A For the 2014 calendar year, or tax year beginning 01-01-2014

DLN: 93493106010596

OMB No 1545-0047

Open to Public

Form **990**

Department of the Treasury Internal Revenue Service

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

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

Return of Organization Exempt From Income Tax

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990 Inspection

and ending 12-31-2014

B Che	ck ıf ap	plicable C Name of organization CENTER FOR POPULAR DEMOCRACY INC		D Employ	er iden	tification number	
☐ Add	ress cha	nge		45-38:	13436		
∏ Nar	ne chan	Doing business as					
Init	al returr			E Telephor	e numb	ner .	
Fina	al ırn/term	Number and street (or P O box if mail is not delivered to street address) Room/suit 449 TROUTMAN STREET NO A	2	(347)			
✓ Ame	ended re	cturn City or town, state or province, country, and ZIP or foreign postal code					
App	lication	BROOKLYN, NY 11237 pending		G Gross re	ceipts \$	12,275,761	
		F Name and address of principal officer	H/a) Takk			£	
		ANA MARIA ARCHILA	H(a) Is the subo	is a group i rdinates?	eturn	TYes ▼ No	
		449 TROUTMAN STREET NO A BROOKLYN,NY 11237					
		SKO CKETH, HV 11237	H(b) Are a		ates	Γ Y es Γ No	
I Tax	c-exemp	ot status	If"N	o," attach a	ılıst ((see instructions)	
J W	ebsite:	► WWW POPULARDEMOCRACY ORG	H(c) Grou	ıp exemptio	n num	nber ►	
K Forn	n of orga	anization ✓ Corporation ✓ Trust ✓ Association ✓ Other ►	L Year of fo	mation 201	1 M	State of legal domicile NY	
	rt I	Summary					
		riefly describe the organization's mission or most significant activities					
Governance	P R	HE CENTER FOR POPULAR DEMOCRACY (CPD) IS A NOT-FOR-PROFIT CO ROMOTING SOCIAL AND ECONOMIC JUSTICE AND ADVANCING CIVIL A ESEARCH AND ADVOCACY, SCHOLARSHIP, ORGANIZATIONAL AND COA DUCATION	ND HUMAN	RIGHTST	HROL	JGH POLICY	
Well	_						
90	2 C	heck this box 🔭 if the organization discontinued its operations or disposed of	more than 2	5% of its i	net as:	sets	
Activities &		umber of voting members of the governing body (Part VI, line 1a)			3	18	
AIW		umber of independent voting members of the governing body (Part VI, line 1b)		· · · · · ·	4	14	
Ą		otal number of individuals employed in calendar year 2014 (Part V, line 2a) .		• •	5	57	
		otal number of volunteers (estimate if necessary)			6	45	
		otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34			7a 7b	C	
	D IV	et unierated business taxable income noni Form 990-1, inte 54		r Year	76]	Current Year	
	8	Contributions and grants (Part VIII, line 1h)	1110	2,612,7	51	11,110,359	
В	9	Program service revenue (Part VIII, line 2g)		421,2		1,111,264	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			0	3,941	
끂	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,6	91	2,922	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line					
		12)		3,046,6		12,228,486	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		441,0		2,291,667	
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0	
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		1,629,815		3,981,47	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0	0	
ਤੌ ਤ	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 642,097					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		798,4	4 2	1,698,954	
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,869,3	29	7,972,098	
	19	Revenue less expenses Subtract line 18 from line 12		177,3	5 5	4,256,388	
Net Assets or Fund Balances				g of Curren 'ear	t	End of Year	
essa Bak	20	Total assets (Part X, line 16)		860,9	99	7,373,310	
et A	21	Total liabilities (Part X, line 26)		47,0	31	1,714,607	
	22	Net assets or fund balances Subtract line 21 from line 20		0130		F 6 F 0 7 0 2	
Par	t II	Signature Block					
		ties of perjury, I declare that I have examined this return, including ge and belief, it is true, correct, and complete Declaration of prepar					
		s any knowledge					

Sign Here Signature of officer

ANA MARIA ARCHILA CO-EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer **Use Only** Print/Type preparer's name JENNIFER S HAN

Preparer's signature JENNIFER S HAN

Firm's name F HAN GROUP LLC

Firm's address ► 8180 GREENSBORO DRIVE SUITE 720

MCLEAN, VA 22102

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

For Paperwork Reduction Act Notice, see the separate instructions.

