CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Interna	l Revenue	Service	Information about Form 990 and its instructions is at www.	irs.gov/form990	Inspection
A F	or the 2	014 calend		DEC 31, 2014	
B Ch	eck if plicable	C Name o	of organization	D Employer identifica	ation number
	Address change	AMER	RICAN BRIDGE 21ST CENTURY FOUNDATION		
	Name change		ousiness as	27-52	78038
	Initial return		r and street (or P.O. box if mail is not delivered to street address) Room/suit	E Telephone number	
	Final return/	455	MASSACHUSETTS AVENUE, NW 2ND F	<u>L (202)</u>	747-2059
	termin- ated		town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,855,500.
늗	Amended return Applica-	I MWDL	HINGTON, DC 20001	H(a) Is this a group reti	
L_	Applica- tion pending		and address of principal officer:JESSICA MACKLER AS C ABOVE	for subordinates?	
LT	av-avam	npt status:	501(c)(3)	H(b) Are all subordinates incl	uded? Yes No st. (see instructions)
			OGEPROJECT. COM	H(c) Group exemption	
K Fo	rm of or	rganization:		ar of formation: 2011 M	
	rt i S	Summary	1		
9	1 Br	riefly descri	be the organization's mission or most significant activities. $\overline{ ext{THE AMERI}}$	CAN BRIDGE 21	ST CENTURY
ernance	_		TION ADVOCATES PROGRESSION SOLUTIONS TO		
_ E		heck this bo	• • • • • • • • • • • • • • • • • • • •		ets.
& Gov			oting members of the governing body (Part VI, line 1a)	3	3
-			dependent voting members of the governing body (Part VI, line 1b) r of individuals employed in calendar year 2014 (Part V, line 2a)	4	
ા છે. vities			of individuals employed in calendar year 2014 (Fair V, line 2a)	6	0
ا ۋرد			ed business revenue from Part VIII, column (C), line 12	7a	0.
DE C Acti			business taxable income from Form 990-T, line 34	7b	0.
1		-		Prior Year	Current Year
ا ولِينا	8 C	ontributions	s and grants (Part VIII, line 1h)	3,334,429.	1,855,500.
\$ E		•	vice revenue (Part VIII, line 2g)	0.	0.
₩.			ncome (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
Revenue			ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,334,429.	1,855,500.
_			imilar amounts paid (Part IX, column (A), lines 1-3)	55,000.	0.
			to or for members (Part IX, column (A), III 44) FIVED	0.	0.
S			er compensation, employee benefits (Part)x column (A), lines 5 (19)	1,358,507.	1,549,786.
Expenses	16a Pi	rofessional	fundraising fees (Part IX, column (A) the 11e)	377,375.	206,187.
ď.				1 200 410	F12 163
ш	17 0	ther expens	ses (Part IX, column (A), lines 11a-1 (7, 11f-24e)	1,288,410.	512,163. 2,268,136.
	18 I	otal expens	es. Add lines 13-17 (must equal Part IX, column (A) Hine 25)	255,137.	<412,636.>
es	יח פון	evenue less	s expenses. Subtract line to from line 42	Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 To	otal assets	(Part X, line 16)	869,647.	568,500.
Ass	21 To		s (Part X, line 26)	297,101.	408,590.
<u>ş</u> <u>ş</u>	22 N		r fund balances, Subtract line 21 from line 20	572,546.	159,910.
		Signatu			
			, I declare that I have examined this return, including accompanying schedules and state		knowledge and belief, it is
true,	correct,	and complet	te. Declaration of preparer (other than officer) is based on all information of which preparer	rer nas any knowledge.	-
Sig	,	Sign	real OMICE		
Her	1.	, J	SICA MACKLER, PRESIDENT		
	· []		print name and title		
	F	Print/Type pr	eparer's name Preparer's sign		
Paid		(ATTHE)	W JOHNSON MAY 1 HEY		
	_ ⊢	Firm's name	COUNCILOR, BUCHANAN & M.		
Use	Only F	Firm's addres	58 7910 WOODMONT AVENUE, S		

May the IRS discuss this return with the preparer shown above? (see instru 432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the set SEE SCHEDULE O FOR ORGANIZATION M

BETHESDA, MD 20814

Form 990 (2014) AMERICAN BRI Partily Checklist of Required Schedules

	•		res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			7,
_	If "Yes," complete Schedule A	1	v	X
	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		х	
	public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	
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		
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 98-197 If "Yes," complete Schedule C, Part III	5		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			x
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Tooks	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	V 73		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	h its	REPORTER N	
_	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1		<u> </u>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	1	Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	L	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ŀ	۱.,	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	ļ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		x	
	Schedule D, Parts XI and XII	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a	 	X
b		1.1		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			ŀ
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	├ —
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_v
46	1c and 8a? If "Yes," complete Schedule G, Part II	18	├	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	+	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	t	+
	11 103 to mile 204, did the organization attach a copy of its addited infancial statements to this folding		990	(2014)
		. 0.11		,_5,7

