Department of the

Internal Revenue

Treasury

Return of Organization Exempt From Income Tax

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

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

▶ Information about Form 990 and its instructions is at <u>www IRS qov/form990</u>

2014

DLN: 93493351003136 OMB No 1545-0047

Inspection

Service A For the 2014 calendar year, or tax year beginning 10-01-2014 , and ending 09-30-2015 C Name of organization NATIONAL CENTER FOR POLICY ANALYSIS D Employer identification number B Check if applicable 75-1804932 Address change Doing business as Г E Telephone number umber and street (or P O box if mail is not delivered to street address) Room/suite Name change 14180 DALLAS PARKWAY (972) 308-6478 Г City or town, state or province, country, and ZIP or foreign postal code DALLAS, TX 75254 DALLAS, TX G Gross receipts \$ 3,009,143 Initial return Г Final return/terminated V Amended return Application pending **F** Name and address of principal officer JAMES HAMOS JR **H(a)** Is this a group return for ┌ Yes 🗸 No subordinates? 14180 DALLAS PARKWAY DALLAS.TX 75254 **H(b)** Are all subordinates Tax-exempt status **√** 501(c)(3) 501(c) () **◀** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) J Website: ► WWW NCPA ORG H(c) Group exemption number ▶ L Year of formation 1982 M State of legal domicile TX Part I Summary Briefly describe the organization's mission or most significant activities PUBLIC POLICY RESEARCH AND EDUCATION Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets ${\bf 3}$ $\,$ Number of voting members of the governing body (Part VI, line 1a) $\,$. 3 8 Activities & 7 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 39 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 10 **6** Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 5,069,477 2,880,305 8 Ravenua Program service revenue (Part VIII, line 2g) . 9 152,407 104,333 60,029 15.031 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 9,474 11 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 5,281,913 3,009,143 12) . 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 0 0 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 2,798,534 2,035,457 5 - 10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 Total fundraising expenses (Part IX, column (D), line 25) \triangleright 80,032 b 1,504,916 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,746,419 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 4,544,953 3,540,373 Revenue less expenses Subtract line 18 from line 12 19 736,960 -531,230 Assets or displaying **Beginning of Current** End of Year Year 20 2,699,265 1,867,931 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) .

Part II Signature Block

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

Sign	
Here	

22

Net assets or fund balances Subtract line 21 from line 20

JAMES H AMOS JR PRESIDENT & CEO Type or print name and title

Signature of officer

Preparer's signature CURTIS MAXFIELD Firm's name ► WHITLEY PENN LLP

Paid Preparer **Use Only**

Firm's address ▶ 8343 DOUGLAS AVENUE STE 400

DALLAS, TX 75225

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

For Paperwork Reduction Act Notice, see the separate instructions.

art TV	Checklis	st of Rec	mired S	chedules

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

<i></i>	,2014)			
TV	Checklist of	Required	Schedules	(continued)

Paı	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	21	
	demonstration and the Doublet Annual Control of the		l

Did the organization answer "Yes" to Part VII. Section A. line 3.4. or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes."

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

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

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit

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

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

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I

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

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule 1, Part

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

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

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

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

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

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

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

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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

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

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

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

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

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

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part

Nο 22

23

24a

24h

24c

24d

25a

25h

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28h

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Yes

Form 990 (2014)

Yes

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Νo

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Nο

Nο

Νo

Nο

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	0		
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	. 1c		
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	39		
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		No
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. 3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authorit over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	,		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
b	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	gıfts 6b		
7	were not tax deductible?	. 60		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a services provided to the payor?	and 7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require file Form 8282?	red to 7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 889 required?	99 as 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?	e a 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any tiduring the year?	me 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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	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.			
	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 in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2014) Page **6** 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. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax 8 1a 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Did the organization become aware during the year of a significant diversion of the organization's assets? ... Yes 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? . 8a Yes **b** Each committee with authority to act on behalf of the governing body? 8b Yes 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 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No

10a	Did the organization have local chapters, branches, or affiliates?	10 a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12 c		No
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15 a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	·		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		No

Section C. Disclosure

- 17 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

▼ Own website ▼ Another's website ▼ Upon request □ Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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

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

5050 QUORUM DRIVE SUITE 312 DALLAS, TX 75254 (972) 378-9510 **16**b

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- 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 for related	m unle	ore t ss pe	han erso cer tor/t	not one n is and		an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) ALLEN WEST PRESIDET/CEO	50 00	×		×				0	0	0
(2) DENNIS MCCUISTION INTERIM CEO	40 00	×		x				94,488	0	0
(3) STEVE IVY CHAIRMAN OF THE BOARD	1 00	×						0	0	0
(4) MICHAEL WHALEN DIRECTOR	1 00	×						0	0	0
(5) JOHN STRAUSS DIRECTOR	1 00	x						0	0	0
(6) TONY BATMAN DIRECTOR	1 00	X						0	0	0
(7) TEX GROSS DIRECTOR	1 00	×						0	0	0
(8) LARRY WEDEKIND DIRECTOR	1 00	×						0	0	0
(9) JOHN CARONA DIRECTOR	1 00	×						0	0	0
(10) JACKI PICK COO	50 00			x				0	0	0
(11) RICHARD WALKER INTERIM COO	50 00			х				150,334	0	0
(12) EILEEN RESNIK DIRECTOR OF DEVELOPMENT	40 00			×				37,716	0	0
(13) BRIAN WILLIAMS DIRECTOR OF LEGISLATIVE AFFAIRS	40 00					х		116,300	0	0
(14) JOHN GOODMAN FORMER OFFICER	0 00						х	182,424	0	0