Par	t III		Service Accomplishments a response or note to any line in this Part III	·
1	Brief	ly describe the organization's m	ission	
PRO	IITOM	NG SOCIAL AND ECONOMIC J	Y (CPD) IS A NOT-FOR-PROFIT CORPORATION FORMED FOR THE P USTICE AND ADVANCING CIVIL AND HUMAN RIGHTS THROUGH PO TIONL AND COALITIONAL DEVELOPMENT, AND COMMUNITY EDUC	DLICY RESEARCH AND
2	the p	rıor Form 990 or 990-EZ? .	gnificant program services during the year which were not listed on	┌ Yes ┌ No
		es," describe these new services		
3	servi	ces?	g, or make significant changes in how it conducts, any program	┌ Yes ┌ No
	If"Y€	es," describe these changes on t	Schedule O	
4	expe	nses Section 501(c)(3) and 50	service accomplishments for each of its three largest program services, a 1(c)(4) organizations are required to report the amount of grants and alloo ny, for each program service reported	
4a	(Cod	e) (Expenses \$	6,358,198 including grants of \$ 2,291,667) (Revenue \$	1,111,264)
	ORGA TO C IMMI SOCI STAF ORGA MOBI MOD BETW AND ORGA THES	ANIZATIONS WORKING ON A WIDE RAN OMMUNITY-BASED ORGANIZATIONS RUGRANTS RIGHTS TECHNICAL ASSISTAN AL ISSUES THROUGH THESE EFFORTS, F SO THEY WILL BE ABLE TO MOUNT SCANIZATIONAL SUPPORTCPD ASSISTS OT LIZATION, AND LEADERSHIP DEVELOPMEL EMPLOYED BY OTHER NONPROFIT OF JEEN SECTION CAPACITY BUILDINGCPD PROVIDES TECANIZATIONAL INFRASTRUCTURE AND TO AMIZATIONAL INFRASTRUCTURE AND TO	TECHNICAL LEGAL, POLICY, STRATEGY, AND COMMUNITY EDUCATION SUPPORT TO COM GE OF ISSUE CAMPAIGNS CAMPAIGN WORKCPD PROVIDES STRATEGY, COMMUNICATIONS OF ISSUE CAMPAIGNS, ON ISSUES INCLUDING WORKERS RIGHTS, CECPD PROVIDES TECHNICAL LEGAL, AND RESEARCH SUPPORT FOR LOCAL ORGANIZATION CPD TRAINS AND EDUCATES LOCALLY-BASED COMMUNITY ORGANIZATIONS THAT LACK ISPHISTICATED CAMPAIGNS TO ADDRESS CRITICAL PROBLEMS FACING THEIR COMMUNITHER ORGANIZATIONS TO DEVELOP SOPHISTICATED METHODS OF FRONT-LINE COMMUNITIENT IN PARTICULAR, IT TEACHES THESE ORGANIZATIONS TO DEVELOP AN INNOVATIVE, RGANIZATIONS, INCORPORATE LEGAL SERVICES INTO THEIR ORGANIZING STRATEGY, MAY SOL(C)(4) ORGANIZATIONS, AND ESTABLISH EFFECTIVE COMMUNITY-LABOR ALLIANCES CHNICAL SUPPORT TO COMMUNITY-BASED NONPROFIT ORGANIZATIONS TO BUILD STRONG DEVELOP BEST PRACTICES WITH RESPECT TO ORGANIZATIONAL MANAGEMENT AND FUILD CORE MANAGEMENT, FUND-RAISING AND COMMUNICATIONS INFRASTRUCTURES, CPD HELD THEIR OPERATIONS	6, AND ORGANIZING SUPPORT RACIAL JUSTICE, AND INS LOOKING TO TACKLE KEY IN-HOUSE LEGAL OR POLICY ES CAMPAIGN AND IY BUILDING, EDUCATION, "HIGH TOUCH ORGANIZING NAGE RELATIONSHIPS ORGANIZATION DEVELOPMENT IG, SUSTAINABLE ND-RAISING BY TEACHING
4b	(Cod	e) (Expenses \$	including grants of \$) (Revenue \$)
	(6-1) /F	Webster and A.	,
4c	(Cod	e) (Expenses \$	including grants of \$) (Revenue \$)
	_			
4d	Oth	er program services (Describe ii	n Schedule O)	
	(Exp	penses \$	including grants of \$) (Revenue \$)
4e	Tota	Il program service expenses ►	6,358,198	

	rt IV	Checklist	of Reg	uired	Schedule
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			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^{\bullet}	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	Yes	
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 1	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? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)			No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2014)

1a	Check if Schedule O contains a response or note to any line in this Part V		Yes	I N
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 55		1 45	IN
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
	Tax Statements, filed for the calendar year ending with or within the year covered by this return	,		
,	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	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
•	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		N
•	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)			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			N
		5b	-	H
-	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	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?	6a		N
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	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?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
1	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 facilities			
	Section 501(c)(12) organizations. Enter			
3	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	yeur		I	
b	Section 501(c)(29) qualified nonprofit health insurance issuers.			
b	·	13a		
b a	Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Enter the amount of reserves the organization is required to maintain by the states	13a		
3	Section 501(c)(29) qualified nonprofit health insurance issuers. 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		

Section A. Governing Body and Management

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

			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	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?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	Yes	
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b 12c	Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes	No

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►CENTER FOR POPULAR DEMOCRACY

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

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

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

Form **990** (2014)

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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	►			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	883,569	0	145,232

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►7

			res	140
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 J 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 J for such person	5	res	No

1 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

(B) Description of services	(C) Compensation
	(B) Description of services

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Serwce Revenue	2a b c d e f
Revenue	9 3 4 5 6a b c d 7a b
Other F	b c 9a b c 10a
	11a b c d

Form 99		Statement of Revenue				Page 9
Part	****	Check if Schedule O contains a response or note to any lin		<u> </u>		<u> </u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 2	1a	Federated campaigns 1a				
rant	b	Membership dues 1b				
s, G Am	С	Fundraising events 1c 100,969				
Giffs, Grants ilar Amounts	d	Related organizations 1d				
ii š	e	Government grants (contributions) 1e				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines				
ontri id O	g	1a-1f \$	11 110 250			
<u>۵ ۾</u>	h	Total. Add lines 1a-1f	11,110,359			
an.	2a	CONTRACT REVENUE Business Code 900099	1 020 551	1 020 551		
ever	b	FISCAL SPONSORSHIP 561000	1,020,551 90,713	1,020,551 90,713		
9. E	c	501000	30,7.13	30,713		
er w	d					
ø E	е					
Program Serwce Revenue	f	All other program service revenue				
Š	g	Total. Add lines 2a-2f	1,111,264			
	3	Investment income (including dividends, interest, and other similar amounts)	3,941			3,94
	4	Income from investment of tax-exempt bond proceeds	·			,
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents 2,922				
	b	Less rental 0 expenses				
	С	Rental income 2,922 or (loss)				
	d	Net rental income or (loss)	2,922			2,92
	_	(I) Securities (II) Other				
	7a	Gross amount from sales of assets other				
		than inventory				
	b	Less cost or other basis and				
	c	sales expenses Gain or (loss)				
	d	Net gain or (loss)				
ıne	8a	Gross income from fundraising events (not including \$ 100,969				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
her	ь	47,275 Less direct expenses b 47,275				
ŏ	1	Net income or (loss) from fundraising events	0			<u></u>
	9a	Gross income from gaming activities See Part IV, line 19				
	ь	Less direct expenses b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less returns and allowances				
		a				
	1	Less cost of goods sold b				
	c	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
	11a	Dustiness Code				
	ь					
	С					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
	12	Total revenue. See Instructions	12,228,486	1,111,264	(6,86