Form	990 (2014) AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278	<u> 1038</u>	<u>P</u>	age 4
Par	t IV Checklist of Required Schedules (continued)			
_	•		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			1
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		└ ─
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	İ		1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	İ		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			ļ
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			\ ₃ ,-
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			x
	of any of these persons? If "Yes," complete Schedule L, Part III	27_		 ^-
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions):	00-		X
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	 	$\frac{\Lambda}{X}$
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		 ^
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	 	X
30	Did the organization receive more than \$25,000 in non-cash contributions? If these schedule will be organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	 	
50	contributions? If "Yes," complete Schedule M	30	1	x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30	 	 -
3.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	 →	†	+=
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			\vdash
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	<u> </u>		
٠.	Part V, line 1	34	Į.	x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	\vdash	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1	1	
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b]	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			T
	If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			\Box

Form **990** (2014)

37

X

38

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

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

Note. All Form 990 filers are required to complete Schedule O

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 2	8		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	미		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		ļ
	(gambling) winnings to prize winners?	1c	X	
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	0		
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
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	ļ	X
b	If "Yes," enter the name of the foreign country:			
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1		
	any contributions that were not tax deductible as charitable contributions?	6a	X	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1	٠,,	
_	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).	.		
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		ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x
	to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			x
•		7e 7f		X
,	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g	If the organization received a contribution of qualified intellectual property, and the organization file Point 8699 as required r		 	
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		
9	Sponsoring organizations maintaining donor advised funds.	 		
a		9a		
b		9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	Į	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			}
b	Gross income from other sources (Do not net amounts due or paid to other sources against		İ	
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		ļ	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.		1	
þ	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	4		
	Enter the amount of reserves on hand	+	├	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(2014)
		LOH	コララび	(4U 14)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, 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	·	 			
Sect	ion A. Governing Body and Management					
			1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4			
	If there are material differences in voting rights among members of the governing body, or if the governing	1				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other	100		
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	 990 ws	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the organization have members or stockholders?			6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or a	Innoint			-	_==_
7.0	more members of the governing body?	фропп	Offic Of	7a		X
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,	etookb	oldom or			
D	persons other than the governing body?	SIUCKN	olucis, Ul	J		x
	,	or b	a fallouing:	7b	3 70	774
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ai Dy IN	e ionowing.		* ************************************	لسند
_	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?	•		8b		<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached	at the			,,
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		 	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code.)		_	
					Yes	No
	Did the organization have local chapters, branches, or affiliates?		•	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,	·		
	and branches to ensure their operations are consistent with the organization's exempt purposes?		•	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	ore filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	iflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe			
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?	- •		14	X	
15	Did the process for determining compensation of the following persons include a review and approx	val by i	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	•	-			
а	The organization's CEO, Executive Director, or top management official			15a	X	
ь	Other officers or key employees of the organization			15b	X	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	•	• •	16 1 17 25	* * * * * * * * * * * * * * * * * * *	1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a		1	`
	taxable entity during the year?		···	16a	<u> </u>	X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate ite	participation	53 . 45 . 5	2.34	
5	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evalue				in the	a v
	exempt status with respect to such arrangements?	arnzaci	5113	16b	- E.	
Sec	tion C. Disclosure			_ ,,,,,,	Ь——	
	List the states with which a copy of this Form 990 is required to be filed ►CA , NY , FL					
17		T (Sac	tion 501(a)(2\a anh)	availal		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-1 (2ec	autrau r(c)(a)s only)	avaliäl	אוכ	
	for public inspection. Indicate how you made these available. Check all that apply.	in i- 0	shoodisto (C)			
4-	Own website Another's website X Upon request Other (explain					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, c	onflict	ot interest policy, an	d finar	ncial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks a	ind records:			
	THE ORGANIZATION - (202) 747-2059			<u> </u>		
	455 MASSACHUSETTS AVENUE, NW , NO. 2ND FL, WASHING	G'I'OÌ	1, DC 2000	<u> 1</u>		