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

(A) Name and Title	(B) A verage				not o	heck		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours		n is	both	n an	officer istee)		compensation from the organization (W-	compensation from related organizations (W-	amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC) 2/1099-MISC) or		organization and related organizations

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	581,262	0	0
_	Total number of industrials (including but not limited to those listed above) will	he recound more th		-

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶3

			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>	з	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

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

Name and business address	Description of services	Compensation
		_

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

Part V	ШÌ	Statement o	f Revenue					
		Check if Schedi	ule O contains a respor	nse or note to any lir	ne in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တ 🗷	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es 1b					
	c	Fundraising eve	ents 1c					
	d	Related organiz	zations 1d					
	e	Government grants	s (contributions) 1e					
tions er Sie	f	All other contribution	ons, gifts, grants, and 1f	2,880,305				
fribu Othe	g		ons included in lines					
in d	h	Total. Add lines	s 1a-1f		2,880,305			
		Iotan //aa mies 1a 11		Business Code				
ne.	2a	CONFERENCE ADM	1ISSION F	611710	104,333	104,333		
Program Service Revenue	ь					·		
رد 1	c							
Ę.	d							
S	e							
gra	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a-2f	>	104,333			
	3	Investment inc	ome (including dividen	ds, interest,	244			244
	4		ar amounts)	F F	244			244
	5		· · · · · · · · · ·	→				
		,,	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	14,787					
	ь	Less cost or other basis and	0					
		sales expenses Gain or (loss)	14,787					
	c d		ss)		14,787			14,787
		Gross income f						
Other Revenue		events (not inc \$	s reported on line 1c)					
ŭ.		,	a					
E e	ь		penses b					
ō	C		(loss) from fundraising	events ▶				
	9a		rom gaming activities ne 19 a					
	b		penses b					
		Met income of t	(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	owances .					
	h		a					
	b c		oods sold . . b (loss) from sales of inve	entory ▶				
	Ť	Miscellaneous	· · · · · · · · · · · · · · · · · · ·	Business Code				
	11a	OTHER REVEN		900099	9,474	9,474		
	b							
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	•	9,474			
	12	Total revenue.	See Instructions .	▶	3,009,143	113,807	0	15,031

Form 990 (2014) Page **10** Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX . . . (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 . Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 590,275 key employees 499,195 73,462 17,618 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). 1,244,129 154,837 Other salaries and wages . . 1,052,158 37,134 Pension plan accruals and contributions (include section 401(k) 531 4.268 3.610 127 and 403(b) employer contributions) . . . Other employee benefits . 101.636 85,953 12,649 3,034 10 Payroll 95,149 80,467 11,842 2,840 taxes Fees for services (non-employees) Management h Legal 149,007 141,507 6,000 1,500 17,610 16,724 709 Accounting . 177 Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) 329,936 313,330 13,285 amount, list line 11g expenses on Schedule O) . 3,321 12 Advertising and promotion 11,790 11,790 Office expenses 1,046 13 34,860 29,631 4,183 14 Information technology . 15 Royalties . . 16 Occupancy . . 156,920 133,381 18,831 4,708 17 Travel 48,403 41,143 5,808 1,452 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings . . 136.705 136,705

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			<u>· · · </u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	36,050	1	89,554
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,711,277	3	1,201,225
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
s:	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
Assets				6	
As	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	20.050	8	47.000
	9	Prepaid expenses and deferred charges	92,652	9	17,803
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1,366,252			
	b	Less accumulated depreciation 10b 965,625	467,143	10 c	400,627
	11	Investments—publicly traded securities	392,143	11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0	15	158,722
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,699,265	16	1,867,931
	17	Accounts payable and accrued expenses	474,583	17	257,935
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Si	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
aej		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	790 754	25	707 208

Liabilities
Net Assets or Fund Balances

30

31

32

33

34

S		organizations (see instructions) Complete Part II of Schedule L					
Assets						6	
	7	Notes and loans receivable, net				7	
٩	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			92,652	9	17,803
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,366,252			
	b	Less accumulated depreciation	10 b	965,625	467,143	10 c	400,627
	11	Investments—publicly traded securities			392,143	11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			0	15	158,722
	16	Total assets. Add lines 1 through 15 (must equal line 34)			2,699,265	16	1,867,931
	17	Accounts payable and accrued expenses			474,583	17	257,935
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
S	21	Escrow or custodial account liability Complete Part IV of Sche		21			
Liabilities	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi	•	stees,			
qe		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties		.		23	
	24	Unsecured notes and loans payable to unrelated third parties		24			
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par D	790,754	25	707,298		
	26	Total liabilities. Add lines 17 through 25			1,265,337	26	965,233
		Organizations that follow SFAS 117 (ASC 958), check here ▶					
ce		lines 27 through 29, and lines 33 and 34.	-	-			
ar)	27	Unrestricted net assets			1,043,928	27	88,498
Balances	28	Temporarily restricted net assets		. [200,000	28	674,200
pu	29	Permanently restricted net assets			190,000	29	140,000

Organizations that do not follow SFAS 117 (ASC 958), check here \blacktriangleright \square and

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

complete lines 30 through 34.

