efile	e GRA	PHIC print - DO NOT PROCESS As Filed Data -		DLN	: 93493190000184					
(990	Return of Organization Exempt From I	ncome ⁻	Гах	OMBN0 1545-0047					
orm	53(Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private							
	ent of the Ti	foundations) Foundations Foun	de public By	law, the IRS	2013 Open to Public					
	Revenue Se	generally cannot reduct the information on the	form		Inspection					
Foi	the 20	13 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31								
	ck if app	C Name of organization	-2015	D Employer	identification number					
_	ress char	ROBERT F KENNEDY CENTER FOR JUSTICE		13-2522	784					
Nan	ne chang	e Doing Business As		10 2022						
Inıtı	al return	Number and street (or P O box if mail is not delivered to street address) Room/suite	2	E Telephone r	umbor					
Terr	nınated	1300 19TH STREET NW NO 750								
Ame	ended ret			(202)46:	3-/5/5					
Арр	lication p	WASHINGTON, DC 20036 ending		G Gross receip	ots \$ 11,877,786					
		F Name and address of principal officer	H(a) Is th	s a group ret	urn for					
		JOHN ZURICK 1300 19TH STREET NW NO 750	subo	rdınates?	┌ Yes 🔽 No					
		WASHINGTON, DC 20036	H(b) Area	II subordinate	es ┌ Yes┌No					
—			inclu	ded?						
	-exempt		1f "N	o," attach a li	st (see instructions)					
We	ebsite:	WWW RFKCENTER ORG	H(c) Grou	ıp exemption	number 🕨					
Form	ı of orgaı	nization 🔽 Corporation 🗌 Trust 🗌 Association 🗍 Other 🕨	L Year of fo	rmation 1968	M State of legal domicile D					
Pa	τI	Summary								
	2 CH	neck this box 🏹 if the organization discontinued its operations or disposed of	more than 2	5% of its net	assets					
		neck this box 🍯 if the organization discontinued its operations or disposed of umber of voting members of the governing body (Part VI, line 1a)		I.	1					
	3 Nu 4 Nu	umber of voting members of the governing body (Part VI, line 1a)			3 32 4 29					
	3 Nu 4 Nu 5 To	umber of voting members of the governing body (Part VI, line 1a)	· · ·		3 32 4 29 5 36					
	3 Nu 4 Nu 5 To 6 To	umber of voting members of the governing body (Part VI, line 1a)	· · · ·		3 32 4 29 5 36 6 56					
	3 Νι 4 Νι 5 Το 6 Το 7α Το	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary)	· · · ·	· · · ·	3 32 4 29 5 36 6 56 'a 0					
	3 Νι 4 Νι 5 Το 6 Το 7α Το	umber of voting members of the governing body (Part VI, line 1a)	· · · ·	· · · ·	3 32 4 29 5 36 6 56 'a 0					
	 3 Nu 4 Nu 5 To 6 To 7a To b Ne 	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary)	· · · ·	· · · · ·	3 32 4 29 5 36 6 56 'a 0 'b 0 Current Year					
	 3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	· · · ·	• • • • • • • • • • • • • • • • • • •	3 32 4 29 5 36 6 56 7a 0 Current Year 6,534,353 77,131					
	 3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 	umber of voting members of the governing body (Part VI, line 1a)	· · · ·	• • • • • • • • • • • • • • • • • • •	3 32 4 29 5 36 6 56 7a 0 7b 0 Current Year 6,534,353 77,131 80,529					
	 3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 	umber of voting members of the governing body (Part VI, line 1a)	· · · ·	• • • • • • • • • • • • • • • • • • •	3 32 4 29 5 36 6 56 'a 0 'b 0 Current Year 6,534,353 77,131 80,529					
	 3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 	umber of voting members of the governing body (Part VI, line 1a)	· · · ·	• • • • • • • • • • • • • • • • • • •	3 32 4 29 5 36 6 56 7a 0 7b 0 Current Year 6,534,353 77,131 80,529 2,480,241					
	 3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 	umber of voting members of the governing body (Part VI, line 1a)	· · · ·		3 32 4 29 5 36 6 56 7a 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14	umber of voting members of the governing body (Part VI, line 1a)	· · · ·	• • • • • • • • • • • • • • • • • • •	3 32 4 29 5 36 6 56 7a 0 7b 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15	umber of voting members of the governing body (Part VI, line 1a)	· · · ·		3 32 4 29 5 36 6 56 7a 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 0					
	 Nu Nu To To To To To To To Ne 	umber of voting members of the governing body (Part VI, line 1a)	· · · ·		3 32 4 29 5 36 6 56 'a 0 'b 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 0 3,170,798					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15 16a	umber of voting members of the governing body (Part VI, line 1a)	· · · ·		3 32 4 29 5 36 6 56 7a 0 7b 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 0 3,170,798 0					
	 Nu Nu To To To To Ne 8 9 10 11 12 13 14 15 16a b 17	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	· · · ·		3 32 4 29 5 36 6 56 'a 0 'b 0 Current Year 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 3,170,798 300,396					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15 16a b 17 18	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	· · · ·		3 32 4 29 5 36 6 56 7a 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 0 3,170,798 300,396 4,087,774 7,717,507					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15 16a b 17 18	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)			3 32 4 29 5 36 6 56 'a 0 'b 0 Current Year 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 3,170,798 300,396 4,087,774 7,717,507					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15 16a b 17 18	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			3 32 4 29 5 36 6 56 7a 0 7b 0 Current Year 0 6,534,353 77,131 80,529 2,480,241 9,172,254 158,539 0 3,170,798 300,396 4,087,774 4,087,774 7,717,507					
	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15 16a b 17 18 19	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) . otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12 et unrelated business taxable income from Form 990-T, line 34 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) Other revenue (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			3 32 4 29 5 36 6 56 /a 0 /b 0 Current Year 6,534,353 77,131 80,529 2,480,241 9,172,254 9,172,254 158,539 0 0 3,170,798 300,396 4,087,774 7,717,507 1,454,747 1,454,747 End of Year 1					
Fund Baances EXD Anses Hevenue	3 Nu 4 Nu 5 To 6 To 7a To b Ne 8 9 10 11 12 13 14 15 16a b 17 18 19	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2013 (Part V, line 2a) otal number of volunteers (estimate if necessary)			3 32 4 29 5 36 6 56 7a 0 Current Year 0 Current Year 6,534,353 77,131 80,529 2,480,241 9,172,254 9,172,254 158,539 0 0 3,170,798 300,396 4,087,774 7,717,507 1,454,747 1,454,747 End of Year 8,495,263					

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

Sign Here) Sig	**** Inature of officer HN ZURICK COO pe or print name and title							
Daid		Print/Type preparer's name YUNG-HEE GALLINARO	Preparer's signature						
Paid Prepare	r	Firm's name FCLIFTONLARSONALLEN L	LP						
Use Only		Firm's address Þ 4250 N FAIRFAX DRIVE SUITE 1020							
		ARLINGTON, VA 22203							
May the IRS discuss this return with the preparer shown above? (see instruc									

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

For Paperwork Reduction Act Notice, see the separate instructions.