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must comp	lete column (A	١)
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	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	Ī			
	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	2,291,667	2,291,667		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign 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, trustees, and key employees	485,146	330,175	78,087	76,884
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	2,654,967	1,911,234	435,844	307,889
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	124,833	89,892	21,137	13,804
9	Other employee benefits	466,744	335,895	77,433	53,416
10	Payroll taxes	249,787	178,511	40,973	30,303
11	Fees for services (non-employees)				
а	Management				
ь	Legal	8,728	6,237	1,432	1,059
c	Accounting	162,761	116,317	26,698	19,746
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	379,679	271,337	62,280	46,062
12	Advertising and promotion	41,479	31,748	7,287	2,444
13	Office expenses	108,392	84,413	19,374	4,605
14	Information technology				
15	Royalties				
16	Occupancy	152,538	109,011	25,021	18,506
17	Travel	353,223	254,716	58,528	39,979
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,	,	,
19	Conferences, conventions, and meetings	180,692	144,365	33,135	3,192
20	Interest				·
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	22,156	15,834	3,634	2,688
23	Insurance	17,005	12,152	2,790	2,063
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	TELECOMMUNICATIONS	100,545	71,854	16,493	12,198
b	PRINTING	73,135	59,482	13,653	
c	BAD DEBTS	38,050		38,050	
d	EQUIPMENT RENTAL AND MA	11,812	8,441	1,938	1,433
e	All other expenses	48,759	34,917	8,016	5,826
25	Total functional expenses. Add lines 1 through 24e	7,972,098	6,358,198	971,803	642,097
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)			·	·

			(A)		(B)
	I .		Beginning of year		End of year
	1	Cash-non-interest-bearing	69,381	1	700,461
	2	Savings and temporary cash investments	200,918		2,104,822
	3	Pledges and grants receivable, net	478,838		3,883,623
	4	Accounts receivable, net	47,668	4	445,930
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
assets	_			6	
ග ජ	7	Notes and loans receivable, net		7	
_	8	Inventories for sale or use		8	
	9 10a	Prepaid expenses and deferred charges	12,705	9	49,547
	ь	Part VI of Schedule D Less accumulated depreciation	- 1	10c	24,133
	11	Investments—publicly traded securities		11	·
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	5,200	15	164,794
	16	Total assets. Add lines 1 through 15 (must equal line 34)	860,999	16	7,373,310
	17	Accounts payable and accrued expenses	46,221	17	171,278
	18	Grants payable		18	574,167
	19	Deferred revenue		19	195,459
	20	Tax-exempt bond liabilities		20	
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
<u>. o</u>	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	810		773,703
	26	Total liabilities. Add lines 17 through 25	47,031	26	1,714,607
∕ n do		Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete			
Ĭ	27	lines 27 through 29, and lines 33 and 34.Unrestricted net assets	476,468	27	640,926
<u>ನ</u> ನ	28	Temporarily restricted net assets	337,500		5,017,777
<u> </u>	29	Permanently restricted net assets	357,500	29	0,017,777
Assets of Fund Balance	29	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and		29	
5	30	complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
î	31	Paid-in or capital surplus, or land, building or equipment fund		31	
2	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	813,968	33	5,658,703
Ž	34	Total liabilities and net assets/fund balances	860,999		
	J-4	i otal napinties and net assets/idita palantes	1 000,399	34	7,373,310

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		12,2	228,486
2	Total expenses (must equal Part IX, column (A), line 25)	2			72,098
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			256,388
5	Net unrealized gains (losses) on investments	5			313,968
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		Ę	588,347
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		5,6	558,703
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of tl	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ie	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: Software Version:

EIN: 45-3813436

Name: CENTER FOR POPULAR DEMOCRACY INC

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

Compensated Employees, and Independent Contractors											
(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-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and					
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-14130)	2/1099-1413C)	related organizations	
(1) JAVIER VALDES	1 00	х		х				0	0	0	
CHAIR (1) KATHLEEN KENNEDY TOWSEND	1 00										
IMMEDIATE PAST CHAIR		Х		Х				0	0	0	
(2) AARON DORFMAN VICE CHAIR	1 00	Х		х				0	0	0	
(3) PETER MARKOWITZ SECRETARY	1 00	×		х				15,000	0	0	
(4) SAMIRA RAJAN	1 00	Х		Х				0	0	0	
TREASURER (5) ROBERT TOBEY	1 00										
IMMEDIATE PAST TREASURER		Х		Х				0	0	0	
(6) DEBORAH AXT BOARD MEMBER	1 00	х						0	0	0	
(7) STUART APPLEBAUM	1 00	х						0	0	0	
BOARD MEMBER (8) JOHN HIATT	1 00	х						0	0	0	
BOARD MEMBER (9) KYLE BRAGG	1 00										
BOARD MEMBER		×						0	0	0	
(10) CHRISTINA LIVINGSTON BOARD MEMBER	1 00	×						0	0	0	
(11) DONNA MASSEY BOARD MEMBER	1 00	х						0	0	0	
(12) MIRANDA MASSIE BOARD MEMBER	1 00	х						0	0	0	
(13) MARION ORR	1 00	х						0	0	0	
BOARD MEMBER (14) GISELLE QUEZADA	1 00								0		
BOARD MEMBER (15) RAMON RAMIREZ	1 00	Х						0	0	0	
BOARD MEMBER		Х						0	0	0	
(16) ALICIA RUSSELL BOARD MEMBER	1 00	×						0	0	0	
(17) RANDI WEINGARTEN	1 00	х						0	0	0	
BOARD MEMBER (18) GUSTAVO TORRES	1 00	х						0	0	0	
BOARD MEMBER (19) ANA MARIA ARCHILA	35 00							_			
CO-EXECUTIVE DIRECTOR (20) ANDREW FRIEDMAN	15 00 35 00	Х		Х				130,758	0	17,112	
CO-EXECUTIVE DIRECTOR	15 00	Х		Х				153,500	0	35,615	
(21) BRIAN W KETTENRING CO-EXECUTIVE DIRECTOR	35 00 15 00	Х		Х				129,498	0	18,663	
(22) STEVEN M CARBO DEPUTY DIRECTOR OF VOTING RIGHTS	40 00					х		119,275	0	17,285	
(23) AMY CARROLL CHIEF OF STAFF	39 50 0 50					х		124,683	0	26,472	
(24) KATRINA L GAMBLE	39 00					х		103,855	0	13,846	
DIRECTOR OF CIVIC ENGAGEMENT & POLITICS	1 00		<u> </u>								

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Pore and individual trustee or director	ion (d ian oi i is b	ne booth a	ox, u an of trust	nless ficer	Forme	(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
(26) KYLE SERRETTE DIRECTOR OF EDUCATION JUSTICE CAMPAIGNS	39 00 1 00					х		107,000	0	16,239