Total net assets or fund balances . .

Total liabilities and net assets/fund balances

902,698

30

31

32

33

34

1,433,928

2,699,265

, , , ,	2014)
ΧI	Reconcilliation of Net Assets
	Check if Schedule O contains a respo

90 (2014)
ΧI	Reconcilliation of Net Assets
	Check if Schedule O contains a respon

							_	
Net Assets								
ntains a response or note to any line in this Part XI							.	Г

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

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

If the organization changed its method of accounting from a prior year or checked "Other," explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the

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

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

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

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Total expenses (must equal Part IX, column (A), line 25) . . .

Other changes in net assets or fund balances (explain in Schedule O) .

Consolidated basis

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

Consolidated basis

Single Audit Act and OMB Circular A-133?

Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Revenue less expenses Subtract line 2 from line 1 . .

Net unrealized gains (losses) on investments . .

Donated services and use of facilities .

Investment expenses .

column (B))

Schedule O

Schedule O

Separate basis

▼ Separate basis

basis, consolidated basis, or both

Part XII

Prior period adjustments .

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

Cash Accrual Other

Both consolidated and separate basis

Both consolidated and separate basis

1 2

3

4

5

6

7

8

10

3,540,373 -531,230 1,433,928

Page **12**

3,009,143

2a

2b

2c

3a

3b

	No
Yes	
Yes	

Νo

Form 990 (2014)

902,698

Additional Data

MARKETING

Software ID:

Software Version:

EIN: 75-1804932

Name: NATIONAL CENTER FOR POLICY ANALYSIS

9,474)

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

(Code) (Expenses \$ 43,167 including grants of \$) (Revenue \$

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

DLN: 93493351003136 OMB No 1545-0047

Schedule A (Form 990 or 990-EZ)

2014

Employer identification number

75-1804932

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.

Department of the Treasury Internal Revenue Service Name of the organization

990EZ)

2

3

SCHEDULE A

NATIONAL CENTER FOR POLICY ANALYSIS

hospital's name, city, and state

section 170(b)(1)(A)(iv). (Complete Part II)

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

(Form 990 or

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.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

Open to Public Inspection

6	Г	A federal, state, or lo	cal government	or governmental unit	described in s	ection 170(b)	(1)(A)(v).					
7	Ľ	described in section 1	L70(b)(1)(A)(v	i). (Complete Part II)	-	nental unit or from the \underline{c}	general public				
8	Г	 A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross 										
9	Г	•	· ·									
				•	•		and (2) no more than 3	•				
		its support from gross	investment in	come and unrelated b	usıness taxabl	e income (less	s section 511 tax) from	businesses				
		acquired by the organ	ıızatıon after Ju	ne 30, 1975 See sec	tion 509(a)(2)	. (Complete P	art III)					
10	Г	An organization organ	nized and opera	ted exclusively to tes	t for public saf	ety See secti o	on 509(a)(4).					
11	Г	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.										
а	Г	supported organization organization You mus	on(s) the power st complete Pa	to regularly appoint o	r elect a major B.	ity of the direc	organization(s), typica tors or trustees of the	supporting				
b	Γ	management of the su must complete Part I	upporting organ	ization vested in the s	same persons	that control or	orted organization(s), l manage the supported	organization(s) You				
c	Г						h, and functionally inte	grated with, its				
	_	supported organizatio					D, and E. n with its supported org	anization(a) that is				
d	ı	not functionally integi	rated The orga	nızatıon generally mu	st satisfy a dis	tribution requi	rement and an attentiv					
_	_	(see instructions) Yo					ıs a Type I, Type II, T	uno III functionally				
е	Г	integrated, or Type II	_				is a Type I, Type II, T	ype III lulictionally				
f		Enter the number of s		, , , , , , , , , , , , , , , , , , , ,	0 0							
g		Provide the following										
	(i)N	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the or	ganızatıon	(v) A mount of	(vi) A mount of				
	organization			organization (described on lines 1-9 above or IRC section (see instructions))	listed in your governing document?		monetary support (see instructions)	other support (see instructions)				
				motractions,,	Yes	No						
Total												
For P	aner	vork Reduction Act Not	ice see the Inc	structions for Form 99	00 or 990F7	Cat No 11	285F Schedule A (Form 990 or 990-EZ)				

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.)

