

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Cat No 51227J

Schedule M (Form 990) (2015)

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

Schedule M (Form 990) (2015)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493313020756 OMB No. 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O (Form 990 or 2015 Complete to provide information for responses to specific questions on 990-EZ) Form 990 or 990-EZ or to provide any additional information. Open to Public ➤ Attach to Form 990 or 990-EZ. Department of the Inspection ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Treasury www.irs.gov/form990. Internal Revenue Service **Employer identification number** Name of the organization Council on Foreign Relations Inc 13-1628168 Return Explanation Reference Form 990. students, civic and religious leaders, and OTHER INTERESTED CITIZENS IN ORDER TO HELP THEM BETTER UNDERSTAND THE Part III. Line WORLD AND THE FOREIGN POLICY CHOICES FACING THE UNITED STATES AND OTHER COUNTRIES FOUNDED IN 1921, CFR 1 TAKES NO INSTITUTIONAL POSITIONS ON MATTERS OF POLICY CFR CARRIES OUT ITS MISSION BY MAINTAINING 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 CFR MEMBERS TO DISCUSS AND DEBATE MAJOR INTERNATIONAL ISSUES SUPPORTING A STUDIES PROGRAM THAT FOSTERS INDEPENDENT RESEARCH. ENABLING CFR SCHOLARS TO PRODUCE ARTICLES. REPORTS. AND BOOKS AND HOLD ROUNDTABLES THAT ANALYZE FOREIGN POLICY ISSUES AND MAKE CONCRETE POLICY RECOMMENDATIONS PUBLISHING FOREIGN AFFAIRS. THE PREEMINENT JOURNAL ON INTER-NATIONAL AFFAIRS AND U.S. FOREIGN POLICY SPONSORING INDEPENDENT TASK FORCES THAT PRODUCE REPORTS WITH BOTH FINDINGS 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 ON ITS WEBSITES, CFR ORG AND FOREIGNAFFAIRS COM. Form 990, Part III, Line 4(d) ALL Other Programmatic Activities Website CFR's 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 initiatives, videos and transcripts of on-the-record meetings and seminars and more. The site also provides a comprehensive account of the history and activities of CFR in New York and at its Washington D.C. Office Foreignaffairs com is the wiebsite of CFR's flagship magazine, and offers access to a deep archive of articles and related resources monthly. The Stephen M. Kellen Term Member Program encourages promising young leaders in government, media, nongovernmental organizations, law, business, finance, and academia to engage in a sustained conversation on international affairs and U.S. foreign policy. The program allows these younger members to interact with seasoned foreign-policy experts and participate in a wide variety of events designed especially for them. Each year a new class of term members, between the ages of 30 and 36, is elected to a five-year membership term. The Council on Foreign Relations launched the Independent Task Force Program in 1995 with a Task Force on nuclear nonproliferation, chaired by Stephen J. Hadley, who most recently served as the national security adviser in the George W. Bush administration. More than seventy reports later, Task Forces have become a trademark of the Council The Council sponsors an Independent Task Force when an issue of current and critical importance to U.S. foreign policy arises, and it seems that a group diverse in backgrounds and perspectives may nonetheless be able to reach a meaningful consensus on a policy through private and nonpartisan deliberations. In regards to outreach initiatives, the Council is committed to reaching out to different constituencies so that they better understand the world and the foreign policy choices facing the United States and other governments. CFR is devoting more time and energy to connecting with and serving as a resource for groups of interested citizens whose voices are increasingly important to the national foreign policy debate. These constituencies include educators and students, religious and congregational leaders, and state and local officials. CFR's additional programs are Education, a National Program and a Global Board of Advisors For more information, please visit the organization's website, www.cfr.org

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 law yers, 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

w ebsite

Return Reference	Explanation
' '	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,	Conflict of interest policy enforcement and monitoring Each officer, director, and key employee of the Council on Foreign
Part VI, Line	Relations is required to annually disclose any potential conflicts of interest to the Audit Committee of the Board. The Audit
12c	Committee review's 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

Reference	
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. This process was last undertaken on May 17, 2016. Compensation decisions and reports are contemporaneously documented in the minutes of the

Explanation

Return

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 upon request. The Council's audited financial statements are available on our website, www.cfr.org

Return Reference	Explanation
, , ,	Other Changes in Net Assets Change in value of interest rate swap agreement (\$1,823,300) Post-Retirement Benefits (\$56,000) Reversal of contribution receivable for endowment (\$1,000,100) Total changes in net assets (\$2,879,400)