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As Filed Data -

DLN: 93493106010596

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

CENTE	R FOR	POPULAR DEMOCRACY INC					AE 2012426				
Dai	τI	Peason for Dubli	c Charity S	Status (All organiza	itions must co	mnlete this r	45-3813436	nc			
		zation is not a private fo						7113.			
1		•		•		•	•				
2	<u>'</u>	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	<u>'</u>										
	<u>'</u>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the									
4	1	hospital's name, city,	_	erated in Conjunction v	vitii a iiospitai c	iescribed iii se c). Enter the			
5	Г	An organization opera		nefit of a college or uni	versity owned o	or operated by	a governmental unit d	escribed in			
	•	section 170(b)(1)(A)(,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- 9				
6	Г	A federal, state, or loc			described in s e	ection 170(b)(1	Ι)(Δ)(ν).				
7	<u>'</u>	An organization that n						ieneral nublic			
•	1.	described in section 1	•	•	• • •	om a governme	intal anne of from the g	jenerar pabne			
8	Γ	A community trust des				tII)					
9	\sqcap	An organization that n	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross			
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of			
		ıts support from gross	ınvestment ır	ncome and unrelated b	usiness taxable	e income (less	section 511 tax) from	n businesses			
		acquired by the organi	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)				
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ty See sectio i	n 509(a)(4).				
11	Г	An organization organ						ut the purposes of			
	•	one or more publicly s									
	_	the box in lines 11a th									
а	ı	Type I. A supporting o			•						
		supported organization organization				ty of the direct	ors or trustees of the	supporting			
ь	Г	Type II. A supporting	_	-		ı wıth ıts suppo	rted organization(s), I	by having control or			
	•	management of the su									
	_	must complete Part IV									
C	ı	Type III functionally						grated with, its			
d	\vdash	supported organization Type III non-function						ianization(c) that is			
ч	'	not functionally integr									
		(see instructions) Yo						•			
e	Γ	Check this box if the o					s a Type I, Type II, T	ype III functionally			
_		integrated, or Type III									
· ·		Enter the number of su						-			
g		Provide the following i	illorillation abi	out the supported orga	iiiizatioii(s)						
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	nanization	(v) A mount of	(vi) A mount of			
		organization	(,	organization	listed in your	-	monetary support	other support (see			
(described on lines document? (see								ınstructions)			
				1-9 above or IRC							
				section (see instructions))							
				matructions ;;	Yes	No					
					163	140					
Total											

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 25,500 1,487,533 2,612,761 11,110,359 15,236,153 include any "unusual grants ") 2 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 25,500 1,487,533 2,612,761 11,110,359 15,236,153 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 6,295,230 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 from 8,940,923 line 4 Section B. Total Support Calendar year (or fiscal year (f) Total **(b)** 2011 (c) 2012 (d) 2013 **(e)** 2014 (a) 2010 beginning in) 🟲 25,500 1,487,533 2,612,761 11,110,359 15,236,153 Amounts from line 4 Gross income from interest, dividends, payments received on 3,240 8,692 6,863 18,795 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include 10 gain or loss from the sale of 1,967 3,999 5,966 capital assets (Explain in Part VI) 11 Total support Add lines 7 through 15,260,914 10 Gross receipts from related activities, etc (see instructions) 12 12 2,024,937 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage for 2013 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

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

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

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

Section D. Computation of Investment Income Percentage

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

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

17

18

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

17

18

Part IV Supporting Organizations

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

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

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in 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		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
5	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	inctri	ıct ione)	
	The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government elinstructions.)			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in 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				
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	h Did the organization evergise a substantial degree of direction over the policies, programs and activities of each			l

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity			
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	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 31 and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493106010596

OMB No 1545-0047

Open to Public Inspection

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.

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) orga	anizations Complete Part III				
	me of the organization NTER FOR POPULAR DEMOCRACY INC			Emp	loyer ide	ntification number
CEI	THER FOR POPULAR DEMOCRACT INC			45-:	3813436	
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a sect	ion 52	7 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polıt	ıcal campaıgn act	tivities in Part IV		
2	Political expenditures				F	\$
3	Volunteer hours					·
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).		
1	<u> </u>	e tax incurred by the organization u	_			\$
2	Enter the amount of any excise	e tax incurred by organization mana	gers under sectio	n 4955	.	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?			┌ Yes ┌ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except sec	ction 50	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exem	pt function activit	ies 🕨	\$
2	Enter the amount of the filing o exempt function activities	organization's funds contributed to o	other organization	s for section 527	.	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b	F	¢
4	Did the filing organization file F	Form 1120-POL for this year?				↑ Yes No
5	organization made payments f amount of political contribution separate segregated fund or a	nd employer identification number (For each organization listed, enter t ns received that were promptly and political action committee (PAC) I	he amount paid fro directly delivered	om the filing orgar to a separate pol	nization's itical org	funds Also enter the anization, such as a ation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount p filing organiz funds If none,	ation's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶	ıf the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, E	ĪN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	61,000	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	183,839	
c	Total lobbying expenditures (add lines 1a and 1b	p)	244,839	
d	O ther exempt purpose expenditures		7,727,259	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	7,972,098	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	548,605	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	137,151	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	_ Ves

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) Total beginning in) Lobbying nontaxable amount 171,853 269,267 548,605 989,725 Lobbying ceiling amount 1,484,588 (150% of line 2a, column(e)) 2,773 244,839 Total lobbying expenditures 13,157 260,769 Grassroots nontaxable amount 42,963 67,317 137,151 247,431 Grassroots ceiling amount 371,147 (150% of line 2d, column (e)) 61,000 61,000 Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	ТОИ			
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)
activ		Yes	No	Amo	unt
1 a	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 Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 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 i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 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)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	, ,			<u> </u>	
Pa	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$	501(c)(5), c	or secti	on
	501(c)(6).			Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	1	1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		F	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
P	art IV Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou see instructions), and Part II-B, line 1 Also, complete this part for any additional information	ıp lıst),	Part II	-A, lines	1 and
	Return Reference Explanation				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493106010596

OMB No 1545-0047

Open to Public Inspection

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.