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and 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 organiz (A)	(B)			(C	C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)					Reportable	Reportable	Estimated
	hours per	box				is bot	h an	compensation	compensation	amount of
	week	<u> </u>	Cer an	10 8 0	recto	#/uus	(66)	from	from related	other
	(list any hours for	Irecto				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	E	ste			nsated		(W-2/1099-MISC)	(11-2/1000-111100)	organization
	organizations	置	a tr		95 S	Highest compensated employee] `		and related
	below	Individual trustee or director	Institutional trustee	Je .	Key employee	hesto	Former			organizations
	line)	ᆙ	=_	Officer	<u>ş</u>	물통	Ē			
(1) DAVID BROCK	12.00	↓		x				0.	ر ا	E2 14E
CHAIRMAN	1.00	X	1	A	\vdash	┢	┝	0.	0.	52,145
(2) DAVID BENNAHUM	1.00	$ \mathbf{x} $				1		0.	0.	0
SECRETARY (3) TED TRIMPA	1.00	╇	┝	-	├─	┢		· · ·	0.	U
DIRECTOR	1.00	$ \mathbf{x} $				-		0.	0.	0
(4) MICHAEL KEMPNER	1.00	+**	-	╁┈	\vdash	\vdash	 	1		
DIRECTOR	2.00	$ \mathbf{x} $						0.	0.	0
(5) BRAD WOODHOUSE	16.00	 	┢	_	┢	\vdash			•	'
PRESIDENT		1		X				0.	0.	88,173
(6) PILAR MARTINEZ	9.50	\vdash			Г					
CHIEF FINANCIAL OFFICER		1_	Ì	X				0.	0.	22,014
(7) EDWARD VALE	24.00									
VICE PRESIDENT				X	L			0.	0.	69,989
(8) JESSICA MACKLER	16.00	_	1	_						
CHIEF OPERATING OFFICER		╄	↓_	X	igspace	╙	<u> </u>	0.	0.	67,805
		4								
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Part VIII a AMERICAN						. 110			4	700	30	Page o
Part VII Section A. Officers, Directors, Trus	tees, Key Em	pioy	ees,	and	1 Hi	ghes	it C	ompensated Employe				
(A)	(B)		1	(C Posi		,		(D)	(E)	İ	(F)	
Name and title	Average hours per		not cl	heck i	more	than d is boti		Reportable compensation	Reportable	Estimated amount of		
	week					r/trus		from	compensatio from related		othe	
	(list any	ctor						the	organizations		compens	
	hours for	trustee or director				<u>s</u>		organization	(W-2/1099-MIS		from t	
	related	stee o	ruste		_	ensa		(W-2/1099-MISC)			organiza	
	organizations below	al tru	onalt		loyee	8 8				ļ	and rela	
	line)	Individual 1	Institutional frustee	Officer	Key employee	Highest compensated employee	Former				organiza	tions
		Ĕ	Ë	₽	Ke	至5	<u>e</u>			-+		
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	<u> </u>	Г				T						
1b Sub-total						_		0.		0.	300,	<u> 126.</u>
c Total from continuation sheets to Part V	II, Section A							0.		0.		0.
d Total (add lines 1b and 1c)							•	0.		0.	300,	126.
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	0,000 of reportab	le		
compensation from the organization											_	0
											Yes	s No
3 Did the organization list any former officer	, director, or tr	uste	e, ke	ey er	nplo	oyee	or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s	such individual									. [3	X
4 For any individual listed on line 1a, is the s	um of reportab	le c	omp	ensa	atioi	n and	to t	her compensation from	the organization			
and related organizations greater than \$15	0,000? If "Yes	," co	mpl	ete S	Sch	edul	e J i	for such individual		L	4	X
5 Did any person listed on line 1a receive or	•					-	elat	ted organizatıon or indıv	idual for services	, ,	· · · ·	
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per.	son		<u> </u>	<u> </u>		5	X
Section B. Independent Contractors	<u> </u>											
1 Complete this table for your five highest co										npensa	ation from	1
the organization. Report compensation for	the calendary	/ear	endi	ing v	<u>with</u>	or w	rth <u>i</u>	n the organization's tax	year.			
(A)								(B)		_	(C)	
Name and business			~		_			Description of	services		ompensat	lion
BONNER GROUP, INC., 455		HU	SE'	rr;	S						000	
AVE, #640, WASHINGTON, D	C 20001							FUNDRAISING	SERVICES		<u>209,</u>	574.
TRILOGY INTERACTIVE	TIM C3	Λ4	0.4	^				001011 ====			1 4 0	0.00
PO BOX 4177, MOUNTAIN VI	EW, CA	y 4	U 4 (U				CONSULTING			140,	<u>U62.</u>
GASLIGHT, INC.	777 00	2 1	A								110	222
314 QUEEN ST, ALEXANDRIA	, VA 22	<u>3⊥</u>	4					CONSULTING	 -		112,	<u> </u>

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

Form **990** (2014)

