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DLN: 93493011008076

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

- ▶ Do not enter social security numbers on this form as it may be made public
- ▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

Return of Organization Exempt From Income Tax

Open to Public Inspection

A Fo	the :	2014 cal <mark>endar year, or tax year beginning 07-01-2014 , and ending 06-30-201</mark>	5				
3 Che		pplicable C Name of organization COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION			yer iden)12307	tification number	
_	ne cha al retu	CASE					
– Fina		Number and street (or P O box if mail is not delivered to street address) Room/si 1307 NEW YORK AVENUE NW NO 1000	uite	E Telepho	one numb 328-59		
_	ended lication	return City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 200054701		G Gross r	eceıpts \$	35,811,220	
		F Name and address of principal officer JOHN LIPPINCOTT 1307 NEW YORK AVENUE NW NO 1000 WASHINGTON, DC 200054701	H(a) Is th	ıs a group rdınates?	return 1	ΓYes Γ No	
			H(b) Are a	all subordı ded?	nates	Γ Y es Γ No	
		npt status	If"N	o," attach	a list (see instructions)	
		WWW CASE ORG	H(c) Grou	ıp exempt	ion num	ber ►	
		ganization Corporation Trust Association Other -	L Year of fo	rmation 19	74 M 9	State of legal domicile DC	
Pai	rt I	Summary					
		Briefly describe the organization's mission or most significant activities PROVIDE A STRONG FORCE FOR THE ADVANCEMENT AND SUPPORT OF	EDUCATION	WORLDW	/I DE		
e e	-	ROVIDE A STRONG PORCE FOR THE ABVANCEMENT AND SOLF OR OT	LDOCATION	WORLDW	1101		
e	-						
Governance	3 -	Check this boy by fithe eventuation discontinued its enevations or disposed	of more than "	F0/- of the	not nos	otc .	
5	2 (Check this box দ if the organization discontinued its operations or disposed	or more than 2	25% 01165	net ass	ets	
	3 1	Number of voting members of the governing body (Part VI, line 1a)			з	30	
АСПУППЕS &	4 1	Number of independent voting members of the governing body (Part VI, line 1b		4	30		
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)			5	72	
Ę	6	Total number of volunteers (estimate if necessary)			6	4,850	
4.	7a ⁻	Total unrelated business revenue from Part VIII, column (C), line 12			7a	462,219	
	ь	Net unrelated business taxable income from Form 990-T, line 34			7b	-3,150	
			Pric	or Year		Current Year	
	8	Contributions and grants (Part VIII, line 1h)		466,	351	29,884	
Revenue	9	Program service revenue (Part VIII, line 2g)		17,153,	398	17,891,409	
9.6	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		815,	762	1,006,998	
Ť.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		272,	220	500,865	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lin	е	18,707,731			
	13	Grants and similar amounts paid (Part IX, column (A), lines $1-3$)		18,0	022	16,688	
	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 $5-10$)				8,478,836	
क्	16a	Professional fundraising fees (Part IX, column (A), line 11e)	•		0	0	
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 30,352$					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	9,130,	149	9,626,343		
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		17,423,6	599	18,121,867	
	19	Revenue less expenses Subtract line 18 from line 12		1,284,0	032	1,307,289	
Net Assets or Fund Balances				g of Curre ⁄ear	nt	End of Year	
388 1888 1888	20	Total assets (Part X, line 16)		31,570,8	349	32,163,293	
2 E	21	Total liabilities (Part X, line 26)		15,035,4	_	15,232,446	
	22	Net assets or fund balances Subtract line 21 from line 20		16,535,4	418	16,930,847	
3-	+ TT	Signature Block					

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

Sign	
Here	

***** Signature of officer DONALD L FALKENSTEIN VP BUSINESS & FINANCE Type or print name and title

Paid Preparer **Use Only**

Print/Type preparer's name ELIZABETH HELLER Preparer's signature ELIZABETH HELLER Firm's name FTATE AND TRYON Firm's address ► 2021 L STREET NW SUITE 400

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

WASHINGTON, DC 20036

Form	990 (2014)							Page 2
Par		nt of Program Serv nedule O contains a res			II			৮
1	Briefly describe th	e organization's missior	ı					
INS ALU	FITUTIONS AND TH MNI RELATIONS, C	SE ARE TO DEVELOP A HEIR CONSTITUENCIE OMMUNICATIONS, AN DRCE FOR THE ADVAN	ES, TO PROVI ND PHILANTH	DE TRAINING PROGR ROPY, TO PROMOTE	AMS, PRODUCTS A DIVERSITY WITHI	ND SERVI N THESE P	CES IN THE AR	
2	the prior Form 990			ervices during the year	which were not liste	d on	┌ Yes ┌ I	No
	·	these new services on S						
3	Did the organizatio	n cease conducting, or i	=	nt changes in how it coi	nducts, any program		┌ Yes ┌	No
	If "Yes," describe t	these changes on Scheo	dule O					
4	expenses Section	ization's program servic 501(c)(3) and 501(c)(4 , and revenue, if any, for	l) organization	s are required to report				
4a	(Code) (Expenses \$	5,973,361	ıncludıng grants of \$) (Rev	enue \$	8,693,453)	
		VORKSHOPS - THE COUNCIL ND LEARN ABOUT INSTITUTIO			INE SPEAKER SERIES PE	R YEAR AS OP	PORTUNITIES TO NE	TWORK
4b	(Code) (Expenses \$	2,444,652	ıncludıng grants of \$) (Rev	enue \$)	
	INFORMATION AND RI ADVANCEMENT	ESEARCH - THE COUNCIL PR	OVIDES UP-TO-DA	ATE INFORMATION ON A VAR	IETY OF TOPICS RELATE	D TO ALL AREA	AS OF INSTITUTIONA	NL
_	(0.1		1 000 617) /B		,	
4 c	(Code EXTERNAL AFFAIRS - INSTITUTIONAL RELAT) (Expenses \$ THE EXTERNAL AFFAIRS PRO TED FOUNDATIONS	1,892,617 GRAM INCLUDES	including grants of \$ COMMUNICATIONS, GOVERN	, ,	enue \$ IC RELATIONS) , MEDIA RELATIONS,	, AND
	See Additional Da							
	See Additional Da							
4d	Other program se	rvices (Describe in Sch	edule O)					

2,638,300 including grants of \$

12,948,930

(Expenses \$

Total program service expenses ►

2,017,600)

16,688) (Revenue \$

	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 $A^{\bullet \bullet}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[6]{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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			1
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νo
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		Νo
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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
	Estantia number necessida Dan 2 de Francia 2000 Fratar Dan de Santar de La Casa de Cas		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 186 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
C	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►CA, SN See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		N o
	were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?	7a 7b		110
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

Section A. Governing Body and Management

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

										_
Chack if Cahadula C	contains a response	ar nata ta anu	ling in this Dart	\ / T						
Clieck ii Schedule C	CONTAINS a response	oi note to anv	illie III tills Part	V 1 .						