	the organization OR POPULAR DEMOCRACY INC		Emp	oloyer identification number			
LIVILIXI	ON TOTOLOR DEPOCHACT INC	45-	45-3813436				
art I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		r Funds	or Accounts. Complete if th			
		(a) Donor advised funds		(b) Funds and other accounts			
Tota	al number at end of year						
Agg	regate value of contributions to (during year)						
Agg	regate value of grants from (during year)						
Agg	regate value at end of year						
	the organization inform all donors and donor advisors are the organization's property, subject to the or			ısed ┌ Yes ┌ No			
use	the organization inform all grantees, donors, and do d only for charitable purposes and not for the benef ferring impermissible private benefit?						
rt II	Conservation Easements. Complete if	the organization answered "Ye	es" to Forn	n 990, Part IV, line 7.			
Г Г	pose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space nplete lines 2a through 2d if the organization held a	or education) Preservation Preservation	of a certifie	rically important land area d historic structure			
	ement on the last day of the tax year	qualified conservation contribution					
Tota	al number of conservation easements		2a	Held at the End of the Year			
	al acreage restricted by conservation easements		2a 2b				
	•	ric structure included in (a)					
	nber of conservation easements on a certified histo	` '	2c				
	nber of conservation easements included in (c) acq oric structure listed in the National Register	uired after 8/1 //06, and not on a	2d				
Nun	nber of conservation easements modified, transferr	ed, released, extinguished, or term	inated by th	ne organization during			
the	tax year 🗕						
Nun	nber of states where property subject to conservati	on easement is located ►					
	s the organization have a written policy regarding to	he periodic monitoring, inspection,	, handling of	f violations, and Yes No			
Staf ►	ff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation e	asements o	during the year			
Amo	ount of expenses incurred in monitoring, inspecting	, and enforcing conservation easer	nents durin	g the year			
	es each conservation easement reported on line 2(c section 170(h)(4)(B)(ii)?) above satisfy the requirements o	of section 17	70(h)(4)(B)(ı) Yes No			
bala	rart XIII, describe how the organization reports con ince sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's fina					
t III	Organizations Maintaining Collections Complete if the organization answered "Ye			her Similar Assets.			
worl	ne organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its ts held for public exhibition, educat	revenue sta tion, or rese	earch in furtherance of public			
worl	ne organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide the following amounts relating to these	ts held for public exhibition, educat					
(i)	Revenue included in Form 990, Part VIII, line 1			▶ \$			
(ii)	Assets included in Form 990, Part X			► \$			
	ne organization received or held works of art, histori owing amounts required to be reported under SFAS			icial gain, provide the			
Rev	enue included in Form 990, Part VIII, line 1			► \$			
Ass	ets included in Form 990, Part X			► \$			

Part	Organizations Maintaining Collections	of Art, His	stori	cal Treasu	res, or Othe	r Similar Asse	ts (continued)
3	Using the organization's acquisition, accession, and othe collection items (check all that apply)	r records, c	heck	any of the follo	owing that are a	significant use of	ıts
а	Public exhibition	d	Γ	Loan or exch	nange programs	5	
b	Scholarly research	е	Γ	Other			
c	Preservation for future generations						
4	Provide a description of the organization's collections and Part XIII	d explain ho	w the	y further the o	rganızatıon's e	xempt purpose ın	
5	During the year, did the organization solicit or receive do assets to be sold to raise funds rather than to be maintai						Yes
Par	Escrow and Custodial Arrangements. C Part IV, line 9, or reported an amount on Fo	omplete if	the	organization		es" to Form 990),
1a	Is the organization an agent, trustee, custodian or other included on Form 990, Part X?				r other assets		Yes
b	If "Yes," explain the arrangement in Part XIII and comple	ete the follo	wing t	able			
						Amou	ınt
C	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on Form 990, Par	t X, line 21,	for e	scrow or custo	dial account li	ability?	Yes
b	If "Yes," explain the arrangement in Part XIII Check her	e if the expl	anatı	on has been p	rovided in Part	XIII	୮
Pai	Tt V Endowment Funds. Complete if the organ						
	(a)Current	year (b)Prior	year b (c) Tv	vo years back (d)	Three years back (e)Four years back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
e	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the current year end	balance (lii	ne 1g	, column (a)) h	neld as		
а	Board designated or quasi-endowment ►						
b	Permanent endowment ►						
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100)%					
3a	Are there endowment funds not in the possession of the c	rganızatıon	that	are held and a	dmınıstered for	the	. l
	organization by (i) unrelated organizations	_				3a(i)	Yes No
	(ii) related organizations		• •			3a(ii)	
b	If "Yes" to 3a(II), are the related organizations listed as r		Sched	· · · · · · · · · · · · · · · · · · ·		3b	
4	Describe in Part XIII the intended uses of the organization						<u> </u>
Par	t VI Land, Buildings, and Equipment. Completion 11a. See Form 990, Part X, line 10.	ete if the c	rgar	iization answ	ered 'Yes' to	Form 990, Part	IV, line
	Description of property			a) Cost or other asis (investment)	(b)Cost or othe basis (other)	r (c) Accumulated depreciation	(d) Book value
	_and		+				
	and						
b I					22,373	18,644	3,729
b	Buildings				22,373	<u> </u>	
b c d	Buildings				<u> </u>	19,942	

Part VII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	complete if the organization	on answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	on answered 'Ves' to Form 00	
(a) Desc		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)	
		to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		, , ,
1 (a) Description of liability	(b) Book value	
Federal Income taxes		
PASS-THROUGH GRANTS PAYABLE	773,703	
		-
		1
		1
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 773,703	1
	do the taxt of the feetness to	l

Par		Revenue per Audited Financial Statements With Revenue per wered 'Yes' to Form 990, Part IV, line 12a.	Return Complete if
1		er support per audited financial statements	12,290,565
2	Amounts included on line 1 b	ut not on Form 990, Part VIII, line 12	
а	Net unrealized gains (losses)	on investments 2a	
ь	Donated services and use of	facilities	
c	Recoveries of prior year grant	2c	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d .		e 62,079
3	Subtract line 2e from line 1 .		12,228,486
4	A mounts included on Form 99	90, Part VIII, line 12, but not on line 1	
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIII)	
c	Add lines 4a and 4b		c 0
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line 12)	12,228,486
Part		xpenses per Audited Financial Statements With Expenses po	er Return. Complete
		nswered 'Yes' to Form 990, Part IV, line 12a.	
1			8,034,177
2		ut not on Form 990, Part IX, line 25	
а		facilities	
b	· · ·	<u>2b</u>	
C			
d) <u>2d</u> 47,275	
e	Add lines 2a through 2d		2e 62,079
3			7,972,098
4	Amounts included on Form 99	00, Part IX, line 25, but not on line 1:	
а	·	luded on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII))	
C	Add lines 4a and 4b		lc 0
5		, , ,	5 7,972,098
	t XIII Supplemental In		
Part		r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, , lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to pro	ovide any additional
	Return Reference	Explanation	
PART	X, LINE 2	FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDA (ASC) 740-10, INCOME TAXES, PROVIDES GUIDANCE FOR REPORTING INCOME TAXES THE ORGANIZATION HAS PERFORMED AN EVALUATI TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2014 AND DET MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOG DISCLOSURE IN THE FINANCIAL STATEMENTS INFORMATION RETUR ENDED DECEMBER 31, 2011 OR LATER REMAIN SUBJECT TO EXAMINA TAXING AUTHORITIES	G UNCERTAINTY IN ION OF UNCERTAIN ERMINED THAT NO GNITION OR RNS FOR THE YEARS
	XI, LINE 2D - OTHER STMENTS	DIRECT FUNDRAISING EXPENSES 47,275	
	XII, LINE 2D - OTHER STMENTS	DIRECT FUNDRAISING EXPENSES 47,275	