			Check if Schedule O.conta	ins a respo	nse d	or note to any line		· / /5 \		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts s	1 a	-	Federated campaigns	1a					•	
			Membership dues	1b						
ا ڳري			Fundraising events	1c						
<u> </u>	d		Related organizations	1d						
%E			Government grants (contributi							
50			All other contributions, gifts, grant							
<u>E</u> E	•		similar amounts not included abov	re 1f	1.	855,500.				
ĒΘ	a		Noncash contributions included in lines		<u> </u>	•]		
Contributions, Gifts, Grants and Other Similar Amounts	h		Total. Add lines 1a-1f				1,855,500.			
			- Compression of the compression	•		Business Code			· · · · · · · · · · · · · · · · · · ·	
	2 a	1			1					to a standard before the assessment of the
ا ۾ ځ	b	•			_					
<u>8</u> 5	C	•		_	_					
e a	d	ı [']			_					
Program Service Revenue	е	,			_					
<u>-</u>	f		All other program service reve	nue	_					
	g		Total. Add lines 2a-2f							
	3		Investment income (including	dividends, i	ntere	st, and				
- 1			other similar amounts)			▶		l i		
	4		Income from investment of tax	k-exempt bo	nd p	roceeds 🕨				
	5		Royalties			▶ [
			•	(î) Real		(ii) Personal				
	6 a	•	Gross rents							
-	b)	Less: rental expenses							
l	c	,	Rental income or (loss)							
- 1	d	t	Net rental income or (loss)			🕨				
	7 a	3	Gross amount from sales of	(i) Securit	ies	(ii) Other				
			assets other than inventory							
	t)	Less: cost or other basis							
			and sales expenses			i				
	c	•	Gain or (loss)							
	c	t	Net gain or (loss)			<u>.</u>				
ا يو	8 a	3	Gross income from fundraisin	g events (no	ot					
ا <u>ھ</u>			ıncluding \$	of						
ě			contributions reported on line	1c). See						
Other Revenue			Part IV, line 18		а					
ξĺ	t	b	Less: direct expenses		b					
Ĭ	(C	Net income or (loss) from fund	draising eve	nts					
	9 a	а	Gross income from gaming ad	ctivities. See	,					
			Part IV, line 19		. a					
			Less: direct expenses		b					
			Net income or (loss) from gan		S					ļ
	10 a	а	Gross sales of inventory, less	returns						
			and allowances	•	а					
			Less: cost of goods sold		b		ne.			
L		C	Net income or (loss) from sale		ory .	<u> </u>		ļ		ļ
L			Miscellaneous Revenu	ie		Business Code				
- 1	11 :	а	···			ļ				
	ı	b								ļ
- 1	•	С								
l l			All other revenue				1	1		1
	•		All other revenue					 		
	12		Total. Add lines 11a-11d Total revenue. See instructions.			•	1,855,500.	0.	0.	. 0

Form 990 (2014) AMERICAN BRID
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon		this Part IX .	<u> </u>	
	ot include amounts reported on lines 6b, Bb, 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		· ·		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				ı
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	200 126	247 621	46 400	C 000
	trustees, and key employees	300,126.	247,621.	46,483.	6,022.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1,100,432.	1,064,052.	36,380.	
7	Other salaries and wages Pension plan accruals and contributions (include	1,100,432.	1,004,052.	30,300.	
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	69,029.	64,702.	4,327.	
10	Payroll taxes	80,199.	76,788.	3,283.	128.
11	Fees for services (non-employees):	00,233.	7077001	3,2031	120.
''	Management				
b	Legal	45,000.	42,168.	2,832.	
c	Accounting	11,994.	11,239.	755.	
d	Lobbying	· · · · · · · · · · · · · · · · · · ·			·
е	Professional fundraising services. See Part IV, line 17	206,187.			206,187.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A) amount, list line 11g expenses on Sch 0.)	175,257.	175,052.	205.	
12	Advertising and promotion	419.	419.		
13	Office expenses .	16,421.	15,420.	1,001.	
14	Information technology	4,550.	4,550.		
15	Royalties .				
16	Occupancy	70,945.	67,395.	3,550.	
17	Travel	63,894.	297.		63,597.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .				
21	Payments to affiliates	31,061.	29,106.	1,955.	
22	Depreciation, depletion, and amortization	31,001.	29,100.	1,355.	-
23 24	Insurance Other expenses, Itemize expenses not covered		-		
24	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 0.) RESEARCH	70 155	70 155		
a		78,155.	78,155.		<u> </u>
b	DUES AND SUBSCRIPTIONS	4,781.	4,781.		
C					
d	All other expanses	9,686.	4,348.	293.	5,045.
e	All other expenses	2,268,136.	1,886,093.	101,064.	280,979.
<u>25</u> 26	Joint costs. Complete this line only if the organization	2,200,130.	1,000,093.	101,004.	<u> </u>
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
				<u> </u>	