	Part III. If the organiza	ation fails to qua	alify under the	tests listed belo	ow, please com	<u>plete Part III.)</u>		
	ection A. Public Support							
Cal	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	in) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")			3,696,348		2,880,305	20,014,31	
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	4,453,062	3,915,121	3,696,348	5,069,477	2,880,305	20,014,31	
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 (f)						3,918,71	
6	Public support. Subtract line 5 from line 4						16,095,59	
	ection B. Total Support							
Cal	endar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) ⊤otal	
7	beginning in) ► A mounts from line 4	4,453,062	3,915,121	3,696,348	5,069,477	2,880,305	20,014,31	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	176,907	48,040	57,306	60,029	244	342,52	
9	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)					9,474	9,47	
11	Total support Add lines 7 through 10						20,366,31	
12	Gross receipts from related activiti	es, etc (see instr	ructions)			12	104,333	
13	First five years. If the Form 990 is organization, check this box and st ection C. Computation of Pul	op here	<u> </u>					
14				11, column (f))		14	79 030 %	
15	Public support percentage for 2013			, (-,,		15	90 910 %	
	33 1/3% support test—2014. If the	·		on line 12 and l	lino 14 io 22 1/20			
b	and stop here. The organization qua 33 1/3% support test—2013. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization med	alifies as a publicle organization did on qualifies as a pu — 2014. If the organtion meets the "fa	y supported orga not check a box o iblicly supported anization did not o acts-and-circums	nization on line 13 or 16a, organization theck a box on lir tances" test, che	and line 15 is 33 ne 13, 16a, or 16 eck this box and s	3 1/3% or more, cl b, and line 14 stop here. Explain	heck this	
b	organization 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. 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

▶┌

16

17

	dule A (Form 990 or 990-EZ) 2014						Page 3
Pā	Support Schedule for (Complete only if you					failed to qualify	under
	Part II. If the organiza						
	ction A. Public Support		1	T		1	ī
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that						
3	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						
5	behalf The value of services or facilities				-		
3	furnished by a governmental unit to						
_	the organization without charge						
6 7 2	Total. Add lines 1 through 5 Amounts included on lines 1, 2,						
7 a	and 3 received from disqualified						
_	persons				-		
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
Se	from line 6) ection B. Total Support					<u> </u>	
	ndar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
_	in) ► A mounts from line 6	(4) 2010	(5) 2011	(6) 2012	(4) 2013	(0) 2011	(1) 10tai
9 10a	Gross income from interest,						
104	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included						
	ın lıne 10b, whether or not the						
12	business is regularly carried on Other income Do not include						
12	gain or loss from the sale of						
	capital assets (Explain in Part						
13	VI) Total support. (Add lines 9, 10c,						
	11, and 12)						
14	First five years. If the Form 990 is for check this box and stop here	or the organizat	ion's first, second	I, third, fourth, or	fifth tax year as a	a section 501(c)((3) organization,▶ □
Se	ection C. Computation of Publi	c Support P	ercentage				
15	Public support percentage for 2014			13, column (f))		15	

18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage

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

17

Part IV Supporting Organizations

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

	I, complete Sections A and C in you checked fit of Part 1, complete Sections A, D, and E in you	u chec	.keu 11	u oi Pa
Se	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	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	3 c		
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		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Pait VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
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		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9 b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10 a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI

11c

Part IV	Supporting Organizat	ions (continued
	Supporting Organizat	ions (condinaca

				<u> </u>
Section B	Type	T Cun	nortina	Organizations

Se	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		
Se	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		
Se	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	Yes	No
1	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	1 2	Yes	No
	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? 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		Yes	No
2	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? 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) 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	2	Yes	No
2 3	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? 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) 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 ection E. Type III Functionally-Integrated Supporting Organizations	3		No
2 3	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? 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) 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 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	3		No
2 3 Se 1	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? 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). 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 **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	3		No
2 3 56 1	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? 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). 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 **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 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	2 3 instru	actions)	No
2 3 Se 1	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? 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) 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 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 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	2 3 instru	actions)	No

2	Activities Test Answer (a) and (b) below.		Yes	No
а	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			

3 Parent of Supported Organizations Answer (a) and (b) below.

organization's involvement

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3а each of the supported organizations? Provide details in Part VI
- b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each 3b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

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 Type III 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 Aggregate fair market value of all non-exempt-use assets (see		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see			
1	ınstructions for short tax year or assets held for part of year)	1		
а	A verage monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
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		

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

ii)
ii)
ii)
1117
iii) outable for 2014

Schedule A (chedule A (Form 990 or 990-EZ) 2014 Page 8						
Part VI	Part III, line 12; Part I Section B, lines 1 and 1c, 2a, 2b, 3a and 3b;	mation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part 5, and 6. Also complete this part for any additional information. (See instructions).	5				
		Facts And Circumstances Test					
R	Return Reference Explanation						
	Schedule A (Form 990 or 990-EZ) 2014						