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

Schedule D (Form 990) 2014

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DLN: 93493106010596

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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.

Supplemental Information Regarding

Fundraising or Gaming Activities

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/form990. Open to Public **Inspection**

Name of the organization	DACY INC					Employer ider	tification number
CENTER FOR POPULAR DEMOC	RACY INC					45-3813436	
Part I Fundraising Active filers are not require			ganızatıo	n answered "Yes" to	Form '	990, Part IV,	line 17. Form 990-Ez
1 Indicate whether the organi	zatıon raısed funds	through a	ny of the f	following activities Che	eck all th	nat apply	
a Mail solicitations			e	Solicitation of nor	n-govern	ment grants	
b Internet and email solid	itations		f	Solicitation of gov	/ernment	grants	
c Phone solicitations			g	Special fundraisin	ig events	5	
d In-person solicitations							
2a Did the organization have a or key employees listed in f							Γ _{Yes} Γ Ν
b If "Yes," list the ten highes to be compensated at least			fundraise	rs) pursuant to agreem	ents und	ler which the fu	ndraiser is
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or r fundra	mount paid to etained by) siser listed in col (i)	(vi) A mount paid to (or retained by) organization
1		Yes	No				
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total			▶				
3 List all states in which the o	rganization is regis	tered or lı	censed to	Solicit contributions o	r has be	en notified it is	exempt from

Sche	edule	e G (Form 990 or 990-EZ) 2014				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
			(a) Event #1	(b) Event #2 BREAKFAST	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	(3)
Revenue	1	Gross receipts	111,19	37,054		148,244
₹ ¥	2	Less Contributions	63,91	5 37,054		100,969
<u>~</u>	3	Gross income (line 1 minus line 2)	47,27	5		47,275
	4	Cash prizes				
တ္က	5	Noncash prizes				
Expenses	6	Rent/facility costs				
	7	Food and beverages .	21,31	5		21,315
Direct	8	Entertainment				
ā	9	Other direct expenses .	25,96	0		25,960
	10	Direct expense summary Add lii	nes 4 through 9 ın columr	n (d)		(47,275)
	11	Net income summary Subtract l	ine 10 from line 3, columi	n (d)		0
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Řey	1	Gross revenue				(0)/
Se§	2	Cash prizes				
Expenses	3	Non-cash prizes				
Direct E	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	│	Г Yes% Г No	Г Yes <u>%</u>	
	7	Direct expense summary Add line	es 2 through 5 in column ((d)		
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a b	Is	ter the state(s) in which the organiz the organization licensed to conduc 'No," explain	ation conducts gaming ac	tivities h of these states?		「Yes 「No
10a b		re any of the organization's gaming	licenses revoked, suspe	nded or terminated during	the tax year?	

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3					
11	Does the organization conduct gaming	activities with nonm	nembers?	┌ Yes	_ No					
12	Is the organization a grantor, beneficia	ry or trustee of a tru:	st or a member of a partnership or other entity							
	formed to administer charitable gaming	_j ,		┌ _{Yes}	Г _{No}					
13	Indicate the percentage of gaming act	vities conducted in								
а	The organization's facility		13a		%					
b	An outside facility		13b		%					
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special events books and records							
	Name ►									
	Address 🟲									
15a	Does the organization have a contract	with a third party fro	m whom the organization receives gaming							
	revenue?			┌ _{Yes}	┌ No					
b	If "Yes," enter the amount of gaming reamount of gaming revenue retained by		the organization 🟲 \$ and the							
c	If "Yes," enter name and address of th	e third party								
	Name 🕨									
	Address ►									
16	Gaming manager information									
	Name 🟲									
	Gaming manager compensation 🟲 \$									
	Description of services provided									
	Director/officer	Employee	Independent contractor							
17	Mandatory distributions									
а	Is the organization required under stat	s the organization required under state law to make charitable distributions from the gaming proceeds to								
	retain the state gaming license? $$. $$.	retain the state gaming license?								
b	·		distributed to other exempt organizations or spent							
	in the organization's own exempt activ		· · · · · · · · · · · · · · · · · · ·							
Pai			oplanations required by Part I, line 2b, columns (iii) 7b, as applicable. Also provide any additional inforr							
	Return Reference		Explanation							
		<u> </u>	· · · · · · · · · · · · · · · · · · ·							

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(Form 990)

DLN: 93493106010596

OMB No 1545-0047 2014

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

		Complete	if the organization a	nswered "Yes," to Form	990, Part IV, line 21 or	22.	-	
Department of the Treasury Internal Revenue Service		pen to Public Inspection						
Name of the organization							Employer identification	n number
CENTER FOR POPULA	R DEMOCRACY INC						45-3813436	
Part I General	Information on G	rants and A	Assistance					
the selection crit	eria used to award the g	grants or assi	stance?	•	e grantees' eligibility for • • • • • • • • • d d States	_	•	✓ Yes
					Governments. Com rt II can be duplicate			s" to
(a) Name and addre organization or government	,	b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data	Table							
	·							

Enter total number of other organizations listed in the line 1 table

10 13

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

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

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.				
Return Reference	Explanation			
, and the second	WHEN ISSUING A GRANT TO A NON-PROFIT PARTNER ORGANIZATION, CPD ISSUES AN AWARD LETTER AND INCLUDES THE TOTAL AWARD AMOUNT THEREIN IF THERE IS A COMPLIMENTARY BUDGET, IT IS INCLUDED AND THE RECEIVING ORGANIZATION IS REQUIRED TO SUBMIT WRITTEN REPORTS INCLUDING FINANCIAL REPORTING, OR PROVIDE REAL TIME OVERSIGHT AND REPORTING THROUGH PHONE CALLS AND MANAGEMENT COMMUNICATIONS THIS IS THEN INCORPORATED INTO CPD'S FINANCIAL REPORT TO THE ORIGINAL FUNDER			