	n 990 (2013)	Page 2
Par	till Statement of Program Service Accomplishments Check If Schedule O contains a response or note to any line in this Part III	ম
1	Briefly describe the organization's mission	· · · ·
THA INSF ROB THA HUM	ERT F KENNEDY BOLDLY FACED TOUGH PROBLEMS AND CHALLENGED THE COMFORTABLE AND COMPL T INDIVIDUAL ACTION COULD OVERCOME INJUSTICE AND OPPRESSION HE AWAKENED UNKNOWN S PIRED A GENERATION TO CHANGE THE WORLD ESTABLISHED IN 1968 BY FRIENDS AND FAMILY OF RO ERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS (THE "CENTER") IS A NONPROFIT CHARIT, T FOR OVER THREE DECADES HAS FURTHERED THE VISION AND SPIRIT OF ROBERT KENNEDY BY ADV IAN RIGHTS AND SOCIAL JUSTICE FOR ALL PEOPLE AND PROMOTING THE IDEA THAT INDIVIDUAL AC ERENCE THROUGH COMMITMENT TO CIVIC AND COMMUNITY AFFAIRS	TRENGTHS AND BERT KENNEDY, THE ABLE ORGANIZATION ANCING RESPECT FOR
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	└ Yes \ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	∏Yes ☑No
4	Describe the organization's program service accomplishments for each of its three largest program services, a expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloc the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 1,648,820 including grants of \$ 78,494) (Revenue \$	0)
	PARTNERS FOR HUMAN RIGHTS (FORMERLY ROBERT F KENNEDY CENTER FOR HUMAN RIGHTS)- FORGES STRONG SIX YEAR PARTNI HUMAN RIGHTS ACTIVISTS- THE ANNUAL RECIPIENTS OF THE RFK HUMAN RIGHTS AWARD - TO ADVANCE LONG TERM, SYSTEMIC CH WHERE THE LAUREATES ARE FIGHTING TO PROTECT HUMAN RIGHTS SINCE 1984, PHR HAS WORKED WITH 45 LAUREATES FROM 27 STRATEGIC AND INNOVATIVE ADVOCACY TOOLS TO ACHIEVE SOCIAL JUSTICE GOALS, EFFECT POLICIES AND PRACTICES, BUILD CAPAC AND BRING UNDEREXPOSED ABUSES AND PROBLEMS TO INTERNATIONAL ATTENTION PHR WORK ALSO INCLUDES A JUVENILE JUSTIC CHAMPION MORE EFFECTIVE POLICIES AND SERVICES FOR AT RISK AND ADJUDICATED YOUTH IN THE U S	ANGE IN COMMUNITIES COUNTRIES, USING CITY, INCREASE AWARENESS
4b	(Code) (Expenses \$ 1,481,199 including grants of \$ 13,142) (Revenue \$	14,899)
	SPEAK TRUTH TO POWER (STTP) IS A MULTI-FACETED PROJECT THAT INCREASES AWARENESS OF HUMAN RIGHTS THROUGH INSPIR MEN AROUND THE WORLD WHO STAND UP TO OPPRESSION AT GREAT PERSONAL RISK IN THE PURSUIT OF HUMAN RIGHTS THE PRO KERRY KENNEDY "SPEAK TRUTH TO POWER HUMAN RIGHTS DEFENDERS WHO ARE CHANGING OUR WORLD" THAT IS PUBLISHED IN EXHIBITION OF 50 PHOTOGRAPHS BY PULITZER PRIZE-WINNING PHOTOGRAPHER EDDIE ADAMS, A THEATRICAL PERFORMANCE OF "S VOICES FROM BEYOND THE DARK" THAT CONTINUES TO TOUR WORLDWIDE, A WEBSITE, EDUCATIONAL OUTREACH PROGRAMS AND DISTRIBUTION OF HUMAN RIGHTS EDUCATIONAL MATERIALS WHICH HAVE GONE TO OVER 100,000 STUDENTS STTP SEEKS EDUCATI TEACHERS' ORGANIZATIONS AND UNIONS, FOUNDATIONS AND EDUCATION OFFICIALS, SUCH AS THE JOINT PROJECT WITH THE NEW TEACHERS, TO BRING THE CURRICULUM TO MORE CLASSROOMS IT IS CONTINUALLY EXPANDING ITS REACH IN THE US AND ABROAD EXPANSIONS INCLUDE CANADA, LOS ANGELES, CHICAGO, OHIO, VIRGINIA, SWEDEN AND CAMBODIA A NEW MODEL, TRAINING LAW S LOWER SCHOOLS WAS LAUNCHED IN PARTNERSHIP WITH WASHINGTON COLLEGE OF LAW CURRICULA ARE ADDED AND UPDATED TO SOCIAL ISSUES SUCH AS BULLYING, OFFERING IDEAS RESOURCES TO IMPLEMENT CHANGE THE CENTER IS LAUNCHING A NEW BULLY AS PART OF THE STTP EDUCATION PROJECT	DECT INCLUDES A BOOK BY SEVERAL LANGUAGES, AN PEAK TRUTH TO POWER THE CONTINUED ONAL PARTNERS SUCH AS YORK STATE UNIFIED O RECENT AND PLANNED TUDENTS TO TEACH STTP IN ADDRESS CONTEMPORARY
4 c	(Code) (Expenses \$ 1,512,141 including grants of \$) (Revenue \$	51,479)
	RFK COMPASS PROGRAM (COMPASS)- CONVENES LEADING FIDUCIARIES DEDICATED TO CREATING LONG-TERM ECONOMIC VIABILITY AND RESPONSIBLE BUSINESS PRACTICES COMPASS PROVIDES A UNIQUE PLATFORM FOR DISCUSSION OF STRUCTURAL ECONOMIC IN ENVIRONMENTAL ISSUES, SOCIAL RESPONSIBILITY, WORKERS' RIGHTS, AND CORPORATE GOVERNANCE AS CRUCIAL ELEMENTS OF RI- RETURN OPTIMIZATION THE MAIN PURPOSE OF THE CONFERENCES IS TO INCREASE AWARENESS OF SUSTAINABLE INVESTING PRINC INVESTORS AND TO PRESS FOR THE INCLUSION OF SUSTAINABILITY CRITERIA IN INVESTMENT AND BUSINESS PRACTICES TO FURTH RFK CENTER IS LAUNCHING THE COMPASS EDUCATION INITIATIVE IN SUSTAINABLE INVESTING, DESIGNED TO ADD A CONTENT DEVE THE COMPASS OFFERING THE FIRST COURSE WILL BE PRESENTED IN THE FALL OF 2013 IN ALLIANCE WITH COLUMBIA UNIVERSITY WILL INTEGRATE FULLY WITH COMPASS AND RFK-TI, AND PARTNER WITH LEADING ACADEMICS AND INDUSTRY EXPERTS TO PROVIDI RESOURCE THAT WILL INCLUDE CURRICULUM DELIVERY, AS WELL AS ONLINE RESOURCES AND RELEVANT PUBLICATIONS	MBALANCES, HUMAN RIGHTS, SK MANAGEMENT AND CIPLES AMONG LONG-TERM ER THESE OBJECTIVES, THE LOPMENT COMPONENT TO THE EDUCATION INITIATIVE
	(Code) (Expenses \$ 156,267 including grants of \$ 12,050) (Revenue \$	25,652)
	SPECIAL PROGRAMS THE BOOK AND JOURNALISM AWARDS HONOR AUTHORS AND JOURNALISTS FOR EXCELLENCE IN REPORTING AN CONCERN TO ROBERT KENNEDY - HUMAN RIGHTS, SOCIAL JUSTICE, CIVIL RIGHTS, THOSE WHO ARE MAKING A DIFFERENCE	ID WRITING ON ISSUES OF
	(Code) (Expenses \$ 78,407 including grants of \$) (Revenue \$ JUVENILE JUSTICE COLLABORATIVE PARTNERING WITH THE RFK CHILDREN'S ACTION CORPS IN BOSTON, THE COLLABORATIVE COM OF THE RFK CENTER WITH THE DIRECT SERVICE EXPERIENCE AND BEST PRACTICES OF THE ACTION CORPS TO INCREASE NATIONAL JUSTICE ISSUES, SPECIFICALLY FOCUSING ON THE NEEDS OF YOUTH RE-ENTERING THEIR COMMUNITIES AFTER PERIODS OF CONFI OUT-OF-HOME PLACEMENT THE COLLABORATIVE BRINGS THE VOICE OF THE IMPACTED YOUTH TO ADVOCACY AND EDUCATES DECIS IMPORTANCE OF EFFECTIVE POLICIES AND RESOURCES TO SUPPORT THE RE-ENTERING YOUTH AVAILABILITY OF EDUCATION, JOB T PLAY KEY ROLES IN THE SUCCESS OF YOUTH TRYING TO TRANSITION TO INDEPENDENCE AND SHOULD BE PART OF ANY COMPREHEN JUVENILE JUSTICE ISSUES	ATTENTION ON JUVENILE VEMENT, INCARCERATION, OR ION MAKERS ABOUT THE RAINING, AND HOUSING ALL
	(Code) (Expenses \$ 344,632 including grants of \$) (Revenue \$)
	COMMUNICATIONS EXPOSES A WIDER AUDIENCE TO GLOBAL HUMAN RIGHTS ISSUES AND ENGAGES THEM WITH THE WORK OF THE CONSTITUENTS, DONORS AND ALL INTERESTED PARTIES INFORMED AND UPDATED ON HUMAN RIGHTS ISSUES AND ENCOURAGES TH OUTREACH IS ACCOMPLISHED THROUGH INTERNATIONAL PRINT AND BROADCAST MEDIA, BLOGS, PRESS RELEASES, SOCIAL MEDIA, T ELECTRONIC UPDATES, VARIOUS PRINTED MATERIALS AND CALLS TO ACTION	EM TO TAKE ACTION
	(Code) (Expenses \$ 207,422 including grants of \$ 54,853) (Revenue \$ RFK EUROPE)
4d	Other program services (Describe in Schedule O) (Expenses \$ 786,728 including grants of \$ 66,903) (Revenue \$	25,652)
4e	Total program service expenses ► 5,428,888	
		Form 990 (2013)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕲	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	Yes	
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	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	
	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
	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? <i>If "Yes," complete Schedule D, Part VIII</i> 🔀	11c		No
	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 😨	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🔂	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 🔞	15	Yes	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i> 🔞	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 (see instructions)</i>	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "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
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Form 990 (2013)