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

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. OMB No 1545-0047

DLN: 93493351003136

SCHEDULE D

(Form 990)

rea nte	sury rnal Revenue	Information about Schedule D (Form	n 990) and its instructions is at <u>www.ir</u>	s.gov/	form990. Inspection	on
Na	me of the organi TIONAL CENTER FOR				loyer identification number	
Pa		izations Maintaining Donor Adv			1804932 or Accounts. Complete	ıf the
	OI GUIIIZ	action answered Tes to Form 950	(a) Donor advised funds		(b) Funds and other account	:S
L	Total number at	t end of year				
2	Aggregate valu	e of contributions to (during year)				
3	Aggregate valu	e of grants from (during year)				
1	Aggregate valu	e at end of year				
5		ation inform all donors and donor advisor rganization's property, subject to the or		nor advı	sed Yes	┌ No
5	used only for c	ation inform all grantees, donors, and donaritable purposes and not for the benefermissible private benefit?				┌ No
Pa	rt III Conse	rvation Easements. Complete ıf	the organization answered "Yes" t	to Forn	n 990, Part IV, line 7.	
L	Purpose(s) of c	conservation easements held by the org	anızatıon (check all that apply)			
	Preservati education)	on of land for public use (e g , recreation		n histo	rically important land area	
	Protection	of natural habitat	Preservation of a	certifie	ed historic structure	
	Preservati	on of open space				
2		2a through 2d if the organization held a ne last day of the tax year	a qualified conservation contribution in	the forn	n of a conservation	
					Held at the End of the Y	ear
а		f conservation easements		2a		
b	_	restricted by conservation easements		2b		
С		servation easements on a certified histo	, ,	2c		
d	historic structu	servation easements included in (c) acquire listed in the National Register		2d		
3		servation easements modified, transferr	ed, released, extinguished, or terminat	ed by th	ne organization during	
	the tax year ▶_					
1	Number of stat	es where property subject to conservati	ion easement is located ▶			
5		nization have a written policy regarding t the conservation easements it holds?	the periodic monitoring, inspection, han	ıdlıng of	violations, and Yes	┌ No
5	Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	luring the year	
7	A mount of expe	enses incurred in monitoring, inspecting	, and enforcing conservation easement	s during	g the year	
	▶ \$					
3	Does each con and section 17	servation easement reported on line 2(o 0(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(I) Yes	┌ No
9	balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the n's accounting for conservation easeme	e footnote to the organization's financia			
ar	t III Organi	izations Maintaining Collection etc if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar Assets.	
La	works of art, his	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	arch in furtherance of public	
b	works of art, his	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e the following amounts relating to thes	ts held for public exhibition, education,			
	(i) Revenue ind	cluded in Form 990, Part VIII, line 1			▶ \$	
	(ii) Assets incl	luded in Form 990, Part X			▶ \$	
2	If the organizat	tion received or held works of art, histor nts required to be reported under SFAS			•	-

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Pari	Organizations Maintaining Co	llections of Art	, His	toric	al Treas	ures, or Ot	her	Similar Asse	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds,ch	neck a	ny of the fo	llowing that a	re a s	ignificant use of	ıts	
а	Public exhibition		d		Loan or e	xchange progr	ams			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	w they	further the	organization'	s exe	mpt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								Yes	┌ No
Pai	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	ete ıf	the o	rganızatı			s" to Form 990	,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interme	dıary	for co	ntributions	or other asse	ets no		Yes	∏ N o
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving ta	ble			Amou	nt	
c	Beginning balance					1	c			
d	Additions during the year					1	d			
e	Distributions during the year					1	e			
f	Ending balance					1	f			
2 a	Did the organization include an amount on Fo	orm 990. Part X. line	e 21.	for es	crow or cus	ــــ todial accoun	t lıab	olity?	Yes	
b	If "Yes," explain the arrangement in Part XII							,		
Pa	rt V Endowment Funds. Complete									
1-	Reginning of year halance	(a)Current year	(b	Prior y	ear b (c	Two years back	(d)∏	hree years back (e)Four ye	ears back
1a b	Beginning of year balance	2,060,060								
c	Net investment earnings, gains, and losses	2,000,000								
ī		15,031								
d	Grants or scholarships									
е	Other expenditures for facilities and programs	1,260,891								
f	Administrative expenses									
g	End of year balance	814,200								
2	Provide the estimated percentage of the cur	rent year end baland	e (lır	ne 1g,	column (a)) held as				
а	Board designated or quasi-endowment >	0 %								
b	Permanent endowment ► 17 200 %									
c	Temporarily restricted endowment ► 82 8 The percentages in lines 2a, 2b, and 2c show	810 % uld equal 100%								
За	Are there endowment funds not in the posses	ssion of the organiza	ation	that a	e held and	administered	for tl	he		
	organization by							5.0	Yes	No
	(i) unrelated organizations						•	3a(i)		No No
b	(ii) related organizations							3b		110
4	Describe in Part XIII the intended uses of the	•								<u> </u>
Pai	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he o	rganı	zation ans	swered 'Yes'	to F	orm 990, Part	IV, lır	ne
	Description of property				Cost or othe			(c) Accumulated depreciation	(d) Bo	ook value
	Land									
	Buildings									
	Leasehold improvements					235	,204	32,667		202,537
	Equipment					1,131	•	932,958		198,090
	Other		•	<u> </u>	· · · · · ·				<u> </u>	
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part 2	x, colu	ımn (B), IIne 10(c,	"		> Schedule D (F	orm o	400,627
								Schedale D (L	J. 111 3	, 2017