	<u> </u>		Yes	No
1a	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? \cdot	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	eveni	ie Cod	۵ ۱
	· · · · · · · · · · · · · · · · · · ·			c. j
			Yes	No No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a 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?	10a 10b	Yes	
10a b 11a	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?	10a 10b	Yes Yes	
10a 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	10a 10b 11a	Yes Yes Yes	
10a 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?	10a 10b	Yes Yes Yes	
10a 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?	10a 10b 11a	Yes Yes Yes	
10a 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	10a 10b 11a	Yes Yes Yes Yes	
10a 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 Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	
10a 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	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes Yes	
10a 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?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a 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? 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	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes Yes	
10a 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? 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	10a 10b 11a 12a 12b 12c 13	Yes	
10a 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? 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	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b 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 taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes	
10a b 11a b 12a b 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	10a 10b 11a 12a 12b 12c 13 14	Yes	No
10a b 11a b 12a b 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 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	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes	No

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

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

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is	ne l both	box, ∣an d	officer stee)	1	(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 trustée 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)	•	2,077,762	0	267,277

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►18

			Yes	No
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		No No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DESIGN DATA SYSTEMS INC 610 PROFESSIONAL DRIVE SUITE 102 GAITHERSBUR, MD 20879	IT CONSULTING	357,828
MASTER PRINT INC 8401 TERMINAL RD NEWINGTON, VA 22122	PRINTING	344,042
BENEFIT MALL 501 FAIRMOUNT AVENUE SUITE 400 TOWSON, MD 21286	EMPLOYEE BENEFITS	334,439
UNIVERSITY OF VERMONT 31 SPEAR ST BURLINGTON, VT 05405	MEETING SERVICES	273,198
PERSONIFY INC PO BOX 759470 BALTIMORE, MD 21275	IT CONSULTING	192,105
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►11

Part V	
~ £	1a
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f f
fts,(ır Am	d
s, Gi imila	e
rtion er Si	f
itribu Oth	g
Con	h
Program Service Revenue	
Reve	2& b c c d d e f f g 3 3 4 5 5
'WCe	d
n Ser	e
ograf	f
<u>~</u>	g
	4 5
	6:
	Ь
	c
	d
	7a
	Ь
	_
	d
ē	88
venu	
r Re	
the	b
0	98
	b
	10a
	b
	11a
	, c
	d
	12

VIII	Statement of Check of Schedu	of Revenue ule O contains a respo	nse or note to any lu	ne in this Part VIII			
	Check it Sched	are o contains a respo	isc of flote to dify fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
b	Membership du	ies 1b					
c	Fundraising ev	ents 1c					
d	Related organiz	zations 1d					
e	Government grant	s (contributions) 1e					
	All other contribution	ons, gifts, grants, and 1f	29,884				
-	sımılar amounts no	ot included above					
g	Noncash contributi 1a-1f \$	ons included in lines					
h	Total. Add lines	s 1 a - 1 f		29,884			
			Business Code				
2a	CONFERENCES &		900099	8,759,723	8,693,453	66,270	
b	MEMBERSHIP DUE	<u> </u>	900099	6,718,137	6,718,137		
C d	PUBLICATIONS AWARDS		541800	1,428,874		395,949	
e e	MVVMRUD		900099	984,675	984,675		
f	All other progra	am service revenue					
g	Total. Add lines			17,891,409			
3		ome (including dividen		<u> </u>			
		ar amounts)		363,337			363,337
4 5			proceeds •	745			745
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(ı) Real	(II) Personal				
6a	Gross rents						
b	Less rental expenses						
C	Rental income or (loss)						
d	Net rental inco	me or (loss)					
7a	Gross amount	(ı) Securities	(II) O ther				
	from sales of assets other	16,878,212					
b	than inventory Less cost or						
	other basis and sales expenses	16,234,152	399				
d	Gain or (loss)	644,060 (SS)	-399	643,661			643,661
-	Gross income f			,			,
	events (not inc	luding					
	of contributions	reported on line 1c)					
	See Part IV, lır	ne 18 a					
b	Less direct ex	penses b					
С		(loss) from fundraising	events 🛌				
9a		rom gaming activities ne 19					
		a					
		penses b					
	Gross sales of	(loss) from gamıng actı ınventory, less	vicies				
	returns and allo	owances .	381,842				
h	less costofa	a oods sold b	· .				
		(loss) from sales of inv	147,513 entory - -	234,329	234,329		
	Miscellaneou	s Revenue	Business Code				
11a	OTHER REVEN	IUE	900099	265,791			265,791
b							
d	All other reven	ue					
e	Total. Add lines			205 704			
12	Total revenue.	See Instructions .	🕨	265,791 19,429,156	17 ((2) [10	462.240	1,273,534
				19,429,136	17,663,519	462,219	1,2/3,334

Part IX Statement of Functional Expenses

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

<u> </u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
	Check if Schedule O contains a response or note to any line in this		(B)	(c)	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	16,688	16,688		
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	1,250,816	893,765	354,953	2,098
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	5,739,146	4,100,881	1,628,640	9,625
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	340,814	243,527	96,715	572
9	Other employee benefits	680,968	486,583	193,243	1,142
10	Payroll taxes	467,092	333,759	132,550	783
11	Fees for services (non-employees)				
а	Management				
b	Legal	75,835	54,188	21,520	127
c	Accounting	99,924	71,400	28,356	168
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	34,086	24,356	9,673	57
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	529,051	378,031	150,133	887
12	Advertising and promotion	202,884	144,970	57,574	340
13	Office expenses	1,049,102	749,631	297,712	1,759
14	Information technology	792,583	566,337	224,917	1,329
15	Royalties	6,653	4,754	1,888	11
16	Occupancy	54,870	39,207	15,571	92
17	Travel	1,261,031	901,064	357,852	2,115
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,998,231	2,856,918	1,134,608	6,705
20	Interest	92,204	65,884	26,165	155
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	431,383	308,243	122,417	723
23	Insurance	44,398	31,725	12,599	74
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)				
a	MISCELLANEOUS	389,578	273,638	115,298	642
b	BANK SERVICE CHARGES	362,911	259,316	102,986	609
c	PHOTO GRAPHY	128,552	91,856	36,480	216
d	PRINTING AND DISTRIBUTI	73,067	52,209	20,735	123
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	18,121,867	12,948,930	5,142,585	30,352
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)				