20Ь

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \cdot .	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔞	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Dıd the organızatıon lıquıdate, termınate, or dıssolve and cease operations? <i>If "Yes," complete Schedule N,</i> Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99) (2013)

	990 (2013)			Page 5
Pa	t 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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 37			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c		
2a	gaming (gambling) winnings to prize winners?			
	Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
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)	2Ь	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country P SW			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
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?			
_		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? \ldots . \ldots	7b	Yes	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g		
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the 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	-		
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	120		
13	year	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
Ь	Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans	-		
		 		 NI
	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		I

orm	990 (2013)			Page 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chang See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI	•	•••	ন
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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			<u> </u>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
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	15a	Yes	
b	O ther 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?	16a		No
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?			
~		16b		
	ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AL , AK , AZ , AR , CA , CT , FL , GA , IL MA , MI , MN , MS , NH , NJ , NM , NY , I OR , DA , D	NC,N	D,OH,	
	OR, PA, RI, SC, TN, UT, VA, WA, V	/v , WI		

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website V Upon request Other (explain in Schedule O)

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►BRIGETTE WALLACE 1300 19TH STREET NW SUITE 750 WASHINGTON, DC 20036 (202) 463-7575

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organızatıons below dotted lıne)	Individual trustaa or dilector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organızatıon and related organızatıons
										Form 990 (2013)

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W- 2/1099-MISC)	v-	(F) Estima amount o compens from t organizati	ated fother sation :he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated emptoyee	Former	2/1099-1130) 2/1		2/1033-MISC	, d	relat. organiza	ed
												_		
1b	Sub-Total							 ►						
c	Total from continuation sheet	s to Part VII, S	ection /	۰ ۹.	·.		•							
d	Total (add lines 1b and 1c) .							•		1,031,570		0		129,610
2	Total number of individuals (in \$100,000 of reportable compo						d abov	e) w	ho receive	ed more th	ian			
													Yes	No
3	Did the organization list any f e on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	, or highes	t compen	sated employee	3		No
4	For any individual listed on lin organization and related organ individual	e 1a, is the sum izations greater	of repo than \$	rtabl 150,0	e co 000	mpe ? <i>If</i> •	nsatio "Yes," (n and comp •	d other co b <i>lete Sched</i>	mpensatı <i>ule J for s</i>	on from the uch	4	Yes	
5	Did any person listed on line 1 services rendered to the organ											5		No
													•	·
<u></u> 1	ection B. Independent Co Complete this table for your five		Ancato	dund	anar	den	tcontr	acto	re that rea	awad ma	re than \$100 00	0 of		
<u> </u>	compensation from the organiz	zation Report co									thin the organizat			
	(A) (B) Name and business address Description of services										(C Comper			

Form 99								Page S
Part \	/111			oonse or note to any lu	e in this Part VIII			Г
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 2	1a	Federated cam	paıgns	La				
ant	Ь	Membershıp du	les	Lb				
Contributions, Gifts, Grants and Other Similar Amounts	с	Fundraising ev	ents :	1c 2,210,992				
ifts, ar A	d	Related organiz	zations :					
ш Ш	e	Government grant	s (contributions)	 Le				
Sio	f	All other contribution	ons, gifts, grants, and	1f 4,323,361				
buti		similar amounts no	ot included above ons included in lines					
i i i	g	1a-1f \$		2,005,697				
aŭ C	h	Total. Add line:	s1a-1f	· · · •	6,534,353			
e				Business Code				
Program Service Revenue	2a	TUITION/REGISTR		900099	51,479	51,479		
æ	b	AWARD ENTRY FE	ES	900099	25,652	25,652		-
ЭŅ,	c d							
3ê	e							
.ueul	f	All other progra	am service revenue					
ଁ ଧ			s 2a-2f		77,131			
	g 3		ome (including divide		- -			
		and other sımıl	aramounts)	ト	83,467			83,467
	4	Royalties .	stment of tax-exempt bor	nd proceeds	73			73
		Royalties .	(1) Real	(II) Personal				
	6a	Gross rents						
	Ь	Less rental expenses						
	с	Rental income or (loss)						
	d	Net rental inco	me or (loss)	🕨				
	7a	Gross amount	(I) Securities	(II) Other				
		from sales of assets other than inventory	202,115					
	b	Less cost or other basis and	205,053					
	с	sales expenses Gaın or (loss)	-2,938					
	d	Net gaın or (los	s)	· · · · · •	-2,938			-2,938
an	8a	Gross income f events (not inc \$ 2,210						
Other Revenue		of contributions See Part IV, lir	s reported on line 1c) ne 18	a 4,881,467				
her	Ь	Less dırectex	penses	b 2,500,479				
ē	с		(loss) from fundraisin		2,380,988			2,380,988
	9a		rom gaming activitie ne 19	a				
	b		penses (loss) from gaming ad	b				
		Gross sales of returns and allo	inventory, less owances					
	Ь		a oodssold b (loss) fromsales of II	,				
		Miscellaneou		Business Code				
	11a	MISCELLANEO		900099	84,281			84,281
	b	FOREIGN CUR	RENCY	900099	14,899	14,899		
	c	EXCHANGE						
	d	All other reven	ue					
	e	Total. Add line:	s 11a-11d	🕨	99,180			
	12	Total revenue.	See Instructions .		9,172,254	92,030		0 2,545,871
					J, 1 / L, L JT	52,050		-1

. Form **990** (2013)

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to any line in this	PartIX			<u></u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	13,600	13,600		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	30,000	30,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	114,939	114,939		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	773,361	176,526	326,723	270,111
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,498,345	1,330,585	83,898	83,862
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	95,184	95,184		
9	Other employee benefits	803,908	496,065	167,795	140,048
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
с	Accounting	57,409		57,409	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17	300,396			300,39
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	1,440,734	966,438	245,483	220.01
12	Schedule O)	1,440,734	500,430	245,405	228,81
13	Office expenses	387,310	142,731	165,074	79,50
14	Information technology	307,310	142,751	105,074	79,30
15	Royalties				
16		445,339	1,154	438,895	5,29
10		443,339	346,459	30,190	27,85
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	404,302	540,459	30,190	27,63.
19	Conferences, conventions, and meetings	1,062,809	999,384	63,425	
20	Interest	_,_02,000		50,.25	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	65,072	29,802	23,820	11,45
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	MISCELLANEOUS	154,905	55,967	79,398	19,540
b	BAD DEBT	41,850			41,850
с	MEMBERSHIP DUES/SUBSCR	24,844	13,173	5,183	6,488
d		3,000			3,000
	All other expenses	· · · ·	616,881	-760,170	143,289
25	Total functional expenses. Add lines 1 through 24e	7,717,507	5,428,888	927,123	1,361,49
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here F if following SOP 98-2 (ASC 958-720)	, - , - , - , - , - , - , - , - , - , -	,,		,,