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		,
(2)Closely-held equity interests		
Other		
		+
,,,,,,,,	•	
	mplete if the organization	n answered 'Yes' to Form 990, Part IV, line 11
See Form 990, Part X, line 13.	1	T
(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
		<u> </u>
10111 (00111111 (0) 111111 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	•	
Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 990), Part IV, line 11d See Form 990, Part X, line 15
Part IX Other Assets. Complete if the organization (a) Descri	n answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organization (a) Descri	n answered 'Yes' to Form 990	(b) Book value
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Part IX Other Assets. Complete if the organization (a) Descri	n answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organization (a) Descri (1) ADVANCE DUE FROM EMPLOYEE (2) INSURANCE RECEIVABLE	n answered 'Yes' to Form 990 ption	(b) Book value
Part IX Other Assets. Complete if the organization (a) Descri (1) ADVANCE DUE FROM EMPLOYEE (2) INSURANCE RECEIVABLE Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization	n answered 'Yes' to Form 990 ption	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization (b) Part X, line 25.	n answered 'Yes' to Form 990 ption 5) ninzation answered 'Yes' to	(b) Book value 22 158,50
Part IX Other Assets. Complete if the organization (a) Descri (1) ADVANCE DUE FROM EMPLOYEE (2) INSURANCE RECEIVABLE Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization of the property of the part X, line 25.	n answered 'Yes' to Form 990 ption	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization (a) Description of liability	n answered 'Yes' to Form 990 ption 5) ninzation answered 'Yes' to	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes	n answered 'Yes' to Form 990 ption 5) ninzation answered 'Yes' to	(b) Book value 22 158,50
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Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Other Liabilities Complete if the organization (a) Description of liability Federal income taxes CAPITAL LEASE OBLIGATION DEFERRED RETIREMENT OBLIGATION	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50
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Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes CAPITAL LEASE OBLIGATION DEFERRED RETIREMENT OBLIGATION	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes CAPITAL LEASE OBLIGATION DEFERRED RETIREMENT OBLIGATION	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes CAPITAL LEASE OBLIGATION DEFERRED RETIREMENT OBLIGATION	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes CAPITAL LEASE OBLIGATION DEFERRED RETIREMENT OBLIGATION	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Assets. Complete if the organization (a) Description (a) Description (b) Description (c) INSURANCE RECEIVABLE Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25.	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50
Total. (Column (b) must equal Form 990, Part X, col (B) line 19 Part X Other Liabilities. Complete if the organization Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes CAPITAL LEASE OBLIGATION DEFERRED RETIREMENT OBLIGATION	n answered 'Yes' to Form 990 ption 5) nization answered 'Yes' to form 990 ption (b) Book value 33,954 239,733	(b) Book value 22 158,50

Fell		wered 'Yes' to Form 990, Part IV, line 12a.	erk	eturn Complete II
1	Total revenue, gains, and other	er support per audited financial statements	1	3,013,255
2	Amounts included on line 1 bu	ut not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses)	on investments 2a		
b	Donated services and use of f	facilities 2b 4,112		
c	Recoveries of prior year grant	s 2c		
d	Other (Describe in Part XIII)) 2d		
e	Add lines 2a through 2d .		2e	4,112
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	3,009,143
4	Amounts included on Form 99	00, 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)) 4b		
c	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line 12)	5	3,009,143
Par		xpenses per Audited Financial Statements With Expenses	per	Return. Complete
	-	nswered 'Yes' to Form 990, Part IV, line 12a.		2.544.405
1		r audited financial statements	1	3,544,485
2		at not on Form 990, Part IX, line 25		
a		acilities		
b	Prior year adjustments			
с				
d	Other (Describe in Part XIII)		_	
e	5		2e	4,112
3 4			3	3,540,373
		luded on Form 990, Part VIII, line 7b 4a		
a	·			
b	,		4-	
С -	Add lines 4a and 4b	<u> </u>	4c	2 540 272
5 Par	t XIII Supplemental Inf	nd 4c. (This must equal Form 990, Part I, line 18)	5	3,540,373
		r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,		
Part		, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
PART	X, LINE 2	NCPA IS GENERALLY EXEMPT FROM FEDERAL INCOME TAX UNDER STHE IRC, AS AN ORGANIZATION OTHER THAN A PRIVATE FOUNDAT A COMPREHENSIVE MODEL FOR THE FINANCIAL STATEMENT RECOMEASUREMENT, PRESENTATION, AND DISCLOSURE OF UNCERTAIN TAKEN OR EXPECTED TO BE TAKEN IN INCOME TAX RETURNS MAN THAT IT HAS NOT TAKEN A TAX POSITION THAT, IF CHALLENGED, MATERIAL EFFECT ON THE NCPA'S FINANCIAL STATEMENTS NCPAUNITED STATES FEDERAL JURISDICTION WITHIN THE UNITED STARETURNS ARE CURRENTLY UNDER EXAMINATION BY ANY TAX AUTHORS.	TION GNIT IN T AGEI WOU FILE TES	GAAP PRESCRIBES FION, AX POSITIONS MENT BELIEVES LD HAVE A ES FORM 990 IN THE AND NO TAX

chedule D (Form 990) 2013	Page 5	
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	