art X	В	a	ı	a	n	C	e	S	\$h	ıe	e	t		
	_					-	_						_	

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1	· .
	2	Savings and temporary cash investments	1,513,441	2	2,704,214
	3	Pledges and grants receivable, net	454,054	3	171,806
	4	Accounts receivable, net	176,145	4	96,691
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
ŧs	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		5	
S	_			6	
Assets	7	Notes and loans receivable, net	204 202	7	20.4.400
	8	Inventories for sale or use	264,603	8	224,400
	9 10a	Prepaid expenses and deferred charges	475,923	9	504,931
	ь	Part VI of Schedule D Less accumulated depreciation		10c	6,728,459
	11	Investments—publicly traded securities	20,997,680	11	21,633,553
	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	591,376	15	99,239
	16	Total assets. Add lines 1 through 15 (must equal line 34)	31,570,849	16	32,163,293
	17	Accounts payable and accrued expenses	2,338,284	17	2,004,275
	18	Grants payable		18	
	19	Deferred revenue	3,823,734	19	4,449,292
	20	Tax-exempt bond liabilities		20	
ω.	21	Escrow or custodial account liability Complete Part IV of Schedule D	3,564,105	21	4,061,286
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ap		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	4,361,764	23	3,944,450
	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	947,544	25	773,143
	26	Total liabilities. Add lines 17 through 25	15,035,431	26	15,232,446
S ⊕ S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	16,020,665	27	16,556,865
е Ш	28	Temporarily restricted net assets	514,753	28	373,982
돧	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
ō	30	complete lines 30 through 34.		20	
Assets	30	Capital stock or trust principal, or current funds		30	
25.51	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds	16 F0F 440	32	16 000 047
Ŋet	33	Total net assets or fund balances	16,535,418	33	16,930,847
	34	Total liabilities and net assets/fund balances	31,570,849	34	32,163,293

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		19,4	429,156
2	Total expenses (must equal Part IX, column (A), line 25)	2		18,:	121,867
3	Revenue less expenses Subtract line 2 from line 1	3		1,:	307,289
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4			535,418
5	Net unrealized gains (losses) on investments	5			 820,074
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			-91,786
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			930,847
Par	t XIII 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 revia separate basis, consolidated basis, or both	ewed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis			1	
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 sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID:

Software Version:

EIN: 52-1012307

Name: COUNCIL FOR ADVANCEMENT AND SUPPORT OF

EDUCATION

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

(Code) (Expenses \$	1,920,874	including grants of \$) (Revenue \$	1,032,925)
PUBLICATIONS - T	THE COUNCIL'S PUBLICA	ATIONS FOCU	JS ON ISSUES AND TRENDS I	N ADVANCEMENT, AND THE	RANGE FROM
BOOKLETS TO CO	MPREHENSIVE TRAININ	G MANUALS,	VIDEOS AND A MAGAZINE		
(Code) (Expenses \$	322,593	including grants of \$) (Revenue \$)
DISTRICT SERVIC	ES				

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

<u> </u>					
(Code) (Expenses \$	394,833	including grants of \$	16,688) (Revenue \$	984,675)
AWARDS AND SERVICE	S				

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list	(C) Position (do not check more than one box, unless person is both an officer			i	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	any hours for related organizations below dotted line)	a Individual trustee or director	Institutional Trustee			employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099-MISC)	from the organization and related organizations
(1) BRIAN K LEE	2 00	х		х				0	0	0
CHAIR	0 00							-		
(1) J MICHAEL GOODWIN	2 00	×		х				0	0	0
CHAIR-ELECT (2) JAMES T HARRIS III	2 00									
		×		х				0	0	0
TREASURER (3) TRACY W BARLOK	0 00									
SECRETARY	0 00	×		Х				0	0	0
(4) DONNA A ARBIDE	2 00									_
MEMBER	0 00	×						0	0	0
(5) DIANE BINNEY	2 00							_		_
MEMBER	0 00	X						0	0	0
(6) ROBERT M CALDWELL	2 00	v								0
MEMBER	0 00	X						0	0	0
(7) VIRGINIA B CLARK	2 00	x						0	0	0
MEMBER	0 00	^						Ů	0	0
(8) DAVID W DINI	2 00	l x						0	0	0
MEMBER	0 00									
(9) LAURIE FENLASON	2 00	l x						0	0	0
MEMBER	0 00									
(10) TERESA M FLANNERY	2 00	×						0	0	0
MEMBER (11) SERGIO M GONZALEZ	0 00									
		×						0	0	0
MEMBER (12) SIR DAVID GREENAWAY	0 00									
MEMBER	0 00	×						0	0	0
(13) JOHN A GYLLIN	2 00									
MEMBER	0 00	X						0	0	0
(14) PETER A HAYASHIDA	2 00	,,								
MEMBER	0 00	Х						0	0	0
(15) ROBBEE BAKER KOSAK	2 00	x						0	0	0
MEMBER	0 00							Ŭ		
(16) FERNANDO LEON GARCIA	2 00	l x						0	0	0
MEMBER	0 00									
(17) CATHERINE MCGLINCH	2 00	×						0	0	0
MEMBER (18) JAMES H MOORE JR	0 00						_			
		×						0	0	0
MEMBER (19) TIMOTHY L O'MALLEY	0 00									
MEMBER	0 00	×						0	0	0
(20) ELIZABETH BREUL O'ROURKE	2 00									
MEMBER	0 00	×						0	0	0
(21) O'NEIL A S OUTAR	2 00							_	_	_
MEMBER	0 00	Х	L	L	L		L	0	0	0
(22) AMY BUTTON RENZ	2 00	х						0	0	0
MEMBER	0 00							0	0	0
(23) PETER A ROONEY	2 00	l x						0	0	0
MEMBER	0 00	<u> </u>					<u> </u>			
(24) KATHLEEN C SANTORA	2 00	х						0	0	0
MEMBER	0 00	<u> </u>		<u> </u>		[<u> </u>

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

(A) Name and Title A verage hours per week (list any hours for related organizations below dotted line) (26) MARTIN SHELL 200 X MEMBER (B) A verage hours per week (list any hours for related organizations below dotted line) (B) A verage hours per week (list any hours for related organizations below dotted line) (26) MARTIN SHELL 200 X (26) MARTIN SHELL 200 X 000 X 000 (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (C) Reportable compensation from the organizations (W-2/1099-MISC) (C) Reportable compensation from the organization from the orga	d amount wher is ation the tion and ted
Companies Comp	ted ations 0
X	0
MEMBER 0 00 Image: Control of the contr	0
X 0 0 0 MEMBER 0 000 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
MEMBER 0 00	
` x 0 0	0
	0
MEMBER 0 00	
(3) ELLEN M SULLIVAN 2 00	
X	0
(4) TRACY SYLER-JONES 2 00	
` X	0
MEMBER 0 00	
	56,972
PRESIDENT 0 00	
(6) DONALD FALKENSTEIN 35 00 X 165,277 0	24,635
VP BUSINESS AND FINANCE 0 00	
(7) AMIR PASIC 35 00 X 223,166 0	33,370
VP INTERNATIONAL OPERATIONS 0 00	
(8) WILLIAM WALKER 35 00 X 186,000 0	0
VP ADVANCEMENT RESOURCES, INTERIM 0 00	
(9) MYRON MATTOCKS 35 00 X 173,428 0	25 760
	25,769
(10) NORMA WALKER 35 00 173 460	25.624
	25,624
(11) ROBERT HENRY 35 00	
EXECUTIVE DIRECTOR OF EMERGING CONSTITUENTS & 0 00 0 145,296 0	21,788
(12) ROBERT SULLIVAN 35 00	
	19,925
(13) BRETT CHAMBERS 35 00	
EXECUTIVE DIRECTOR OF VOLUNTEER RELATIONS 0 00 X 131,133 0	19,150
(14) DANIEL WOLTMAN 35 00 120 CF1	10.001
SENIOR DIRECTOR OF MARKETING AND MEMBER 0 000 1129,651 0 SUPPORT	18,991
(15) GEORGE CATO 35 00 X 124,847 0	21,053
CONTROLLER 0 00 127,077	21,000