Part X Balance Sheet

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

		Check in Schedule O contains a response of note to any line in th			•	<u>· · · · · · · · · · · · · · · · · · · </u>
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		797	1	800
	2	Savings and temporary cash investments		3,443,554	2	849,064
	3	Pledges and grants receivable, net		1,369,878	3	3,358,667
	4	Accounts receivable, net		21,140	_	25,055
	5	Loans and other receivables from current and former officers, du employees, and highest compensated employees Complete Par Schedule L	rectors, trustees, key t II of	· · · · · ·	5	
ts	6	Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section 501(c)(9) voluntary em organizations (see instructions) Complete Part II of Schedule L	ontributing employers ployees' beneficiary		6	
Assets	7	Notes and loans receivable, net			7	
Å.	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		111,393	。 9	131,502
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 615,807		9	101,002
	ь	Less accumulated depreciation	10b 118,437	113,211	10c	497,370
	11	Investments—publicly traded securities	,	1,431,504	11	3,505,678
	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		134,781	15	127,127
	16	Total assets. Add lines 1 through 15 (must equal line 34)		6,626,258	16	8,495,263
	17	Accounts payable and accrued expenses		378,992	17	612,121
	18	Grants payable	010,002	18	012,121	
	19	Deferred revenue	28,950	19		
	20	Tax-exempt bond liabilities		20		
	20	Escrow or custodial account liability Complete Part IV of Sched		20		
lities	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi		- 21		
Liabi		persons Complete Part II of Schedule L			22	
Ë	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 Part	ed third parties,			
		D		74,331	25	84,346
	26	Total liabilities. Add lines 17 through 25		482,273	26	696,467
ces		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔽 lines 27 through 29, and lines 33 and 34.	and complete			
lan	27	Unrestricted net assets		3,312,246	27	3,791,553
Ba	28	Temporarily restricted net assets		1,490,234	28	2,462,255
E	29	Permanently restricted net assets		1,341,505	29	1,544,988
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	re ▶ ┌─ and			
2	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
As	32	Retained earnings, endowment, accumulated income, or other fu	nds		32	
Net	33	Total net assets or fund balances		6,143,985	33	7,798,796
Z	34	Total liabilities and net assets/fund balances		6,626,258	34	8,495,263
	•				F	Form 990 (2013)

Form	990	(201	.3)
------	-----	------	-----

Par	t XI Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,1	.72,254
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,717		
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			
5	Net unrealized gains (losses) on investments	4		6,1	43,985
-		5			2,091
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	107.03		
9	Other changes in net assets or fund balances (explain in Schedule O)				.97,973
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	9 10		7 7	0 98,796
Dar	t XII Financial Statements and Reporting	10		.,,	50,750
l GI	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
				105	
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ר			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: Software Version: EIN: 13-2522784 Name: ROBERT F KENNEDY CENTER FOR JUSTICE AND HUMAN RIGHTS

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

Compensated Employees, and Ind	ependent Cor	tracto	rs			, .	,	I	1	
(A) Name and Title	(B) Average hours per week (list any hours for related	more th perso and a	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) 옥글 글 및 중 막글 강			_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organızatıons
MRS ROBERT F KENNEDY	2 00	x						0	0	0
FOUNDER ORIN S KRAMER	2 00	×						0	0	0
MEMBER ROBERT SMITH	10 00								0	
CHAIRMAN	10 00	x		х				0	0	0
ANTHONY WILLIAMS	2 00	x		x				0	0	0
TREASURER & SECRETARY HARRY BELAFONTE	2 00									
MEMBER		×						0	0	0
ALAN H BUERGER MEMBER	2 00	x						0	0	0
LARRY COX	2 00	x						0	0	0
MEMBER PETER EDELMAN	2 00	×						0	0	0
CHAIR OF PROGRAM COMMITTEE MARK FREITAS	2 00									
CHAIR OF DEVELOPMENT COMMITTEE	2 00	×						0	0	0
MEMBER		×						0	0	0
CLAUDIO GROSSMAN MEMBER	2 00	×						0	0	0
RICHARD IANNUZZI MEMBER	2 00	x						0	0	0
PHILIP W JOHNSTON CHAIR OF PROGRAM SUB COMMITTEE COMPASS PROGRAM	2 00	x						0	0	0
JOE KENNEDY III	2 00	x						0	0	0
MEMBER MATT KENNEDY	2 00	×						0	0	0
MEMBER MARIALINA MARCUCCI	2 00	×						0	0	0
MEMBER ELISA MASSIMINO	2 00	x						0	0	0
MEMBER TERRY MAZANY	2 00	x		x				0	0	0
CO-VICE CHAIR WALTER RAQUET	2 00	x						0	0	0
MEMBER JOHN ROGERS	2 00									
MEMBER MARVIN ROSEN	2 00	×						0	0	0
MEMBER MALIKA SAADA SAAR		x						0	0	0
MEMBER	2 00	x						0	0	0
JEFFREY SACHS MEMBER	2 00	x						0	0	0
MARTIN SHEEN	2 00	x						0	0	0
MEMBER KERRY KENNEDY	37 50	x		x	\square			250,539	0	24,048
MEMBER/RFK PRESIDENT								, -		

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Posit more th person and a Individual trustee) וסח (מ ומח סו ח וה b	ne bo oth a ctor/	ox, u an of 'trus	nless ficer tee)	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
PAUL VAN ZYL MEMBER	2 00	x						0	0	0
LUZ VEGA-MARQUIS CHAIR OF GOV & NOM COMMITTEE	2 00	x						0	0	0
JAKE WALTHOUR MEMBER	2 00	x						0	0	0
ROBERT WOLF CO-VICE CHAIR	2 00	x		х				0	0	0
TIM GANNON MEMBER	2 00	x						0	0	0
MICHAEL POSNER	2 00	x						0	0	0
JOHN SCHLEIFF MEMBER	2 00	x						0	0	0
LYNN DELANEY MEMBER/EXECUTIVE DIRECTOR	37 50			х				197,640	0	20,898
JOHN ZURICK CHIEF OPERATION OFFICER	37 50			х				245,343	0	34,893
JOHN HEFFERNAN DIRECTOR, STTP	37 50					x		154,775	0	28,173
SANTIAGO CANTON	37 50					x		183,273	0	21,598
DIRECTOR, PHR	J							,	_	,