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OMB No 1545-0047

Schedule J

(Form 990)

Treasury

Department of the

Internal Revenue

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

Service Name of the organization **Employer identification number** NATIONAL CENTER FOR POLICY ANALYSIS 75-1804932 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1h Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ✓ Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 42 Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo Any related organization? 5b Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? **6**a Νo Any related organization? 6h Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Schedule J (Form 990) 2014

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		compensation incentive reporta		(III) Other reportable compensation	le compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990	
1 RICHARD WALKER, INTERIM COO	(i) (ii)	17.5.1	150,334	0	0	0	0	150,334	0
		0	0	0	0	0	0	0	

Page 2

Schedule J (Form 990) 2014	Chedule 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 addition	al information		
Return Reference	Explanation		

Schedule J (Form 990) 2014

OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ (Form 990 or 2014 990-EZ) Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Open to Public Department of the Inspection ▶ Attach to Form 990 or 990-EZ. Treasurv ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Internal Revenue www.irs.gov/form990. Service Name of the organization **Employer identification number** NATIONAL CENTER FOR POLICY ANALYSIS 75-1804932 Return Explanation Reference FORM 990. DURING THE TAX YEAR ENDED SEPTEMBER 30, 2015, A FORMER EMPLOYEE OF THE ORGANIZATION EMBEZZLED FUNDS PART VI. INCLUDING CASH, INVESTMENTS, AND UNAUTHORIZED CREDIT CARD CHARGES THE TOTAL AMOUNT OF THESE LOSSES SECTION A. FOR THE YEAR ENDED SEPTEMBER 30, 2015, WAS APPROXIMATELY \$395,000 DUE TO INHERENT UNCERTAINTY IN THE LINE 5 PRELIMINARY STAGE OF THIS CASE, THE ORGANIZATION CANNOT ACCURATELY PREDICT THE OUTCOME OR RECOVERY OF LOSSES OF APPROXIMATELY \$237,000 THIS AMOUNT HAS BEEN RECORDED AS EMBEZZLEMENT EXPENSE ON THE STATEMENT OF FUNCTIONAL EXPENSES THE REMAINDER OF APPROXIMATELY \$158,000, HAS BEEN RECORDED AS INSURANCE RECEIVABLE ON THE ORGANIZATION'S STATEMENT OF FINANCIAL POSITION AT SEPTEMBER 30, 2015, AS THIS AMOUNT WAS RECEIVED BY THE ORGANIZATION FROM ITS INSURANCE CARRIER IN APRIL 2016 ALTHOUGH THERE WAS A SIGNIFICANT DIVERSION OF THE ORGANIZATION'S ASSETS, THE ORGANIZATION DID NOT BECOME AWARE OF THIS

DIVERSION DURING THE CURRENT TAX YEAR ENDED SEPTEMBER 30, 2015

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Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE ACCOUNTING DEPARTMENT, ALONG WITH THE OFFICERS, REVIEWED FORM 990 BEFORE FILING

Return Reference	Explanation
FORM 990.	THE CONTROLLER REQUESTS A COMPENSATION SURVEY FROM AN OUTSIDE SOURCE AND THEN REVIEWS THE 990'S
PART VI,	FROM SIMILAR ORGANIZATIONS FOR COMPARISON PURPOSES THIS INFORMATION IS COMPILED AND GIVEN TO THE
SECTION B,	COMPENSATION COMMITTEE ALONG WITH CURRENT AND SUGGESTED COMPENSATION AMOUNTS. THE COMPENSATION
LINE 15	COMMITTEE REVIEWS THE INFORMATION AND MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS THE BOARD
	OF DIRECTORS APPROVES THE FINAL COMPENSATION THE BOARD OF DIRECTORS INCLUDES THE PRESIDENT OF NCPA,
	BUT THE POSITION IS NON-VOTING ON ALL MATTERS

Return Reference	Explanation
FORM 990, PART VI,	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS OWN WEBSITE
SECTION C, LINE 19	OTHER DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION'S OVERSIGHT PROCESS OF THE AUDIT HAS NOT CHANGED FROM THE PRIOR YEAR