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COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION

As Filed Data -

DLN: 93493011008076

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

							52-1012307	
	Reason for Public Charity Status (All organizations must complete this part.) See instructions.							
he d	organı	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)	
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).	
2	Г	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization of	described in sec	tion 170(b)(1)(A)(iii).	
4	Γ	A medical research or		erated in conjunction v	vith a hospital c	lescribed in se	ction 170(b)(1)(A)(iii). Enter the
_	Г	hospital's name, city, An organization opera		afit of a college or uni	vorcity owned o	r operated by	a gavarnmantal unit d	accribad in
5	'				versity owned t	n operated by	a governmentar unit u	escribed iii
_	_	section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).						
-	<u> </u>							
7	ı	An organization that n described in section 1				om a governme	ental unit or from the g	jeneral public
8	Г	A community trust de			•	t II)		
9	V	An organization that n					butions, membership	fees, and gross
		receipts from activitie						
		its support from gross		•	-		• •	
		acquired by the organi						
10	Г	An organization organ						
11	į.	An organization organ						out the purposes of
	,	one or more publicly s						
	_	the box in lines 11a th						
а	-	Type I. A supporting o						
		supported organization organization			-	ty of the direct	ors or trustees of the	supporting
b	Г	Type II. A supporting	_	-		with its suppo	orted organization(s), h	ov having control or
_	,	management of the su						
	_	must complete Part IV						
С	Г	Type III functionally i						grated with, its
d	_	supported organization Type III non-function						ianization(c) that ic
d	,	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						
f		Enter the number of su						
g		Provide the following i	nformation abo	out the supported orga	inization(s)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of
		organization		organization	listed in your		monetary support	other support (see
				(described on lines	docume	ent?	(see instructions)	ınstructions)
				1-9 above or IRC section (see				
		instructions))						
					Yes	No		
'at-								
ota								

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 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from line 4 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 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support Add lines 7 through Gross receipts from related activities, etc (see instructions) 12 13 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) Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	6,788,758	7,031,363	6,796,246	7,060,745	6,	748,021	34,425,133
2	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	6,998,787	8,513,746	10,512,008	10,839,946	11,	555,114	48,419,601
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	13,787,545	15,545,109	17,308,254	17,900,691	18,	303,135	82,844,734
	Amounts included on lines 1, 2, and 3 received from disqualified persons		450,000					450,000
b	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							0
С	Add lines 7a and 7b		450,000					450,000
8	Public support (Subtract line 7c from line 6)							82,394,734
	ction B. Total Support				T		$\overline{}$	
Cale	beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total
9	A mounts from line 6	13,787,545	15,545,109	17,308,254	17,900,691	18,	303,135	82,844,734
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	475,604	347,631	401,875	342,410		364,082	1,931,602
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		-3,150	-3,150				-6,300
c	Add lines 10a and 10b	475,604	344,481	398,725	342,410		364,082	1,925,302
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		-3,150	-3,150				-6,300
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	3,835	225	49,411	92,243		265,791	411,505
13	Total support. (Add lines 9, 10c, 11, and 12)	14,266,984	15,886,665	17,753,240	18,335,344		933,008	85,175,241
14	First five years. If the Form 990 is check this box and stop here	for the organization	on's first, second	, third, fourth, or f	ifth tax year as a	section 5	;01(c)(3	3) organization, ►
Se	ction C. Computation of Pub							· · · · · · · · · · · · · · · · · · ·
15	Public support percentage for 2014			13, column (f))		15		96 740 %
16	Public support percentage from 20:	13 Schedule A, Pa	art III, line 15			16		96 780 %
Se	ction D. Computation of Inv							
17	Investment income percentage for	2014 (line 10c, co	olumn (f) dıvıded	by line 13, colum	n (f))	17		2 260 %
18	Investment income percentage from					18		2 480 %
19a	33 1/3% support tests—2014. If the more than 33 1/3%, check this box							l line 17 is not ► ✓

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 $(2)^2$ 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		
t	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 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?	112		
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	inetri	ıct ions)	
	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 e instructions.)			
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		1	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	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	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 3j 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: 93493011008076

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

• 3	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	me of the organization UNCIL FOR ADVANCEMENT AND SUPPOR	OT OF FOLICATION		Employer ide	ntification number
CO	UNCIL FOR ADVANCEMENT AND SUPPOR	RT OF EDUCATION		52-1012307	
Par	t I-A Complete if the or	ganization is exempt under	section 501(
1	Provide a description of the or	ganızatıon's dırect and ındırect polit	ical campaign act	ivities in Part IV	
2	Political expenditures	·		▶	\$
3	V olunteer hours				
Door	to D. Commisto if the on		on the FOI	-1/21	
1		ganization is exempt under			
2	·	e tax incurred by the organization ui			\$
3		e tax incurred by organization mana ection 4955 tax, did it file Form 47		11 4955	\$ Yes
<i>3</i> 4а	Was a correction made?	ection 4933 tax, did it life Form 47	20 for this year?		, γes , No Γ Yes Γ No
ъ Б	If "Yes," describe in Part IV				1 165 1 110
		ganization is exempt under	section 501(c), except section 50)1(c)(3).
1		ended by the filing organization for s		-	\$
2		organization's funds contributed to c			1
	exempt function activities		-	▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments f amount of political contribution	nd employer identification number (I 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 organization's to a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(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	▶ □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		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
a	Total lobbying expenditures to influence public o	ppinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	31,080)	
c	Total lobbying expenditures (add lines 1a and 1	b)	31,080)
d	Other exempt purpose expenditures	17,836,043	3	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	17,867,123	1
f	Lobbying nontaxable amount Enter the amount to	from the following table in both	1,000,000	
	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 lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	С)
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	С	
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	:0 reporting	

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 924,205 965,508 1,000,000 1,000,000 3,889,713 Lobbying ceiling amount 5,834,570 (150% of line 2a, column(e)) 37,760 22,260 31,080 Total lobbying expenditures 91,100 Grassroots nontaxable amount 231,051 241,377 250,000 250,000 972,428 Grassroots ceiling amount 1,458,642 (150% of line 2d, column (e)) 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)).	NOT			
For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(;	a)	(b)
actıv		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? O ther activities?				
j	Total Add lines 1c through 1i		_		
2a b	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$? 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				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), (or secti	on
			_	Yes	s No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	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 501(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			
Ь	Carryover from last year	2b			
	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			
Pa	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 gro see instructions), and Part II-B, line 1 Also, complete this part for any additional information	up list),	Part II	-A, lines	1 and
	Return Reference Explanation				