SCHEDULE A (Form 990 or 990EZ) OMB No 1545-004 (Form 990C)	efi	e GR	APHIC	print - D	O NOT PROCESS	As File	ed Data -				DLN: 9	34931	9000	0184
(Form 990 or 990EZ) Complete if the organization is a section SD(C)(3) organization or a section 4947(a)(1).		UEN			Dublic (Nie e wite e d	N 4 - 4 - 1	and Durk I				OMBNO	5 154	5-0047
Treasury internal Revenue Servet Information about Schedule A (form 990 or 990-E2) and its instructions is at www.irs.gov./form990. Implection Name of the organization ROBERT F. KENNERY CENTRE FOR INSTICE Employer identification number 13-2522784 Part 1 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is a chool described in section 170(b)(1)(A)(i). (Attach Schedule E) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). 2 A shopidal or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A negicial reservice organization described in section 170(b)(1)(A)(iii). 5 A norganization that normally receives a substantial part of its support from a governmental unit described in section 170(b)(1)(A)(V). (Complete Part II) 6 A federal, state, or local government or governmental or substantial part of the support from agovernmental unit of its support from agovernmental unit of support from agovernmental unit described in section 170(b)(1)(A)(V). (Complete Part II) 7 An organization that normally receives (1) more than 331/% of its support from contributions, membership fees, and gross receipts from activities related to its exempt thructions = subject to organization 509(a)(2).<	(For	n 990	or 990EZ			ation is a se	ction 501(c)	(3) organiza			(1)	2	01	3
ROBERT F KENNEDY CENTRE FOR JUSTICE 13-2522784 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, lock only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). 1 A church, convention operated in conjunction with a hospital section 170(b)(1)(A)(iii). 1 A medical research organization operated in conjunction with a hospital section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 1 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(V). 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(V). 7 F A norganization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(A)(V). 8 F A community trust described in section 170(b)(1)(A)(V). 9 An organization that normally receives (1) more than 33://% of ft support from contributions of, or to carry out the purposes of no eornore publicly supported organization section 509(a)(2). Complete Part II) 10 </td <td>Treasu</td> <td>iry</td> <td></td> <td></td> <td></td> <td>n about Sche</td> <td>edule A (For</td> <td>m 990 or 990</td> <td></td> <td></td> <td>is at</td> <td></td> <td></td> <td></td>	Treasu	iry				n about Sche	edule A (For	m 990 or 990			is at			
AND FURMAR REMITS 13-2522784 Part 1 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(i). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Alt (iii). Enter the hospital's name, city, and state					STICE					Employer	ident if i	cation n	umber	
Part 1 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) I A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state F A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). 6 A federal, state, or local government or governmental part of its support from a governmental unit of rom the general public described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit of rom the general public described in section 170(b)(1)(A)(v). (Complete Part II) 9 An organization that normally receives (1) more than 33/3% of its support from contributions, membership fees, and gross receipts from activites related to its exempt functions—subject to certain exceptions, and (2) no more than 33/3% of its support from goss investment norme and unrelated business taxable income (less section 599(a)(2). 10 An organization organized and operated exclusively to test for public safety See section 599(a)(2). 11 An organization organized and operated exclusively to testor 599(a)(2). Concylete Part III)				IILK I OK JU	SHEL					13-2522	784			
1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 7 F An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 7 F An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(v). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(v). (Complete Part II) 9 F An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to cital nexceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 590(a)(4). 10 F An organization after June 30, 1975 See section 590(a)(2). (Complete Part II) 10 F An organization after June 30, 1975 See section 590(a)(2). Complete Part III)	Ра	rt I	Reaso	n for Pu	blic Charity Sta	tus (All or	ganizations	s must com	plete this p			ions.		
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 F An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(v). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(v). (Complete Part II) 9 An organization described in section 170(b)(1)(A)(v). (Complete Part II) 9 An organization after June 30, 1975 See section 509(a)(2). (Complete Part II) 10 C An organization after June 30, 1975 See section 509(a)(2). (Complete Part II) 11 C An organization and perated exclusively to test for public safety See section 509(a)(4). 11 C An organization and operated exclusively for the benefit of, to perform the functionally integrated e By checking this box, I certify that the organization is ont controlled directly or indirectly by one or more disqualified persons of section 509(a)(2). Fee section 509(a)(2) or section 509(a)	The o	organı	zation is r	not a privat	te foundation becaus	eitis (For	lınes 1 throu	ugh 11, chec	k only one b	ox)				
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 7 ✓ An organization operated in section 170(b)(1)(A)(v). 7 ✓ An organization than ormally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). 8 ✓ A norganization than ormally receives a substantial part of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33:13% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(2). Complete Part II) 11 C An organization organized and operated exclusively to the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and complete lines 11 tervingh 11. how-functionally integrated 2 Fype I b Type II c Type II - Function	1	Γ	A churcl	n, convent	on of churches, or a	ssociation o	f churches d	lescribed in s	ection 170(b)(1)(A)(i).				
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 6 A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). 7 P An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives a substantial part of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33.1% of its support from gross investment income and unrelated business taxable income (less section 504(a)(4). 10 C An organization organized and operated exclusively to test for public safety See section 509(a)(2). See sect	2	Г	A schoo	ldescribed	d in section 170(b)(1	L)(A)(ii). (A	ttach Sched	ule E)						
hospital's name, city, and state Image: State in the section 170(b)(1)(A)(v). 5 A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). 7 P An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(v). 7 P An organization that normally receives a substantial part of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33:/3% of its support from goss investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 A norganization organized and operated exclusively to test for public safety See section 509(a)(2). See section 509(a)(3). Check the box that describes the type of gaparizations described in section 509(a)(1) or section 509(a)(2). Check the box that describes the type organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organization from the reganization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box, I certify that the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together	3	Γ	A hospit	al or a coo	perative hospital se	rvice organi	zation descr	ibed in secti	on 170(b)(1)	(A)(iii).				
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iV). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(V). 7 ✓ An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(Vi). (Complete Part II) 9 ✓ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 501 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 C An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 C 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 that describes the type of supporting organization and complete lines 11e through 11h a Type II Type II (c) Type III (c) <	4	Г	A medic	al researcl	h organization operat	ted in conjur	nction with a	hospital des	cribed in se	ction 170(b)	(1)(A)(i	iii). Ente	r the	
section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 F An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives (1) more than 331/9% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/9% of its support form gross investment income and unrelated business taxable income (less section 509(a)(4). 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively to test for public safety See section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type II c Type III - Functionally integrated d Type III - Som functionally undegrated d Som function sand other th		_												
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 ✓ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 ✓ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 ✓ An organization that normally receives (1) more than 331/3% of tis support from gross investment income and unrelated business taxable income (less section 501 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 ✓ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 ✓ 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 that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Trype II l - Functionally integrated d Trype II line functionally integrated d Type II line functionally integrated d	5	I	-	-		-	e or universi	ty owned or o	operated by	a governmer	ntal unit	describe	ed in	
 7 F An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 9 An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after Juna 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively to 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). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type II - Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) a		_												
described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 9 An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions 50, 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 that describes the type of supporting organization and complete lines 11 te through 11h a Type I b Type III c Type III - Functionally integrated d Type III - Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in (ii) a fifthe organization received a written determination from the IRS that it is a Type I, Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the		· ·												
9 An organization that normally receives (1) more than 33 ¼/% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 ¼/% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h a Type II C Type III - Functionally integrated d Type III - Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons describ	-	_	described in section 170(b)(1)(A)(vi). (Complete Part II)											
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 µ/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 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 that describes the type of supporting organization and complete lines 11e through 11h	9	Г	An organization that normally receives (1) more than $33_{1/3}$ % of its support from contributions, membership fees, and gross											
its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively to test for public safety See section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type II b Type III c Type III - Functionally integrated d Type III - Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly or one re disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box g Since A ugust 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) obve? (iv) Is the organization about the supported organization(s) f Ing(ii) EIN (iii) Type of organization in col (i) listed														
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (II) a family member of a person described in (I) or (II) above? h Provide the following information about the supported organization (s) (i) Name of (ii) EIN (iii) Type of organization (iv) Is the organization in col (i) of sorting organization in col (i) organized in nocl (i) orga														
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (II) a family member of a person described in (I) or (II) above? h Provide the following information about the supported organization (s) (i) Name of (ii) EIN (iii) Type of organization (iv) Is the organization in col (i) of sorting organization in col (i) organized in nocl (i) orga				-					•		,			
11 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 that describes the type of supporting organization and complete lines 11e through 11h	10	Г												
other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)fIf the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this boxgSince August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? hImage: the following information about the supported organization(s)(i) Name of supported organization(iii) EIN(iii) Type of organization (described on lines 1-9 above(iv) Is the organization in col (i) listed in your governing(v) Did you notify the organization in col (i) of your support?(vii) Is the organization in col (i) organized in the U S ?(vii) A mount o monetary support	11		one or m the box	ore public that descri	ly supported organiz bes the type of supp	ations desci orting orgar	ribed in sect nization and	ion 509(a)(1 complete line) or section es 11e throu	509(a)(2) S gh 11h	See sect	ion 509(a)(3).	. Check
check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? (ii) above? 11g(iii) 11g(iii) h Provide the following information about the supported organization(s) (v) Did you notify the organization in col (i) of your support ed organization in col (i) of your support? (vii) A mount or monetary support	e	Γ	other tha	an foundati		-			•			•		
following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (II) and (III) below, the governing body of the supported organization? Yes No and (III) below, the governing body of the supported organization? 11g(i) 11g(i) 11g(ii) 11g(iii) 11g(ii) 11g(ii) 11g(iii) 11g(ii) 11g(ii) 11g(iii) 11g(iii) 11g(ii) 11g(iii) 11g(ii) 11g(ii) 11g(ii) 11g(iii) 11g(iii) 11g(iii) 11g(iii) 11g(ii) 11g(iii) 11g(ii)			check th	is box							e III sup	porting	organı	zation,
and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(ii) h Provide the following information about the supported organization(s) (i) Name of supported organization (described on lines 1-9 above) (iv) Is the organization your governing (organization your governing (i) listed in your governing (ii) organized in the US?	9		following	persons?										
(ii) A family member of a person described in (1) above? 11g(ii) (iii) A 35% controlled entity of a person described in (1) or (11) above? 11g(iii) h Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 9 above (iv) Is the organization in col (i) listed in your governing						-		-	persons de	scribed in (ii)		Yes	No
(iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above (iv) Is the organization in col (i) listed in your governing (v) Did you notify the organization in col (i) of your support? (vi) Is the organization in the U S ? (vii) A mount or monetary support			. ,	•		••		n?						
h Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization in col (i) listed in your governing (v) Did you notify the organization in col (i) of your support? (vi) Is the organization in col (i) of your support? (vi) Is the organization in col (i) of your support		(ii) A family member of a person described in (i) above? 11g(ii)												
(i) Name of supported organization(ii) EIN(iii) Type of organization(iv) Is the organization in col (i) listed in your governing(v) Did you notify the organization(vi) Is the organization(vii) A mount o monetary support		(iii) A 35% controlled entity of a person described in (i) or (ii) above? [11g(iii)]												
supported organizationorganizationorganization inthe organizationorganization inmonetaryorganization(described on lines 1-9 abovecol (i) listed in your governingin col (i) of your support?col (i) organized in the US?support	h		Provide	the follown	ng information about	the support	ed organizat	:ion(s)						
supported organizationorganizationorganization inthe organizationorganization inmonetaryorganization(described on lines 1-9 abovecol (i) listed in your governingin col (i) of your support?col (i) organized in the US?support	- (i) Nan	ne of	(ii) EIN	(iiii) Type of	(iv)Is	the	(v) Did vo	u notify	(vi) Is	the	0	/ii) An	nount of
(see	suppor		rted	d organization organization in on (described on col (i) listed in lines 1-9 above your governing or IRC section document?		tion in Ited in Prning	the organization in col (i) of your		organization in col (i) organized		mon		etary	
instructions)) Yes No Yes No Yes No					instructions))	Yes	No	Yes	No	Yes	No			
Total Image: Constraint of the second s	Tota	I												