Form 990 (2014)
Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			652,984.	1	409,267
	2	Savings and temporary cash investments				2	
ı	3	Pledges and grants receivable, net				3	
- 1	4	Accounts receivable, net			7,500.	4	
1	5	Loans and other receivables from current and for	ormer of	ficers, directors,			
- 1		trustees, key employees, and highest compensation	ated em	ployees. Complete			~ ^
		Part II of Schedule L				5_	
- 1	6	Loans and other receivables from other disquali	sons (as defined under				
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec					
:		employees' beneficiary organizations (see instr)	. Comple	ete Part II of Sch L		6	
	7	Notes and loans receivable, net			7		
:	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
ı	10a	Land, buildings, and equipment: cost or other	1 1				
-		basis. Complete Part VI of Schedule D	10a	320,419.			
	b	Less: accumulated depreciation	10b	167,846.	183,634.	10c	152,573
ŀ	11	Investments - publicly traded securities				11	
ı	12	Investments - other securities. See Part IV, line	11	•		12	
1	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		- · · · · · · · · · · · · · · · · · · ·	14		
ŀ	15	Other assets. See Part IV, line 11			25,529.	15	6,660
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	4)	869,647.	16	568,500
	17	Accounts payable and accrued expenses			297,101.	17	369,705
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
8	22	Loans and other payables to current and forme	r officers	s, directors, trustees,		ŀ	
		key employees, highest compensated employe	es, and	disqualified persons.			
		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrel	ated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelate	ed third p	oarties .		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X of			20.00
		Schedule D .		•	0.		38,885
	26	Total liabilities. Add lines 17 through 25		la-1	297,101.	26	408,590
		Organizations that follow SFAS 117 (ASC 95	B), chec	k here ▶ 🔼 and			
S S		complete lines 27 through 29, and lines 33 a	nd 34.				4 6 6 70476
Ē	27	Unrestricted net assets			572,546.	27	159,910
e d	28	Temporarily restricted net assets				28	
2	29	Permanently restricted net assets		<u> </u>		29	
<u> </u>		Organizations that do not follow SFAS 117 (ASC 958	3), check here 🕨 📖			
<u>o</u>		and complete lines 30 through 34.				ŀ	
ets	30	Capital stock or trust principal, or current funds	S .			30	
ASS	31	Paid-in or capital surplus, or land, building, or e	quipmer	nt fund		31	ļ
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated i	ncome,	or other funds		32	4-0-01-
Z	33	Total net assets or fund balances			572,546.		159,910
	34	Total liabilities and net assets/fund balances			869,647.	34	568,500 Form 990 (201

review, or compilation of its financial statements and selection of an independent accountant?

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

X

2c | X

За

Act and OMB Circular A-133?

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open (olPublic linspection)

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•					
	Section 501(c)(4), (5), or (6) organizat le of organization	ions: Complete Part III.		Te	mployer identification number
144111	•	N BRIDGE 21ST CE	מאוזים עמווייואי		27-5278038
i Pă	Complete if the org	anization is exempt un	der section 501(c)	or is a section 52	
<u> </u>	German and Great	dineation to exempt unit	201 00011011 001(0)	01 13 4 30000011 02	7 organization.
4	Provide a description of the organiz	ation's direct and indirect polity	aal aampaign aatuution	In Bort IV	
	Political expenditures	ation's direct and indirect politi	cai campaign activities	III Fart IV.	►\$800,194.
	Volunteer hours			•	0.00,134.
3	Volunteer flours	••• •			
Ra	Complete if the org	anization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955		> \$
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5 !	> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV.				
Pe	ि Complete if the org	janization is exempt un	der section 501(c)	, except section 5	
1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt fund	ction activities	►\$ 800,194.
2	Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities .			l	▶ \$0.
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-POL	_ ,	
	line 17b			!	▶\$ <u>800,194.</u>
4	Did the filing organization file Form	1120-POL for this year?			Yes X No
5	Enter the names, addresses and en	nployer identification number (E	IN) of all section 527 p	olitical organizations to	which the filing organization
	made payments. For each organiza	tion listed, enter the amount pa	id from the filing organ	ization's funds, Also ent	er the amount of political
	contributions received that were pro-				parate segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	vide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	1 ' '
				filing organization	
				funds. If none, enter	delivered to a separate
					political organization.
					If none, enter -0
			,		
	<u> </u>				
			_		