Schedule I (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 45-3813436

Name: CENTER FOR POPULAR DEMOCRACY INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACCE INSTITUTE3655 SOUTH GRAND AVENUE SUITE 250 LOS ANGELES, CA 900074327	27-1482731	501(C)(3)	100,000				MINIMUM WAGE SUBGRANT
ACTION NOW820 WEST JACKSON BOULEVARD CHICAGO,IL 60607	26-1396958	501(C)(4)	387,500				MINIMUM WAGE SUBGRANT
ACTION UNITED846 NORTH BROAD STREET FLOOR 2 PHILADELPHIA,PA 19130	27-1323767	501(C)(4)	70,600				MINIMUM WAGE SUBGRANT, FED UP SUBGRANT, VOTING RIGHTS SUBGRANT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ALLIANCE OF CALIFORNIANS FOR COMMUNITY EMPOWERMENT3655 SOUTH GRAND AVENUE SUITE 250 LOS ANGELES, CA 900074327	27-1482731	501(C)(4)	45,000				SUSTAINABILITY GRANT			
CENTER ON POLICY INITIATIVES3727 CAMINO DEL RIO SOUTH SUITE 100 100 SAN DIEGO,CA 92108	33-0824881	501(C)(3)	250,000				MINIMUM WAGE SUBGRANT			
COMMON GOOD OHIO 2530 SUPERIOR AVENUE SUITE 505 CLEVELAND,OH 44114	90-0920181	501(C)(4)	45,000				SUSTAINABILITY GRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DELAWARE ALLIANCE FOR COMMUNITY ADVANCEMENT408 EAST 8TH STREET WILMINGTON, DE 19801	27-1488886	501(C)(3)	50,000				VOTING RIGHTS SUBGRANT			
ECONOMIC POLICY INSTITUTE1333 H STREET NORTHWEST SUITE 300 EAST TOWER WASHINGTON, DC 20005	52-1368964	501(C)(3)	25,000				FED UP SUBGRANT			
KANSAS PEOPLES ACTION INC1751 NORTH ASH AVENUE WICHITA,KS 67214	46-0640082	501(C)(4)	12,000				FED UP SUBGRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LA FUENTE INC25 WEST 18TH STREET NEW YORK, NY 10011	65-1198030	501(C)(3)	35,000				SUBGRANT FOR IMMIGRATION JUSTICE			
MAKE THE ROAD ACTION FUND449 TROUTMAN STREET SUITE A BROOKLYN,NY 11237	27-1408443	501(C)(4)	100,000				MINIMUM WAGE ORGANIZING SUBGRANT			
MAKE THE ROAD NEW YORK301 GROVE STREET BROOKLYN,NY 11237	11-3344389	501(C)(3)	253,900				MINIMUM WAGE SUBGRANT, FED UP SUBGRANT, VOTING RIGHTS SUBGRANT, FULL SUBGRANT TO MRNY FOR LICET, AGENCY VOTER REG, SUSTAINABILITY GRANT, BLAUSTEIN NEW YORK IMMIGRANT FAMILY UNITY PROJECT, FFJP ELECTORAL GRANT 2013 POLICING SUBGRANT, POLICING SUBGRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MARYLAND COMMUNITIES UNITED INC2524 NORTH CHARLES STREET SUITE 3 BALTIMORE, MD 21218	27-2220690	501(C)(4)	20,000				LEADERSHIP DEVELOPMENT UNLOCK THE VOTE SUBGRANT			
NEIGHBORHOODS ORGANIZING FOR CHANGE 1101 WEST BROADWAY AVENUE SUITE 100 MINNEAPOLIS,MN 55411	27-1408866	501(C)(4)	60,000				VOTING RIGHTS SUBGRANT, SUSTAINABILITY GRANT			
NEW YORK COMMUNITIES FOR CHANGE INC1 METROTECH CENTER NORTH FLOOR 11 BROOKLYN,NY 11201	27-2332649	501(C)(4)	258,334				SUBGRANT FOR THE WORKPLACE DIGNITY INITIATIVE, FFJP POLICING SUBGRANT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW YORK COMMUNITIES ORGANIZINGONE METROTECH CENTER NORTH FLOOR 11 11 BROOKLYN,NY 11201	27-2332649	501(C)(3)	125,000				MINIMUM WAGE SUBGRANT		
NORTHERN MANHATTAN COALITION5030 BROADWAY SUITE 650 NEW YORK, NY 10034	13-3255591	501(C)(3)	20,000				SUBGRANT FOR BLAUSTEIN NEW YORK IMMIGRANT FAMILY UNITY PROJECT		
NYS LABOR-RELIGION COALITION800 TROY- SCHNECTADY ROAD LATHAM,NY 12110	14-1798943	501(C)(3)	16,000				MINIMUM WAGE SUBGRANT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ORGANIZE NOW INC134 EAST COLONIAL DRIVE ORLANDO,FL 32801	27-1869914	501(C)(4)	100,000				VOTING RIGHTS SUBGRANT ORANGE RISING INITIATIVE			
TAKE ACTION MINNESOTA 705 RAYMOND AVENUE SUITE 100 SAINT PAUL, MN 55114	41-1635130	501(C)(4)	55,000				VOTING RIGHTS SUBGRANT			
THE BYRD GROUP LLCPO BOX 12686 WILMINGTON, DE 19850	27-0693701		5,000				VOTING RIGHTS CONTRACT			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VOCAL NEW YORK80-A FOURTH AVENUE BROOKLYN,NY 11217	13-4094385	501(C)(3)	8,333				TIDES FFJP POLICING SUBGRANT		
WISCONSIN JOBS NOW 1862 WEST FOND DU LAC AVENUE MILWAUKEE,WI 53205	45-2043069	501(C)(4)	250,000				MINIMUM WAGE SUBGRANT		

Questions Regarding Compensation

DLN: 93493106010596

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization CENTER FOR POPULAR DEMOCRACY INC **Employer identification number**