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

Schedule A	(Form 990	or 990-EZ	2013

Page **2**

_	edule A (Form 990 or 990-E2) 2013	<u> </u>) 1	Page Z
Pa	(Complete only if you of						
	Part III. If the organiza						
S	ection A. Public Support	•					
Cal	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	in) ► Gifts, grants, contributions, and			. ,		. ,	
-	membership fees received (Do not	3,989,214	8,022,811	7,795,746	6,534,353	4,963,27	31,305,399
	include any "unusual	5,969,214	0,022,011	7,795,746	0,554,555	4,903,273	51,505,599
_	grants")						
2	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,989,214	8,022,811	7,795,746	6,534,353	4,963,27	5 31,305,399
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						4,080,077
	supported organization) included on line 1 that exceeds 2% of the						4,080,077
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5						27,225,322
	from line 4 ection B. Total Support						
	endar year (or fiscal year						
	beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	3,989,214	8,022,811	7,795,746	6,534,353	4,963,275	31,305,399
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties	72,693	79,372	57,525	44,345	83,540	337,475
	and income from similar	, 2,055	13,312	57,525	11,515	03,510	
	sources						
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						
11	IV) Total support (Add lines 7						
	through 10)						31,642,874
12	Gross receipts from related activiti	es, etc (see instr	ructions)			12	81,394
13	First five years. If the Form 990 is	-					·
	this box and stop here			<u></u>			▶
	ection C. Computation of Pub			1.1			
14	Public support percentage for 2013			11, column (l))		14	86 040 %
15	 Public support percentage for 2012 Schedule A, Part II, line 14 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 						
16a					ne 14 is 33 1/3%	or more, check	this box
h	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	1/30% or more c	
	box and stop here. The organization					1/3/0 OF more, e	►
17a	10%-facts-and-circumstances test-	– 2013. If the orga	inization did not d	heck a box on lin		•	
	is 10% or more, and if the organization						
	IN Part IV how the organization mee organization	ts the "facts-and	-circumstances"	test The organiz	ation qualifies as	a publicly supp	orted
b	10%-facts-and-circumstances test-	– 2012. If the orda	inization did not d	heck a box on lin	e 13, 16a, 16b. o	r 17a, and line	F 1
_	15 is 10% or more, and if the organ	iization meets the	e "facts-and-circi	ımstances" test,	check this box an	id stop here.	
	Explain in Part IV how the organization	tion meets the "fa	icts-and-circums	tances" test The	organization qua	lıfıes as a publı	
18	supported organization Private foundation. If the organizat	ion did not chock	a boy on line 12	16a 16h 17a a	r 17b chock this	box and coo	▶
10	instructions	ion ala not check	a box on fille 13,	100,100,170,0	· · · · · · · · · · · · · · · · · · ·	50X and 500	▶□

Schedule A (Form 990 or 990-EZ) 2013

Part	Support Schedule for Organizations Described in Section 509(a)(2)
	Support Schedule for Siguinzations Beschbea in Section Sos(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under