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

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 Part II-A Complete if the org section 501(h)).	AMERICAN BR anization is exer	IDGE 21ST C	ENTURY FOUNI n 501(c)(3) and file	OATION 27-5 ed Form 5768 (5278038 Pacelection unde	age 2 er
expenses, and shar	e of excess lobbying		Part IV each affiliated	group member's nar	ne, address, EIN,	
Limit	s on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated grant totals	roup
 1a Total lobbying expenditures to influe b Total lobbying expenditures to influe c Total lobbying expenditures (add limited to the distribution) d Other exempt purpose expenditure 	uence a legislative boo nes 1a and 1b)					
e Total exempt purpose expenditure		(b				
f Lobbying nontaxable amount. Enter	·		h columns.		<u> </u>	
If the amount on line 1e, column (a) o		bying nontaxable am				
Not over \$500,000		the amount on line 1e.				
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		,	
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.			
Over \$17,000,000	\$1,000,	000			, ,	
g Grassroots nontaxable amount (en	iter 25% of line 1f)					
h Subtract line 1g from line 1a. If zer						
i Subtract line 1f from line 1c. If zero	·		.]		<u> </u>	
j If there is an amount other than ze reporting section 4911 tax for this		line 1i, did the organiz	ation file Form 4720		Yes _	□ No
(Some organizations t	hat made a section 5	eraging Period Under 501(h) election do not ate instructions for li	have to complete all	of the five columns	below.	
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total	
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))		\			<u> </u>	
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
	ŀ	1	Į.			

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014 AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity.	Yes	No	Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?				_	
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912	,				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ion 501(c)	(5), or se	ction		
501(c)(6).					
			Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?		1			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	2			
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect		3			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members		K (b) Par	t III-A, III	1e 3, Is	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical		•		
expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2c		· · · · ·	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		-	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		•			
expenditure next year?	•	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grounds)	ip list); Part	II-A, lines 1	and 2 (see		
instructions); and Part II-B, line 1. Also, complete this part for any additional information. PART I-A, LINE 1:			·		
THE ORGANIZATION ENGAGED IN RESEARCH AND TRACKING OF	CANDI	DATES	FOR		
PUBLIC OFFICE.					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

AMERICAN BRIDGE 21ST CENTURY FOUNDATION

Employer identification number 27-5278038

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor	-	e used only
-	for charitable purposes and not for the benefit of the donor	• •	•
	impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat		
-	Preservation of land for public use (e.g., recreation or		torically important land area
	Protection of natural habitat	· F	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
	, ,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	•	2b
	Number of conservation easements on a certified historic st	ructure included in (a)	2c
	Number of conservation easements included in (c) acquired	, ,	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	· L
	year >	sission, oximigation or termination by t	To organization daring the test
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe		f
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	•	
7	Amount of expenses incurred in monitoring, inspecting, and	-	
8	Does each conservation easement reported on line 2(d) abo	_	
•	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conserva	tion easements in its revenue and expen	
•	include, if applicable, the text of the footnote to the organiza	-	
	conservation easements.	and a managed of a control of the co	5 in organization o detectioning to
Pa	rt III Organizations Maintaining Collections	of Art, Historical Treasures, or	Other Similar Assets.
_	Complete if the organization answered "Yes" to Form	-	
1a	If the organization elected, as permitted under SFAS 116 (A		ement and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		,
b	If the organization elected, as permitted under SFAS 116 (A		ent and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition,		
	relating to these items:	saccation, or research in farther and of p	abile service, provide the relieving amounts
	(i) Revenue included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X	•	S *
2	If the organization received or held works of art, historical tr	reasures or other similar assets for financial	
۲.	the following amounts required to be reported under SFAS		mai gain, provide
_	Revenue included in Form 990, Part VIII, line 1	The Vice soof relating to these items.	▶ \$
a	Assets included in Form 990, Part X	•	. \$
D	Assets illoluded in 1 onli 550, Fall A	•	Ψ Ψ