Part IV Supplemental Inf	ormation (continued)
Return Reference	Explanation
·	_

Schedule C (Form 990 or 990EZ) 2014

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

DLN: 93493011008076

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public

temal	Revenue Service	Information about Schedule D (Form	n 990) and its instructions is at <u>www.i.</u>	rs.gov/	<u>form990</u> .	Inspect	ion	
	me of the organ	ization EMENT AND SUPPORT OF EDUCATION		Emp	oloyer identific	ation numbe	er	
	THE I OR ADVANC	ENERT AND SOFFORT OF EDUCATION		52-	1012307			
Pa		izations Maintaining Donor Adv				s. Complet	te ıf	the
	organiz	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds		(b) Funds and	ather ages	nto	
	Total number a	at and of year	(a) Donor advised funds		(b) Funds and	otner accou	ints	
		ue of contributions to (during year)		+				
		ue of grants from (during year)		+				
		ue at end of year						
	_	zation inform all donors and donor adviso organization's property, subject to the or		nor adv	ısed	┌ Yes	Г	No
	used only for c	zation inform all grantees, donors, and d haritable purposes and not for the benef				┌ Yes	_	No
		ermissible private benefit?	the organization answered "Vos"	to Form	~ 000 Dart I			NO
Œ II		rvation Easements. Complete If conservation easements held by the org		to Fori	11 990, Part 1	v, iiile 7.		
	Preservation Protection	on of land for public use (e g , recreation of natural habitat						
		s 2a through 2d if the organization held a he last day of the tax year	a qualified conservation contribution in	the forr	n of a conserva	ation		
		,,,			Held at the	End of the	Yea	r
3	Total number o	of conservation easements		2a				
)	Total acreage	restricted by conservation easements		2b				
	Number of con	servation easements on a certified histo	oric structure included in (a)	2c				
I		servation easements included in (c) acc ure listed in the National Register	quired after 8/17/06, and not on a	2d				
		servation easements modified, transferr	ed, released, extinguished, or terminat	ted by tl	he organization	during		
	Number of stat	tes where property subject to conservat	ion easement is located ►					
		nization have a written policy regarding t f the conservation easements it holds?	the periodic monitoring, inspection, hai	ndling o	f violations, an	d ┌ Yes	Γ	No
	Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements	during the year			
		enses incurred in monitoring, inspecting	g, and enforcing conservation easemen	ts durın	g the year			
		nservation easement reported on line 2(o70(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı)	┌ Yes	Г	No
	balance sheet,	escribe how the organization reports coi , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the organization's financia					
ar'		izations Maintaining Collection ete if the organization answered "Y		, or Ot	her Similar	Assets.		
)	works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in further			
o	If the organiza works of art, hi	tion elected, as permitted under SFAS 1 istorical treasures, or other similar assede the following amounts relating to thes	.16 (ASC 958), to report in its revenue its held for public exhibition, education	e staten	nent and baland		ıc	
	(i) Revenue in	cluded in Form 990, Part VIII, line 1			► \$			
	(ii) Assets inc	luded in Form 990, Part X						
	If the organiza	tion received or held works of art, histor ints required to be reported under SFAS						
l	Revenue inclu	ded in Form 990, Part VIII, line 1			F \$			
,		ed in Form 990, Part X			. <u></u>			_
	Transcra include	ca iii i oiiii 220, i aic A			- + <u></u>			_

b Buildings 5,215,474 2,164,615 3,050,859 c Leasehold improvements 910,933 378,882 532,051 d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563	Part	Organizations Maintaining Collections of Art	<u>, His</u>	tori	<u>cal Tr</u>	easu	res, or Ot	:he	<u>r Similar Ass</u>	ets (c	ontinued)
B Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization is solicit or receive donations of art, instorical transaures or other similar assets to be sold to reserve the form of the organization answered "Yes" to Form 990. Part IV. Inc. 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization and part XIII and complete the following table Beginning balance Additions during the year Ending balance	3		ds, cl	heck	any of t	he foll	owing that a	re a	significant use o	of its	
Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII	а	Public exhibition	d	Γ	Loan	or excl	hange progra	ams			
Power a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the arganization solicitor receive donations of arth historical trassities or the solid to risk gluids rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an amount on Form 990, Part X, Ine 9, or reported an explaint part XIII and complete the following table Ves	b	Scholarly research	е	Γ	Other	-					
Part XIII	c	Preservation for future generations									
No Far To Part To	4		ın ho	w the	y furthe	er the c	organization	s ex	empt purpose ın		
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is it is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is it is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is it is it is a major the properties and the properties of the organization and the properties of the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No	5									_	_
Tank Nine 9, or reported an amount on Form '990, Part X, line 21.									<u> </u>		No
1	Par						i answered	I Y	es to ronn 95	,0,	
Mathematical Procession Mathematical Pro	1a	Is the organization an agent, trustee, custodian or other interme					or other asse	ets r		Yes	✓ No
d Additions during the year Distributions during the year 1d 1d 1d 1d 1d 1d 1d 1	b	If "Yes," explain the arrangement in Part XIII and complete the	follo	wing	able						
A dictions during the year 14 15 15 15 15 15 15 15									Amo	ount	
Distributions during the year Filt Ending balance If If If If If If If I	c	Beginning balance					<u> </u>	1c			
The finding balance 1	d	Additions during the year					<u> :</u>	1d			
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ▼ Yes No if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	е	Distributions during the year					<u> :</u>	1e			
B If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Form 990, Part IV, line 10. Calcument year (b) Prov year (b) (e) Two years back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (e) Four years b	f	Ending balance						1f			
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Contributions	2a	Did the organization include an amount on Form 990, Part X, line	e 21,	for e	scrowo	rcust	odıal accoun	t lıa	bility?	Yes	┌ No
(a)Current year (b)Pror year b (c)Two years back (d)Three years back (e)Four years back (d) Three years back (e)Four years back (d) Three years back (e)Four years back (d) Three years back (e)Four years (e)Four year	b	If "Yes," explain the arrangement in Part XIII Check here if the	expl	anatı	on has	been p	rovided in P	art)	ΚΙΙΙ		굣
Beginning of year balance	Pai		n ans	swer	ed "Ye						
b Contributions			(b) Prior	year	b (c) T\	wo years back	(d)	Three years back ((e) Four y	ears back
d Grants or scholarships	_										
d Grants or scholarships	_								+		
e Other expenditures for facilities and programs	C	Net investment earnings, gains, and losses									
and programs	d	Grants or scholarships									
f Administrative expenses	е	·									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ Permanent endowment ▶ The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations ii' related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Buildings C Leasehold improvements 910,933 378,882 532,051 d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563	f	· -									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ C 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 organization that are held and administered for the organization by (i) unrelated organizations	a	·									
a Board designated or quasi-endowment ► b Permanent endowment ► c 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 organization that are held and administered for the organization by (i) unrelated organizations			ce (lır	ne 1a	. colum	n (a)) l	held as				
Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations			(5	,	(-//					
Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	_	•									
The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) relate											
Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations		• •									
No No No No No No No No	3a		atıon	that	are held	d and a	dministered	for	the		
(ii) related organizations		organization by									No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Part VI Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation (d) Book value depreciation (e) Accumulated depreciation (f) Book value			-					٠			
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Buildings C Leasehold improvements C Leasehold improvements Description of property (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 2,304,603 5,215,474 2,164,615 3,050,859 C Leasehold improvements D STEPPOND ST	L									<u>) </u>	<u> </u>
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b)Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land								•	30		<u> </u>
11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land 2,304,603 2,304,603 2,304,603 b Buildings 5,215,474 2,164,615 3,050,859 c Leasehold improvements 910,933 378,882 532,051 d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563						n ansv	vered 'Yes'	to	Form 990. Par	t IV. I	ine
1a Land 2,304,603 2,304,603 2,304,603 b Buildings 5,215,474 2,164,615 3,050,859 c Leasehold improvements 910,933 378,882 532,051 d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563		11a. See Form 990, Part X, line 10.							·		
b Buildings 5,215,474 2,164,615 3,050,859 c Leasehold improvements 910,933 378,882 532,051 d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563		Description of property								(d) B	ook value
c Leasehold improvements 910,933 378,882 532,051 d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563	1a	Land					2,304,	603			2,304,603
d Equipment 683,167 676,784 6,383 e Other 1,890,102 1,055,539 834,563	b I	Buildings					5,215,	474	2,164,615		3,050,859
e Other	c l	Leasehold improvements					910,	933	378,882		532,051
	d I	Equipment					683,	167	676,784		6,383
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)								102	1,055,539		834,563
	Tota	I. Add lines 1a through 1e (Column (d) must equal Form 990, Part)	X, colι	ımn (B), line	10(c).)		•	▶		6,728,459