 alendar year (o Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta A mounts in received frod disqualified the greater amount on c Add lines 7 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr Gross inco dividends, securities 1 Net income business a in line 10b, business is Other income gain or loss capital ass IV) Total support 	Public Support (or fiscal year beginning in) ▶ ants, contributions, and ship fees received (Do not any "unusual grants ") ceipts from admissions, dise sold or services id, or facilities furnished in	1				mplete Part II.)
 Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add A mounts in received fro disqualified the greater amount on c Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities 1 Net income business a in line 10b, business is capital ass IV) Total support 	in) ► ants, contributions, and ship fees received (Do not any "unusual grants ") ceipts from admissions, dise sold or services				1	1	
 Gifts, grant membershi include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not and business uit Tax revenu organizatio paid to or e behalf The value of furnished b the organizatio Total. Add A mounts in received fro disqualified the greater amount on c Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr and income sources Unrelated b income (les from busine june 30, 10 c Add lines 1 Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV) Total support 	ants, contributions, and ship fees received (Do not any "unusual grants") ceipts from admissions, dise sold or services	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
 Include any Gross rece merchandis performed, any activity organizatio purpose Gross rece are not an u business uit Tax revenu organizatio paid to or e behalf The value of furnished b the organizatio Total. Add A mounts in received fird disqualified the greater amount on A dd lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities 1 A mounts fr and income sources Unrelated b income (les from busine June 30, 10 Net income business a in line 10b, business is Other income gain or loss capital ass IV) Total support 	ny "unusual grants ") ceipts from admissions, dise sold or services						
 Gross recemerchandis performed, any activity organizatio purpose Gross recement are not an organizatio purpose Gross recement are not an organizatio paid to or emeters Tax revenu organizatio paid to or emeters The value of furnished bithe organizatio paid to or emeters Total. Add Amounts in received from line 6 Section B. T Indiana growth and income sources Unrelated bin income (less from busines and income sources Unrelated bine and income sources Net income and income sources Add lines 1 Net income sources Other income sources Other income sources Other income sources Net income sources Net income sources Net income sources Other income sources Other income sources Net income sources Net income sources 	ceipts from admissions, dise sold or services						
merchandis performed, any activity organizatio purpose Gross rece are not an in business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T lendar year (o Amounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines june 30, 14 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) Total suppo	dise sold or services						
performed, any activity organizatio purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons Amounts in received fro disqualified the greater amount on C Add lines 7 B Public supp from line 6 Section B. T lendar year (o Amounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) B Total support							
any activity organizatio purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T lendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) B Total support	a, or facilities furnished in						
organizatio purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons Amounts in received fro disqualified the greater amount on C Add lines 7 B Public supp from line 6 Section B. T Ilendar year (o Amounts fr Gross inco dividends, securities and income sources Unrelated t income (les from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) Total support	vity that is related to the						
purpose Gross rece are not an u business un Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T add lines 7 B Public supp from line 6 Section B. T and income sources b Unrelated t income (les from busines June 30, 14 c Add lines 1 Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV) 5 Total support	tion's tax-exempt						
 Gross rece are not an u business ui Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add A mounts in and 3 recei persons A mounts in received fro disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T Idendar year (or a Gross inco dividends, securities i and income sources Unrelated ti income (les from busines june 30, 14 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) Total support 							
are not an u business un organizatio paid to or e behalf The value of furnished b the organiz Total. Add Ta Amounts in and 3 recen- persons b Amounts in received fro- disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T and income sources D Amounts fr Gross inco dividends, securities and income sources D Unrelated to income (less from busines June 30, 14 c Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) 5 Total supp	ceipts from activities that						
 Tax revenu organizatio paid to or e behalf The value of furnished b the organiz Total. Add Amounts in and 3 receipersons Amounts in received fro disqualified the greater amount on Add lines 7 Public supp from line 6 Section B. T Idendar year (or a Gross inco dividends, securities 1 and income sources Unrelated b income (less from busines june 30, 14 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) Total support 	n unrelated trade or						
organizatio paid to or e behalf The value of furnished b the organiz Total. Add A mounts in and 3 receipersons A mounts in received fro disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated b income (less from busines June 30, 14 Add lines 1 Net income business a in line 10b, business is O Other incol gain or loss capital ass IV) Total support	under section 513						
paid to or e behalf The value of furnished b the organiz Total. Add A mounts in and 3 receipersons A mounts in received fro disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated b income (less from busines June 30, 14 C Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) Total support	nues levied for the						
 behalf The value of furnished by the organiz Total. Add A mounts in and 3 receipersons A mounts in received frod disqualified the greater amount on c Add lines 7 Public suppfrom line 6 Section B. Talendar year (or a Gross inco dividends, securities land income sources Unrelated by income (less from busines a in line 10b, business a in line 10b, business is 0 ther income gain or loss capital ass IV) Total support of the securities of the se	tion's benefit and either						
 The value of furnished by the organiz Total. Add A mounts in and 3 received from disqualified the greater amount on A dd lines 7 Public supp from line 6 Section B. Talendar year (or dividends, securities la and income sources Unrelated by income (less from busines and income gain or loss capital ass IV) Total supp Total supp 	r expended on its						
furnished b the organiz 5 Total. Add 7a Amounts in and 3 recei- persons b Amounts in received fro disqualified the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 Amounts fr a Gross inco dividends, securities a and income sources b Unrelated b income (les from busine June 30, 1 c Add lines 1 Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV) 3 Total support	e of services or facilities						
the organiz Total. Add A mounts in and 3 recei- persons A mounts in received fro- disqualified the greater amount on C Add lines 7 Public supp from line 6 Section B. T alendar year (o A mounts fr a Gross inco dividends, securities 1 and income sources Unrelated b income (less from busines June 30, 14 C Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) 3 Total support	by a governmental unit to			1			
 Total. Add Amounts in and 3 receipersons Amounts in received fro disqualified the greater amount on Add lines 7 Public supp from line 6 Section B. T Iendar year (o Amounts fr Gross inco dividends, securities in and income sources Unrelated b income (les from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) Total support 	nization without charge			1			
 A mounts in and 3 receipersons A mounts in received frod disqualified the greater amount on Add lines 7 Public supp from line 6 Section B. T Idendar year (or A mounts from Gross inco dividends, securities la and income sources Unrelated bincome (less from busines income (less from busines a in line 10b, business a in line 10b, business is O ther income gain or loss capital ass IV) Total support 	Id lines 1 through 5						
and 3 recei persons b Amounts in received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities I and income sources Unrelated I income (les from busine June 30, 1 c Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) B Total support	s included on lines 1, 2,				1		
 Amounts in received froe disqualified the greater amount on Add lines 7 Public supp from line 6 Section B. Talendar year (or Amounts fra Gross inco dividends, securities la and income (les from busines ources) Unrelated bincome (les from busines and income (les from busines and income sources) Net income (les from busines and income (les from busines and income gine 30, 11) Add lines 1 Net income business a in line 10b, business is Other incom gain or loss capital ass IV) Total support 	ceived from disqualified						
received fro disqualified the greater amount on c Add lines 7 B Public supp from line 6 Section B. T alendar year (o D A mounts fr a Gross inco dividends, securities l and income sources D Unrelated H income (les from busine June 30, 19 C Add lines 1 Net income business a in line 10b, business is O Other incol gain or loss capital ass IV) B Total support							
disqualified the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities l and income sources 9 Unrelated H income (les from busine June 30, 19 c Add lines 1 L Net income business a in line 10b, business is 0 Other incol gain or loss capital ass IV) 3 Total support	included on lines 2 and 3			1			
the greater amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities and income sources 9 Unrelated I income (les from busine June 30, 1 c Add lines 1 L Net income business a in line 10b business is 2 Other incol gain or loss capital ass IV) 3 Total suppo	from other than						
amount on c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o 9 A mounts fr a Gross inco dividends, securities la and income sources 9 Unrelated H income (les from busine June 30, 19 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total support	ied persons that exceed						
 c Add lines 7 8 Public supp from line 6 Section B. T alendar year (o A mounts fr a Gross inco dividends, securities li and income sources b Unrelated B income (les from busine June 30, 10 c Add lines 1 L Net income business a in line 10b, business is c Other income gain or loss capital ass IV) 3 Total support 	ter of \$5,000 or 1% of the on line 13 for the year						
B Public supp from line 6 Section B. T ilendar year (o A mounts fr Gross inco dividends, securities l and income sources Unrelated l income (les from busine June 30, 10 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) B Total support							
from line 6 Section B. T alendar year (o A mounts fr Gross inco dividends, securities and income sources Unrelated f income (les from busine June 30, 19 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) B Total suppo	ipport (Subtract line 7c						
Section B. T alendar year (o A mounts fr Gross inco dividends, securities i and income sources Unrelated I income (les from busine June 30, 10 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) Total support							
 A mounts fr A mounts fr Gross incodividends, securities and income sources Unrelated from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) Total support 	Total Support	1	•	1	1	•	1
 9 A mounts fr Gross inco dividends, securities l and income sources b Unrelated b income (les from busine June 30, 14 c Add lines 1 1 Net income business a in line 10b, business is 2 O ther incol gain or loss capital ass IV) 3 Total support 	(or fiscal year beginning	(a) 2009	(b) 2010	(a) 2011	(d) 2012	(a) 2012	
 a Gross inco dividends, securities and income sources b Unrelated b income (les from busine June 30, 14 c Add lines 1 I Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total support 	in) 🕨	(a) 2009	(B) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
dividends, securities and income sources Unrelated B income (les from busine June 30, 19 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) Total suppo	s from line 6						
securities and income sources Unrelated to income (les from busine June 30, 1 Add lines 1 Net income business a in line 10b, business is O ther income gain or loss capital ass IV) Total suppo	come from interest,						
and income sources Unrelated b income (les from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) 3 Total suppo	s, payments received on						
sources Unrelated b income (less from busine June 30, 14 Add lines 1 Net income business a in line 10b, business is O ther incol gain or loss capital ass IV) 3 Total support	es loans, rents, royalties						
 b Unrelated b income (less from busine June 30, 14 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total support 	me from similar						
income (les from busine June 30, 19 Add lines 1 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) 3 Total supp	d business taxable						
from busine June 30, 1 Add lines 1 Net income business a in line 10b business is Other incol gain or loss capital ass IV) Total suppo	less section 511 taxes)						
June 30, 14 c Add lines 1 1 Net income business a in line 10b, business is 2 Other incol gain or loss capital ass IV) 3 Total suppo	inesses acquired after						
 Net income business a in line 10b, business is Other incol gain or loss capital ass IV) Total support 							
business a in line 10b, business is 0 other incol gain or loss capital ass IV) 3 Total suppo	s 10a and 10b						
In line 10b, business is O ther incol gain or loss capital ass IV) 3 Total supp	me from unrelated						
business is O ther incol gain or loss capital ass IV) 3 Total supp	s activities not included						
2 Other Incol gain or loss capital ass IV) 3 Total suppo	Ob, whether or not the						
gaın or loss capıtal ass IV) 3 Total supp	s is regularly carried on						
capital ass IV) 3 Total suppo	come Do not include						
IV) 3 Total suppo	oss from the sale of ssets (Explain in Part						
B Total suppo							
11, and 12	port. (Add lines 9, 10c,						
		for the organızatı	on's fırst, second	, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	12) • years. If the Form 990 is f						▶
	12) 2 years. If the Form 990 is f is box and stop here			10 1 (0)		- I - I	
Public supp	12) years. If the Form 990 is f is box and stop here Computation of Publ	(line 8, column (f) divided by line	13, column (f))		15	
Public supp	12) 2 years. If the Form 990 is f is box and stop here		art III, lıne 15			16	
Section D. C	12) years. If the Form 990 is f is box and stop here Computation of Publ	.2 Schedule A, P		ae			
	12) years. If the Form 990 is f is box and stop here Computation of Publ ipport percentage for 2013		me Percenta		(17	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201	estment Inco			ın (f))	1 1/ 1	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2	estment Inco 2013 (line 10c, c	olumn (f) dıvıded	by line 13, colum	in (f))		
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from	estment Inco 2013 (line 10c, ca n 2012 Schedule	olumn (f) dıvıded A, Part III, lıne 1	by line 13, colum 7		18	
	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from support tests—2013. If the	estment Inco 2013 (line 10c, co n 2012 Schedule organization did	olumn (f) divided A , Part III , line 1 not check the bo	by line 13, colum 7 x on line 14, and	line 15 is more t	18 han 33 1/3%, and	
IS not more	12) e years. If the Form 990 is f is box and stop here Computation of Publ upport percentage for 2013 upport percentage from 201 Computation of Inve ent income percentage for 2 ent income percentage from	estment Inco 2013 (line 10c, co n 2012 Schedule organization did and stop here. Th	olumn (f) divided A , Part III , line 1 not check the bo e organization qu	by line 13, colum 7 x on line 14, and alifies as a public	line 15 is more t cly supported org	18 han 33 1/3%, and anization	►