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Schedule D (Form 990) 2014

		AN BRIDGE								Page 2
Par	rt III Organizations Maintaining	Collections of	Art, His	torical Tre	easures, c	or Othe	r Simila	ar Asse	ts (continu	ied)
3	Using the organization's acquisition, acce	ssion, and other reco	rds, chec	k any of the f	following tha	t are a sig	ınificant ı	use of its	collection	items
	(check all that apply):									
а	Public exhibition		d \square	Loan or exch	nange progra	ams				
b	Scholarty research		e 📖	Other						
c	Preservation for future generations									
4	Provide a description of the organization's	collections and exp	laın how tl	ney further th	ne organizatı	on's exen	npt purpo	ose in Par	t XIII.	
5	During the year, did the organization solic	t or receive donation	s of art, h	storical treas	sures, or oth	er sımilar :	assets		_	
	to be sold to raise funds rather than to be								Yes_	No_
Par	rt IV Escrow and Custodial Arra		plete if the	organization	n answered	'Yes" to F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990,	Part X, line 21.								
1a	Is the organization an agent, trustee, cust	odian or other interm	ediary for	contribution	s or other as	sets not i	ncluded		-	
	on Form 990, Part X?								」Yes	L No
b	If "Yes," explain the arrangement in Part >	(III and complete the	following	table:						
									Amount	<u> </u>
C	Beginning balance						1c			
d	Additions during the year				•		1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	•						ty?		」Yes	∐ No
_	If "Yes," explain the arrangement in Part							÷		<u> Ш</u>
Par	rt V. Endowment Funds. Comple	· ·	_							
_		(a) Current year	(b) F	Prior year	(c) Two yea	s back (d) Three y	ears back	(e) Four	ears back
1a										
b	Contributions	,	+							
C	Net investment earnings, gains, and losse	s		-				· -·		
a	Grants or scholarships		+							
е	Other expenditures for facilities									
_	and programs		+							
	Administrative expenses									
9	•	L								
2	Provide the estimated percentage of the			ig, column (a	i)) neid as:					
	Board designated or quasi-endowment	•	<u></u> %							
	Permanent endowment	%								
С	Temporarily restricted endowment	%	1							
0-	The percentages in lines 2a, 2b, and 2c s				وما ماممامان	سما فسما فاسمسا				
Ja	Are there endowment funds not in the po	ssession of the organ	nzation th	at are neid a	na aaministe	erea for th	e organi.	zation	Г	Yes No
	by:									Tes No
	(i) unrelated organizations	•							3a(i) 3a(ii)	
	(ii) related organizationsIf "Yes" to 3a(ii), are the related organizat	one listed as require	d an Saba	dulo P2			-		3b	
4	Describe in Part XIII the intended uses of	•							[SD]	
	rt VI Land, Buildings, and Equi		Idowillelic	iuius.						
1	Complete if the organization answ		90 Part IV	/ line 11a S	ee Form 990	Part X I	ne 10			
	Description of property	(a) Cost o			or other		cumulate	ed	(d) Book	value
	2000 plotter of property	basis (inve		1 ''	(other)		reciation		(=) DOOR	
1a	Land				·	_F			· ,	
b		•	<u>-</u>							
c										
d		,		2	0,362.		18,2	34.	2	1,128.
	Other				0,057.	1	49,6			,445.
	al. Add lines 1a through 1e. (Column (d) mu	st equal Form 990, P	art X, colu			·				2,573.

Schedule D (Form 990) 2014

<u>1</u>	(a) Description of liability		(b) Book value
(1)_	Federal income taxes		
(2)	DUE TO AMERICAN BRIDGE 21ST		
(3)	CENTURY		38,885.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	lacksquare	38,885.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2014

	tule D (Form 990) 2014 AMERICAN BRIDGE 21ST CENTURY				Page 4
Parl	XI Reconciliation of Revenue per Audited Financial Statements	s With Revenue per R	eturn		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements		1	1,855,	500.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_			
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	1,855,	500.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,855,	<u>500.</u>
Par	t XII Reconciliation of Expenses per Audited Financial Statement	ts With Expenses per	Retu	rn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		_		
1	Total expenses and losses per audited financial statements		1	2,268,	<u> 136.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	2,268,	<u> 136.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]		
ь		4b] [
С	Add lines 4a and 4b		4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,268,	136.
Par	t XIII Supplemental Information.				
lines	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition RT X, LINE 2:		4; Part	X, line 2; Part X	······
THE	E FOUNDATION REQUIRES THAT A TAX POSITION BE	E RECOGNIZED OR	DE	RECOGNIZ	ED
BAS	SED ON A "MORE LIKELY THAN NOT" THRESHOLD. T	HIS APPLIES TO	PO	SITIONS	
TAI	KEN OR EXPECTED TO BE TAKEN IN A TAX RETURN.	THE FOUNDATIO	N D	DES NOT	
BEI	LIEVE ITS FINANCIAL STATEMENTS INCLUDE, OR R	REFLECT, ANY UN	CER'	TAIN TAX	, -
POS	SITIONS. THE FOUNDATION'S IRS FORM 990, RETU	JRN OF ORGANIZA	TIO	N EXEMPT	
FRO	OM INCOME TAX, REMAINS OPEN FOR EXAMINATION	BY THE FEDERAL	, TA	XING	
AU'	THORITIES, GENERALLY FOR THREE YEARS AFTER I	T IS FILED.			