Part VII	Investments—Other Securities. Co See Form 990, Part X, line 12.	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financia	al derivatives		,
	-held equity interests		
Other			
Total (Colu	mn (b) must equal Form 990, Part X, col (B) line 12)	*	
			 n 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
	(1)	*	
Part IX	mn (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization]), Part IV, line 11d See Form 990, Part X, line 15
	(a) Desc		(b) Book value
-			
_			
Total. (Colu	ımn (b) must equal Form 990, Part X, col.(B) lıne	15.)	
Part X			o Form 990, Part IV, line 11e or 11f. See
1	Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal inc		(B) BOOK value	
	POSTRETIREMENT BENEFITS & SWAP		
AGREEME		773,143	
		+	
		+	
Total. (Colui	mn (b) must equal Form 990, Part X, col (B) line 25)	▶ 773,143	

Part		Revenue per Audited Financial Statements With Revenue powered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete ıf
1		er support per audited financial statements	1	18,756,994
2	A mounts included on line 1 b	ut not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses)	on investments 2a -820,074		
b	Donated services and use of	facilities		
С	Recoveries of prior year gran	ts 2c		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d		2e	-820,074
3	Subtract line 2e from line 1		3	19,577,068
4	Amounts included on Form 9	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		4 c	-147,912
5	Total revenue Add lines 3 ar	nd 4c. (This must equal Form 990, Part I, line 12)	5	19,429,156
Part		Expenses per Audited Financial Statements With Expenses nswered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1		er audited financial statements	1	18,337,977
2	Amounts included on line 1 b	ut not on Form 990, Part IX, line 25		
а	Donated services and use of	facilities		
b	Prior year adjustments			
c	Otherlosses			
d	Other (Describe in Part XIII)		
e	Add lines $2a$ through $2d$.		2e	216,110
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	18,121,867
4	Amounts included on Form 99	90, Part IX, line 25, 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) 4b		
c	Add lines 4a and 4b		4c	0_
5	Total expenses Add lines 3 a	and 4c. (This must equal Form 990, Part I, line 18)	5	18,121,867
Part	XIII Supplemental In	formation		
Part '		r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b I, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Return Reference	Explanation		
PART	IV, LINE 2B	DISTRICT ESCROWACCOUNTS		
	XI, LINE 4B - OTHER STMENTS	COST OF GOODS SOLD -147,513 LOSS ON DISPOSAL OF ASSET -3	399	
	XII, LINE 2D - OTHER STMENTS	COST OF GOODS SOLD 147,513 LOSS ON DISPOSAL OF ASSET 39 EXCHANGE RATE 68,198	9 LO:	SS ON FOREIGN

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

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493011008076

OMB No 1545-0047

2014

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

Open to Public Inspection

	e of the organization		Employer identification number								
col	INCIL FOR ADVANCEMENT AND		52-1012307								
Pa	General Information "Yes" to Form 990, Pai			ne United States. C			ition answered				
1	For grantmakers. Does the cand other assistance, the grants or a used to award the grants or a	ction criteria	┌ Yes ┌ No								
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.										
3	Activites per Region (The follow	Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)									
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	nty listed in (d) is a service, describe cific type of e(s) in region	(f) Total expenditures for and investments in region				
(1) EUROPE	0	0	PROGRAM SERVICES	CONDUC ACTIVIT SUPPOR EXEMPT ADVANC EDUCAT	TS VARIOUS TES IN T OF ITS PURPOSE OF ING THE ION OF ABLE FUND-	188,086				
(2) ASIA	0	0		CONDUC ACTIVIT SUPPOR EXEMPT ADVANC EDUCAT	TS VARIOUS TES IN T OF ITS PURPOSE OF ING THE ION OF ABLE FUND-	111,494				
(3)										
(4)										
(5)										
	Sub-total	0	0				299,580				
I	Total from continuation sheets to Part I	0	0				0				
	c Totals (add lines 3a and 3b)	0	0				299,580				

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

Schedule F (Form 990) 2014

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

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2014

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

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	THE COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION MONITORS THE USE OF GRANT FUNDS OUTSI DE OF THE UNITED STATES BY MONITORING GRANTS THROUGH THE FOREIGN AFFILIATES OF THE COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION EUROPE AND THE COUNCIL FOR ADVANCEMENT AND SUPPO RT OF EDUCATION-ASIA THERE IS ONE GRANT FROM THE CARNEGIE FOUNDATION FOR AFRICAN ASSISTAN CE WHICH IS MANAGED BY THE COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493011008076 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION 52-1012307 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable cash valuation non-cash assistance grant orassistance or government assistance (book, FMV, appraisal, other)