Return Explan Reference	n
FORM S AMEND RETURN	PROCR TO A USUST 15, 2016, THE EXTENDED DUE DATE TO FILE FORM 990 FOR THE 2014 TAX YEAR. THE ORGANIZATION WAS IN THE PROCESS OF DETAINING A SEPARATE, INDEPENDENT AUDIT FOR ITS FINAN ICAL STATEMENTS FOR THEY PARE PUDGED SEPTEMBER 30, 2015 DUE TO UNFORSEEN CIRLINGTANCES, THE AUDIT WAS NOT COMPLETED PRIOR TO THE 2014 FORM 990 DUE DATE THIS TAX RETURN HAS BEEN AMEN DED TO REFLECT THE SEPARATE, INDEPENDENT AUDITED RINANGLA, STATEMENTS FOR THEY YEAR ENDED S PTEMBER 30, 2015 THIS RETURN IS BEING AMENDED TO REFLECT THE FOLLOWING CHANGES FORM 990, PART III LINE ALONG THE SEPARATE AND PUBLICATIONS. THE AMENDED RETURN REPORTS S 1, 984, 482 OF PROGRAM SERVICE EXPENSES AND \$23 OF PROGRAM SERVICE REVENUE FOR RESEARCH AND PUBLICATIONS. THE AMENDED RETURN REPORTS \$1, 984, 482 OF PROGRAM SERVICE EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES FOR INTERNET SERVICES. THE AMENDED RETURN REPORTS \$345,177 OF PROGRAM SERVICE EXPENSES IN EAD ORGANIZED AND \$20 OF PROGRAM SERVICE EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES FOR INTERNET SERVICES. THE AMENDED RETURN REPORTS \$343,167 OF PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES THE AMENDED RETURN REPORTS \$32,815,741 OF TOTAL PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES OF INTERNET SERVICES EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES AND \$20 OF PROGRAM SERVICE EXPENSES AND \$20 OF PROGRA

Return Reference	Explanation	
	FORM 990 - AMENDED RETURN	D ON SCHEDULE O WHERE NECESSARY FORM 990, SCHEDULE A, PART II SECTION A, LINE 1, COLUMN E ORIGINALLY REPORTED \$2,394,921 OF CONTRIBUTIONS THE AMBNDED RETURN REPORTS \$2,880,305 SECTION A, LINE 5 ORIGINALLY REPORTED \$3,563,136 OF EXCESS CONTRIBUTIONS THE AMBNDED RETURN REPORTS \$3,918,718 SECTION B, LINE 3, COLUMN E ORIGINALLY REPORTED \$176,621 OF INVESTMENT INCOME THE AMBNDED RETURN REPORTS \$244 SECTION B, LINE 10, COLUMN E ORIGINALLY REPORTED \$176,621 OF INVESTMENT INCOME THE AMBNDED RETURN REPORTS \$244 SECTION B, LINE 11,0, COLUMN E ORIGINALLY REPORTED \$49,032 OF GROSS RECEIPTS FROM RELATED ACTIVITIES THE AMBNDED RETURN REPORTS \$104,333 AS A RESULT OF THE AMBNDEDED RETURN REPORTS \$104,333 AS A RESULT OF THE AMBNDMENTS TO SCHEDULE A, PART II, SECTIONS A AND B, THE PUBL IC SUPPORT PERCENTAGE FOR 2014 REPORTED ON SECTION C, LINE 14 CHANGED FROM 79 60% TO 79 03 % FORM 990, SCHEDULE B, PART I IT HE ORGANIZATION REPORTS THE INFORMATION OF CONTRIBUTIONS THAT GAVE MORE THAN 2% OF TOTAL CONTRIBUTIONS REPORTED ON FORM 990, PART VIII, LINE 1H BEC AUSE IT IS A PUBLIC CHARRY UNDER SECTIONS 509(A)(1) AND 170(B)(1)(A)(V)) 2% OF TOTAL CONTRIBUTIONS PER THE AMBNDED RETURN EQUALS \$57,606 AS A RESULT OF AMBNDMENTS TO THE FORM 990 AND THE CHANGE IN EMPORTED ON THE ORIGINALLY FILED FORM 990 EQUALLE 547,888 2% OF TOTAL CONTRIBUTIONS PER THE AMBNDED RETURN EQUALS \$57,606 AS A RESULT OF AMBNDMENTS TO THE FORM 990 AND THE CHANGE IN LIPPACE OF THE AMBNDED RETURN REPORTS \$2,060,060 LINE 10 ORIGINALLY REPORTED \$1,76,521 OF NET INVESTMENT EARNINGS THE AMBNDED RETURN REPORTS \$2,060,060 LINE 10 ORIGINALLY REPORTED \$1,76,521 OF NET INVESTMENT EARNINGS THE AMBNDED RETURN REPORTS \$1,260,891 LINE 2B OR RIGINALLY REPORTED \$1,514,873 OF OTHER EXPENDITURES THE AMBNDED RETURN REPORTS \$1,260,891 LINE 2B OR RIGINALLY REPORTED \$1,514,873 OF OTHER EXPENDITURES THE AMBNDED RETURN REPORTS \$1,260,891 LINE 2B OR RIGINALLY REPORTED \$1,504,873 OF OTHER EXPENDITURES THE AMBNDED RETURN REPORTS \$1,260,891 LINE 2B OR RIGINALLY PLIED SCHEDULE DOWNERS THE AMBNDED R