45-3813436 Yes No

		_			140
1a	Check the appropriate box(es) if the organization provided any of t 990, Part VII, Section A, line 1a Complete Part III to provide ar				
		sing allowance or residence for personal use			
	·	ments for business use of personal residence			
		Ith or social club dues or initiation fees			
	<u> </u>	onal services (e g , maid, chauffeur, chef)			
	, Listing account	, , , , , , , , , , , , , , , , , , , ,			
b	If any of the boxes in line 1a are checked, did the organization fol reimbursement or provision of all of the expenses described abov		1b		
2	Did the organization require substantiation prior to reimbursing or directors, trustees, officers, including the CEO/Executive Directo		2		
3	Indicate which, if any, of the following the filing organization used organization's CEO/Executive Director Check all that apply Dolused by a related organization to establish compensation of the C	not check any boxes for methods			
	Compensation committee Writt	ten employment contract			
	☐ Independent compensation consultant ☐ Com	pensation survey or study			
	Form 990 of other organizations	roval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Sector or a related organization	tion A, line 1a with respect to the filing organization			
а			4a		No
	Participate in, or receive payment from, a supplemental nonqualifi	ied retirement plan?	4b		No
	Participate in, or receive payment from, an equity-based compens	·	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the app	F			110
	The to any or miles the symbol me persons and promise the app				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must con	mplete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did t compensation contingent on the revenues of	-			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did t compensation contingent on the net earnings of	the organization pay or accrue any			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did t payments not described in lines 5 and 6? If "Yes," describe in Pa		7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accure subject to the initial contract exception described in Regulations in Part III		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable p section 53 4958-6(c)?	resumption procedure described in Regulations	9		
F	Department Poduction Act Nation and the Tretwestians for Form 000	Cot No FOOEST Schodule	1/5	~ 000'	2014

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990	
1 ANDREW FRIEDMAN, CO- EXECUTIVE DIRECTOR	(i)	153,500	0	0	8,912	26,703	189,115	0	
EXECUTIVE DIRECTOR	(ii)	0	0	0	0	0	0	0	
2 AMY CARROLL, CHIEF OF STAFF	(i)	124,683	0	0	7,920	18,552	151,155	0	
STAFF	(ii)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2014

Part III Supplemental Information

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

|

Return Reference Explanation

Schedule J (Form 990) 2014

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493106010596

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization
CENTER FOR POPULAR DEMOCRACY INC

Employer identification number

45-3813436

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 WAS REVIEWED BY THE DIRECTOR OF LEGAL AFFAIRS AND THE DIRECTOR OF OPERATIONS, HR, AND FINANCE BEFORE FILING
FORM 990, PART VI, SECTION B, LINE 12C	AT THE START OF EACH YEAR, WE SEND THE POLICY AND FORM OUT TO ALL BOARD MEMBERS FOR COMPLETION AND REVIEW BY THE SENIOR LEADERSHIP TEAM
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD IN TOTAL REVIEWED THE 990S OF COMPARABLE ORGANIZATIONS TO GET A SENSE OF EXECUTI VE COMPENSATION AND DETERMINED COMPENSATION ACCORDINGLY
FORM 990, PART VI, SECTION C, LINE 19	UPON REQUEST
FORM 990, PART XI, LINE 9	UPON ITS MERGER WITH THE LEADERSHIP CENTER FOR THE COMMON GOOD (LCCG) CPD RECEIVED ALL OF THE ASSETS AND ASSUMED LIABILITIES FROM LCCG 588,347
FORM 990, PART XII, LINE 2C	AUDIT OVERSIGHT PROCESS OR AUDITOR SELECTION PROCESS DID NOT CHANGE DURING THE TAX YEAR
FORM 990, ITEM B	THE ORGANIZATION IS AMENDING ITS RETURN TO REFLECT THE AUDIT ADJUSTMENTS AND BALANCES FROM AUDITED FINANCIAL STATEMENTS CHANGES WERE MADE TO THE FOLLOWING ITEMS FORM 990, PART I, PART III, PART IV (LINES 11F AND 12A), PART VIII, PART IX, PART XI, PART XI, PART XII AND SCHEDULE A, SCHEDULE B, SCHEDULE C, SCHEDULE D, SCHEDULE G, SCHEDULE I AND SCHEDULE R

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

DLN: 93493106010596

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE R

(Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

CENTER FOR POPULAR DEMOCRACY INC

Employer identification number

45-3813436

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.								
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity			

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b) (13) controlled entity?	
						Yes	No
449 TROUTMAN STREET SUITE A	PROMOTE SOCIAL AND ECONOMIC JUSTICE AND HUMAN RIGHTS	NY	501(C)(4)				No
BROOKLYN, NY 11237 45-3860271							

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete	if the organiza	ation ansv	vered "Ye	s" on Form	990, Part	IV, line	34
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						

	•			•								
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	(j)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropi	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocatı	ons?	amount in box	mana	ging	ownership
		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from					Schedule K-1		- 1	
		country)		tax under					(Form 1065)		- 1	
				sections 512-							- 1	
1				514)			L					
							Yes	No		Yes	No	
					•							

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	ŀ
		(state or foreign		corp,		assets	1	controlled	ļ
		country)		or trust)				entity?	
								Yes	No
							1		·

che	edule R (Form 990) 2014		Рa	ige 3
Pa	Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1 c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No

ĸ	Lease of facilities,	equipment, oi	rotherassets	from related	organization(s)

- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	· · ·	•	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CENTER FOR POPULAR DEMOCRACY ACTION FUND INC	С	531,665	CASH
(2) CENTER FOR POPULAR DEMOCRACY ACTION FUND INC	L	121,224	COST

1k

1m

10

1p

1q

1r

1s

1n Yes

Yes

Yes

Yes

Yes

No

No

No

No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

1													
(a)	(b)	(c)	(d)	1	(e)	(f)	(g)	(h)		(i)	(j)	7	(k)
Name, address, and EIN of entity	tity Primary activity Legal F domicile (state or foreign		Predominant income (related, unrelated,	50 orga	e all partners section 501(c)(3) ganizations?	Share of	Share of end-of-year assets	Disproprtionat		Code V-UBI amount in box 20 of Schedule K-1	General or managing partner?	g	Percentage ownership
	'	''	tax under sections 512-		,	1 '		1	ļ	(Form 1065)	1	,	1
			514)	Yes	No	<u> </u>	<u> </u>	Yes	No	<u> </u>	Yes	No	
				」				<u>, </u>	厂				

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

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014