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
See Additional Data Table					

Part IV Supplemental Ir	iformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	CASE MONITORS THE USE OF GRANT FUNDS USING CONFERENCE ATTENDANCE LISTS TO CONFIRM GRANTEE ATTENDANCE AND PARTICIPATION AT DESIGNATED CONFERENCES ASSOCIATED WITH THE GRANT AND TRAVEL AND EXPENSE REIMBURSEMENT REQUESTS TO DOCUMENT THE COSTS ASSOCIATED WITH CONFERENCE ATTENDANCE

Schedule I (Form 990) 2014

Software ID:

Software Version:

EIN: 52-1012307

Name: COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
JUPITER FELLOWSHIP FOR TRAINING IN ALUMNI RELATIONS, COMMUNICATIONS AND MARK	9	9,000, 9			
JUPITER FELLOWSHIP FOR TRAINING IN ALUMNI RELATIONS, COMMUNICATIONS AND MARK	1	330			
DIVERITY INITIATIVES TRAVEL	1	350			
ASAP FELLOWSHIP TO ATTEND THE ANNUAL AFFILIATED STUDENT ADVANCEMENT PROGRAMS	4	4,000			
ASAP FELLOWSHIP TO ATTEND THE ANNUAL AFFILIATED STUDENT ADVANCEMENT PROGRAMS	1	308			
PETER BUCHANAN SCHOLARSHIP TO ATTEND THE ANNUAL AFFILIATED STUDENT ADVANCEME	3	1,200			
CARNEGIE CASE AFRICA CONFERENCES	2	1,000			
SHOLARSHIP AND AWARD RECOGNITION GIFTS	1		500	FMV	CRYSTAL VASES AND SHIPPING

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DLN: 93493011008076

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

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

Name of the organization COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION **Employer identification number**

52-1012307

Pai	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any 990, Part VII, Section A, line 1a Complete Part III to provide				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization reimbursement or provision of all of the expenses described a		1b		
2	Did the organization require substantiation prior to reimbursin directors, trustees, officers, including the CEO/Executive Directors.		2		
	, , , , , , , , , , , , , , , , , , , ,	, , ,			
3	Indicate which, if any, of the following the filing organization us organization's CEO/Executive Director Check all that apply used by a related organization to establish compensation of the	Do not check any boxes for methods			
	Compensation committee	Written employment contract			
	☐ Independent compensation consultant ☐ ☐	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, or a related organization	Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?	,	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqu	ualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based com		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the	applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations mus	t complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, compensation contingent on the revenues of	-			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, compensation contingent on the net earnings of	did the organization pay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, of payments not described in lines 5 and 6? If "Yes," describe in		7		No
8	Were any amounts reported in Form 990, Part VII, paid or acc	cured pursuant to a contract that was			
	subject to the initial contract exception described in Regulati				
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 $4958-6(c)$?	ole presumption procedure described in Regulations	9		

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

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

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

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

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 4B	THE COUNCIL HAS A 457(F) PLAN AND CONTRIBUTED \$17,500 FOR JOHN LIPPINCOTT FOR THE TAX YEAR 2014

Schedule J (Form 990) 2014

Additional Data

Software ID:

Software Version:

EIN: 52-1012307

Name: COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION

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

(A) Name and Title		(i) Base ompensation	f W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	SC compensation (iii) O ther reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
1 JOHN LIPPINCOTT, PRESIDENT	(ı) (ıı)	482,610	0	3,810	51,054 0	6,306 0	5 4 3,780 0	0
1 DONALD FALKENSTEIN, VP BUSINESS AND FINANCE	(I) (II)	158,717 0	5,000 0	1,560 0	18,717 0	8,806 0	192,800	0
2 AMIR PASIC, VP INTERNATIONAL OPERATIONS	(I) (II)	217,476 0	5,000 0	690 0	27,452 0	8,806 0	259,424 0	0 0
3 WILLIAM WALKER, VP ADVANCEMENT RESOURCES, INTERIM	(I) (II)	186,000 0	0	0	0	0	186,000	0
4 MYRON MATTOCKS, VP MEMBERSHIP, MARKETING, EXT RELATI	(I) (II)	166,770 0	5,000 0	1,658 0	19,852 0	6,306 0	199,586 0	0
5 NORMA WALKER, VP ADVANCEMENT PROGRAMS	(I) (II)	165,819 0	5,000 0	1,650 0	19,706 0	7,506 0	199,681 0	0
6 ROBERT HENRY, EXECUTIVE DIRECTOR OF EMERGING CONST	(I) (II)	144,994 0	0	302 0	15,871 0	6,306 0	167,473 0	0
7 ROBERT SULLIVAN, SENIOR DIRECTOR OF MEMBERSHIP DEVELO	(I) (II)	138,811	0 0	1,264 0	14,007 0	6,306 0	160,388 0	0 0
8 BRETT CHAMBERS, EXECUTIVE DIRECTOR OF VOLUNTEER RELA	(I) (II)	130,741	0	392 0	13,232 0	7,314 0	151,679 0	0
9 DANIEL WOLTMAN, SENIOR DIRECTOR OF MARKETING AND MEM	(I)	129,392 0	0	259 0	13,073 0	11,306 0	154,030	0

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

DLN: 93493011008076

2014

Open to Public Inspection

Name of the organization	Employer identification number
COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION	
	52-1012307
	<u> </u>