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

	N BRIDGE 21ST CENT				27-5278	
Part I Fundraising Activities required to complete this par	 Complete if the organization answers t. 	ered "Y	es" to	Form 990, Part IV, li	ne 17. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e X Solicita f Solicita g Special or oral agreement with any individua Part VII) or entity in connection with plividuals or entities (fundraisers) purs	tion of the tion o	non-govern ising of ding of ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees or X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activrty	(iii) fundre have cu or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
BONNER GROUP, INC 455 MASSACHUSETTS AVE #640,	FUNDRAISER CONSULTANT	Yes	No X	1,680,500.	206,187.	1,474,313.
		-				
Total List all states in which the organizati		contrib		1,680,500.		
or licensing.	on is registered of licensed to solicit			o i nas been notine	u it is exempt nom	
LHA For Paperwork Reduction Act No	tice, see the Instructions for Form	1 990 o	r 990	EZ.	Schedule G (Form !	990 or 990-EZ) 2014

432081 08-28-14 SEE PART IV FOR CONTINUATIONS

Scho Pa	rt I		e organization answered	d "Yes" to Form 990, Part	t IV, line 18, or reported	more than \$15,000
		of fundraising event contributions and gro				ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
an e			(event type)	(event type)	(total number)	Col. (C))
Revenue	1	Gross receipts				
-	_	Lance Countries de la co				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
rect E	7	Food and beverages				
Ö	8	Entertainment				
	9	Other direct expenses				_
	10	Direct expense summary. Add lines 4 through	9 in column (d)		•	
	11	Net income summary. Subtract line 10 from li		 	<u> </u>	
Pa	rt		answered "Yes" to Form	n 990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total name (add
Бē			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue						
æ	4	Gross revenue .				
	Ė	dross revenue .				
uses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes% No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		•	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		> _	
_	_					
ŧ	ls:	ter the state(s) in which the organization condu the organization licensed to conduct gaming a 'No," explain:	ctivities in each of these	states?		Yes No
	_			····-		
		ere any of the organization's gaming licenses re 'Yes," explain:		_	-	Yes No
					_	
					<u> </u>	
4320	82 O	8-28-14			Schedule G (Fo	rm 990 or 990-EZ) 2014

Schedule G (Form 990 or 990-EZ) 2014 AMERICAN BRIDGE 21ST CENTURY FOUNDATION 27-5278038 Page 3
11 Does the organization conduct gaming activities with nonmembers?
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed
to administer charitable gaming?
13 Indicate the percentage of gaming activity conducted in:
a The organization's facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name
Address >
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount
of gaming revenue retained by the third party >
c If "Yes," enter name and address of the third party:
Name ▶
Address ▶
16 Gaming manager information:
Name
Gaming manager compensation ▶ \$
Description of services provided
Director/officer Employee Independent contractor
17 Mandatory distributions:
a Is the organization required under state law to make charitable distributions from the gaming proceeds to
retain the state gaming license?
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:
(I) NAME OF FUNDRAISER: BONNER GROUP, INC.
(I) ADDRESS OF FUNDRAISER:
455 MASSACHUSETTS AVE #640, WASHINGTON, DC 20001

432083 08-28-14

Schedule G	(Form 990 or 990-EZ)	AMERICAN	BRIDGE	21ST	CENTURY	FOUNDATION	27-5278038	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation (continue	ed)					
								
							•	
						· · · · · · · · · · · · · · · · · · ·		
								
			.					
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Schedule G (Form 990 or 990-EZ)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

AMERICAN BRIDGE 21ST CENTURY FOUNDATION

Employer identification number 27-5278038

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
POLICY CONCERNS. FURTHER, THE FOUNDATION RESEARCHES AND REFUTES	
CONSERVATIVE POLICIES THAT WE BELIEVE WOULD UNDERMINE OUR NATION'S	
FUTURE AND EDUCATES THE AMERICAN PEOPLE ON THE RESULTS OF THOSE	
FINDINGS.	

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION HAS NO SEPERATE COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11:

THE ORGANIZATION'S MANAGEMENT AND LEGAL COUNSEL REVIEW THE FORM 990 PRIOR TO ITS SUBMISSION WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS REQUIRED TO BE DISTRIBUTED TO EACH
OFFICER AND DIRECTOR. THE CONFLICT OF INTEREST POLICY REQUIRES DISCLOSURE
OF ANY POTENTIAL CONFLICT OF INTEREST. IF SUCH DISCLOSURES IS MADE, THE
BOARD OF DIRECTORS INVESTIGATES TO DETERMINE IF A CONFLICT OF INTEREST
EXISTS. THE INDIVIDUAL HAVING THE POTENTIAL CONFLICT OF INTEREST IS
EXCLUDED FROM THESE PROCEEDINGS.

FORM 990, PART VI, SECTION B, LINE 15:

OFFICER COMPENSATION IS APPROVED BY THE BOARD OF DIRECTORS. A COMPARISON IS USED OF LEADERS OF OTHER ORGANIZATIONS WITH SIMILIAR QUALITIES.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
432211
08-27-14

Schedule O (Form 990 or 990-EZ) (2014)