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE GOVERNING COMMITTEE MINUTES ARE DOCUMENTED
FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF TRUSTEES NOMINATES A SLATE OF TRUSTEES THAT IS APPROVED ON-LINE BY THE INSTIT UTIONAL MEMBERSHIP PRIOR TO THE ANNUAL MEMBERSHIP MEETING APPROXIMATELY A THIRD OF THE BO ARD OF TRUSTEES IS ROTATED IN THIS PROCESS
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE FORM 990 IS PROVIDED TO THE BOARD OF TRUSTEES AT THEIR ANNUAL MEETING HELD EACH NOVEMBER
FORM 990, PART VI, SECTION B, LINE 12C	A COPY OF THE CONFLICT OF INTEREST POLICY IS PROVIDED ANNUALLY TO EACH MEMBER OF THE GOVER NING BODY AS WELL AS TO ALL OFFICERS AND KEY EMPLOYEES, EACH IS REMINDED TO REVIEW THE POL ICY AND TO REPORT ANY CONFLICTS OF INTEREST
FORM 990, PART VI, SECTION B, LINE 15	TOP MANAGEMENT OFFICIAL A REVIEW OF COMPENSATION WAS PERFORMED IN ADDITION TO CONSIDERATI ON OF ORGANIZATIONAL AND PERSONNEL REQUIREMENTS IN DETERMINING EXECUTIVE MANAGEMENT COMPEN SATION KEY EMPLOYEES A SIMILIAR REVIEW OF THE COMPENSATON OF KEY EMPLOYEES AND OTHER STA FF WAS PERFORMED IN ADDITON TO CONSIDERATION OF ORGANIZIATIONAL AND PERSONNEL REQUIREMENTS IN DETERMINING MANAGEMENT COMPENSATION
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST POLICY AVAILABLE FOR REVIEW, BY WRITTEN REQUEST TO THE PUBLIC
FORM 990, PART XI, LINE 9	LOSS ON EXCHANGE RATE -68,198 ADJUSTMENT IN OCI -23,588
FORM 990 PART XII, LINE 2C	THE AUDIT REVIEW PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR
FORM 990 PART VI, LINE 4	THE ORGANIZATION MADE NO SIGNIFICANT CHANGES TO ITS GOVERNING DOCUMENTS EFFECTIVE MARCH 9 , 2015, THE ORGANIZATION MADE A NONMATERIAL CHANGE IN ITS BY LAWS REGARDING THE TERM OF THE PRESIDENT BY AMENDING ARTICLE VIII, SECTION A THE SECTION ORIGINALLY READ "A THE PRESIDENT SHALL BE APPOINTED BY AND SERVE AT THE PLEASURE OF THE BOARD OF TRUSTEES WHICH SHALL. ESTABLISH THE CONDITIONS AND TERMS OF COMPENSATION AND EMPLOYMENT THE TERM OF THE PRESIDE NT SHALL NOT EXCEED ONE (1) YEAR, ALTHOUGH THE PRESIDENTMAY SERVE SUCCESSIVE TERMS "THE SECTION WAS AMENDED TO READ "A THE PRESIDENT SHALL BE APPOINTED BY AND SERVE AT THE PLEAS URE OF THE BOARD OF TRUSTEES WHICH SHALL ESTABLISH THE CONDITIONS AND TERMS OF COMPENSATIO N AND EMPLOYMENT THE TERM OF THE PRESIDENT AS BOTH OFFICER AND EMPLOYEE SHALL NOT EXCEED FIVE (5) YEARS, ALTHOUGH THE PRESIDENT MAY SERVE SUCCESSIVE TERMS THE TERM OF THE PRESIDE NT AS OFFICER FOR PURPOSES OF CORPORATE LAW SHALL BE AS PROVIDED IN THE PRESIDENT'S CONTRA CT OF EMPLOYMENT FROM TIME TO TIME THE TERM OF THE PRESIDENT BOTH AS A CORPORATE OFFICER AND AS AN EMPLOYEE SHALL BND AT THE EARLIER OF EXPIRATION OF OR TERMINATION OF THE EMPLOYM BNT CONTRACT ENTERED INTO FROM TIME TO TIME BETWEEN THIS CORPORATION AND THE PRESIDENT TH IS BY LAW PROVISION SHALL NOT BE INTERPRETED TO CREATE ANY CONTRACT OF EMPLOYMENT OF ANY RI GHIT TO CONTINUED EMPLOYMENT "THE ORGANIZATIONS 501(C)(3) CHARITABLE AND EDUCATIONAL PURP OSES AND OPERATIONS OTHERWISE REMAIN UNCHANGED

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DLN: 93493011008076

OMB No 1545-0047

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SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

Name	of the	organızatı	ıon			
COUNC	IL FOR	ADVANCEME	NT AND	SUPPORT	OF	EDUCATION

Employer identification number

52-1012307

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
(a) Name, address, and EIN (ıf applıcable) of dısregarded 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	Primary activity	(c) Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	(†) Direct controlling entity	Section (13) co ent	512(b) ntrolled
						Yes	No
LONDON	CASE(EUROPE) CONDUCTS ACTIVITIES IN SURPPORT OF CHARITABLE FUND RAISERS	UK	501(C)(3)		COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION		No
	CASE(EUROPE) CONDUCTS ACTIVITIES IN SURPPORT OF CHARITABLE FUND RAISERS	SN	501(C)(3)		COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION		No

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	ation ansv	vered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.				•		
	(-)	71-3	7-1	(4)	7-1	(6)	(-)	753	(:)	723	г

	•			•								
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	(j)		(k)
Name, address, and EIN of	Primary activity		Direct	Predominant	Share of		Disprop	rtionate	Code V-UBI	Genera	alor Pe	ercentage
related organization		domicile	controlling	income(related,	total income	end-of-year	allocati	ions?	amount in box	manag	ging ov	wnership
		(state or	entity	unrelated,		assets			20 of	partn	er?	
		foreign		excluded from					Schedule K-1	l		
		country)		tax under					(Form 1065)	l		
				sections 512-						l		
				514)								
							Yes	No		Yes	No	
									I			

Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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)	
-		(state or foreign		corp,		assets	•	controlled	
		country)		or trust)				entity?	
								Yes	No

Part V	Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Not	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During	g the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Red	ceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	а		No
b Gift	t, grant, or capital contribution to related organization(s)	b		No
c Gıft	t, grant, or capital contribution from related organization(s)	С		No
d Loa	ans or loan guarantees to or for related organization(s)	d		No
e Loa	ans or loan guarantees by related organization(s)	e		No
f Div	ridends from related organization(s)	f		No
g Sal	le of assets to related organization(s)	g		No
h Pur	rchase of assets from related organization(s)	h		No
i Exc	change of assets with related organization(s)	.i		No
j Lea	ase of facilities, equipment, or other assets to related organization(s)	j		No
k Lea	ase of facilities, equipment, or other assets from related organization(s)	k		No
I Perf	formance of services or membership or fundraising solicitations for related organization(s)	.i		No
m Perf	formance of services or membership or fundraising solicitations by related organization(s)	m		No
n Sha	iring of facilities, equipment, mailing lists, or other assets with related organization(s)	n		No
o Sha	aring of paid employees with related organization(s)	•		No
p Rei	imbursement paid to related organization(s) for expenses	p		No
q Rei	Imbursement paid by related organization(s) for expenses	q	Yes	
r Oth	ner transfer of cash or property to related organization(s)	.r	Yes	
	her transfer of cash or property from related organization(s)			No
2 If th	he 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) (b) (c) (d) Name of related organization Transaction Amount involved Method of determining amount type (a-s)	nt in	volved	

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)	\neg	(i)	(j)	\neg	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are	e all partners	Share of	Share of	Disproprtionate	æ I	Code V-UBI	General or	r I	Percentage
	1 ' ''	domicile	ıncome	1	section	total	end-of-year	allocations?	Į.	amount in	managing	, ,	ownership
	1	(state or	(related,	[[501(c)(3)	ıncome	assets	1	J	box 20	partner?	J	
	1 '	`foreign	unrelated,		ganizations?	1 '	1	1	Į.	of Schedule	<i>i</i> .	J	()
	1		excluded from		,	1 '	1	1	J	K-1	1	J	(!
	1	1	tax under	1	,	1 '	1	1	J	(Form 1065)	1	J	('
	1 '	1	sections 512-	1	,	1 '	1	1	Į.	(1 01111 2000,)	1	J	1
	1 '	1				4 '	1			4 /			
	1 '	1	514)	Yes	No	1 '	1	Yes	No	1 1	Yes	No	1
/	 '		4	——'	└──	 '				└──		للل	1
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Part VII Supplemental Information

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

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