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test								
Return Reference	Explanation							

Schedule A (Form 990 or 990-EZ) 2013

efi	le GRAPHIC p	orint - DO NOT PROCESS As F	iled Data -			DLN:	93493190	000184
SCI	HEDULE D	Supplement	tal Financi	al Statements			OMBNo 15	45-0047
(For	m 990)						20 [·]	12
				ered "Yes," to Form 990 ;, 11d, 11e, 11f, 12a, or 1			20	IJ
	ment of the Treasury	🕨 Attach to Form 990. 🕨 See separate	instructions. 🕨	Information about Sche	dule D	(Form 990)		
	I Revenue Service		tions is at <u>www</u> .	<u>irs.gov/form990</u> .	Ener	lever identi	Inspection num	
RO		ENTER FOR JUSTICE			Emp	noyer identi		ber
	O HUMAN RIGHTS	izations Maintaining Donor Adv	viced Eurode	an Othan Similar E		2522784	nte Comol	ata if the
Pa		zation answered "Yes" to Form 990			unas	OF ACCOU	nts. Compi	
			(a) Dor	or advised funds		(b) Funds a	and other acc	ounts
1	Total number a	•		1	_			
2		tributions to (during year)		135,860	-			
3		ts from (during year) 116,931						
4		e at end of year		18,929				
5	funds are the o	zation inform all donors and donor advisors and donor advisors and the organization's property, subject to the or	rganization's exc	lusive legal control?			🔽 Yes	∏ No
6	used only for c	zation inform all grantees, donors, and d haritable purposes and not for the bene ermissible private benefit?					🔽 Yes	∏ No
Ра	rt III Conse	rvation Easements. Complete ıf	the organizat	ion answered "Yes" t	o Forn	n 9 <mark>90, Pa</mark> r	t IV, line 7.	
1		conservation easements held by the org						
		on of land for public use (e g , recreation of natural habitat	or education)	Preservation of an Preservation of a				a
		on of open space		j Preservation of a c	Leitine		liuciure	
2					ha faum			
Z	2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year							
	Held at the End of the Year							
а		of conservation easements			2a			
b								
С								
d		servation easements included in (c) acc ure listed in the National Register	quired after 8/17	706, and not on a	2d			
3	Number of cons	servation easements modified, transferi	red, released, ex	tinguished, or terminate	ed by th	ne organizat	ion during	
_								
4		es where property subject to conservat						
5	enforcement of	nization have a written policy regarding f the conservation easements it holds?					☐ Yes	∏ No
6	Staff and volun ►	teer hours devoted to monitoring, inspe	cting, and enfor	cing conservation easer	nents c	luring the y	ear	
7		enses incurred in monitoring, inspecting	g, and enforcing	conservation easement	s durın	g the year		
8		servation easement reported on line 2(d) above satısfy	the requirements of sec	tion 17	70(h)(4)(B)	(I) Ves	∏ No
9	 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes 							
Par		n's accounting for conservation easeme izations Maintaining Collection		torical Treasures	or Ot	her Simil	ar Assete	
		ete if the organization answered "Y						
1a	works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote 1	ts held for publi	c exhibition, education,	or rese	arch in furt		
b	works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to thes	ts held for publi					blıc
	(i) Revenues II	ncluded 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						
а	Revenues inclu	uded in Form 990, Part VIII, line 1				►\$_		
Ь	Assets include	ed in Form 990, Part X				► \$		

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

Sche	dule D (Form 990) 2013										Page 2
Part	Organizations Maintaining Co	llections of Art	, Histo	orical T	reasui	res, or O	ther	Similar	Asse	: ts (cc	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds,che	ck any of	the follo	wing that a	ire a	sıgnıfıcant	use of	ıts	
а	Public exhibition		d	🖵 Loan	orexch	ange progr	ams				
b	Scholarly research		е	└ Othe	r						
c	Preservation for future generations										
4	Provide a description of the organization's c	ollections and expla	un howi	they furth	ar tha ai	raanization	'c 0.0	ampt purpo			
•	Part XIII			they furth		rgamzation	3 CA		Joe III		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							lar	Г	Yes	∏ No
Par	t IV Escrow and Custodial Arrang					answered	d "Ye	es" to For	m 990),	
	Part IV, line 9, or reported an ar										
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				utions o	r other ass	ets n	ot	Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	followir	ng table							
						-	-		Amou	int	
с	Beginning balance					-	1c				
d	Additions during the year					-	1d				
е	Distributions during the year						1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?						Г	Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	II Check here If the	e explan	ation has	been pr	rovided in P	art X				Г
Ра	rt V Endowment Funds. Complete				es" to F	orm 990,	Part	IV, line			
		(a)Current year	(b) Pri	lor year		o years back) Four y	ears back
1a	Beginning of year balance	1,341,505		1,398,954		1,098,778		1,034,	424		915,850
b	Contributions	25,000				300,000					
С	Net investment earnings, gains, and losses					53,836		106,	014		160,234
d	Grants or scholarships										
е	Other expenditures for facilities					52.660		4.1	660		41.660
	and programs					53,660		41,	660		41,660
f	Administrative expenses										
g	End of year balance	1,366,505		1,398,954		1,398,954		1,098,	778		1,034,424
2	Provide the estimated percentage of the cur	rent year end balan	ce (line	1g, colum	nn (a)) h	eld as					
а	Board designated or quasi-endowment 🕨	0 %									
b	Permanent endowment 🕨 100 000 %										
с	Temporarily restricted endowment > The percentages in lines 2a, 2b, and 2c sho	0 % uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiz	atıon th	at are hel	d and ad	dministered	l for t	he			·
	organization by							г		Yes	No
	(i) unrelated organizations				• •	• • •	•		3a(i)		No No
b	(ii) related organizations							[3a(ii) 3b	<u> </u>	
4	Describe in Part XIII the intended uses of the				• •	• • •	•	· · · [L
	t VI Land, Buildings, and Equipmo				n answ	ered 'Yes	' to F	orm 990	. Part	IV. li	ne
	11a. See Form 990, Part X, line			,					,	_ ,	
	Description of property			(a) Cost o basis (inve		(b) Cost or c basis (othe		(c) Accumu depreciat		(d) Bo	ook value
1a	Land										
b	Buildings		.								
	Leasehold improvements		.			38	,368		13,039		25,329
	Equipment		ŀ				,000		, 52,342		42,658

e Other .

.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

chedule D	(Form	990)	2013

429,383

497,370

s

. . 🕨

53,056

482,439

.

. .

.

Schedule D (Form 990) 2013				Page 3
Part VII Investments-O See Form 990, Pa	rther Securities. Com rt X, line 12.	plete if the organization	answered 'Yes' to Form	m 990, Part IV, line 11b.
(a) Description of sec (including name)		(b)Book value	(c) Method of va Cost or end-of-year r	
(1)Financial derivatives				
(2)Closely-held equity interests				
O ther				
Total. (Column (b) must equal Form 99	00. Part X. col (B) line 12)	•		
Part VIII Investments—I	Program Related. Co	mplete if the organizatio	⊐ n answered 'Yes' to Fo	rm 990, Part IV, line 11c.
See Form 990, Pa (a) Description of		(b) Book value	(c) Method of va	luation
	investment		Cost or end-of-year r	
Total. (Column (b) must equal Form 99				
Part IX Other Assets. Co	omplete if the organization (a) Descrip	answered 'Yes' to Form 990), Part IV, line 11d See F	orm 990, Part X, line 15 (b) Book value
	(4) Desen			
Total. (Column (b) must equal Forr	m 990 Part X col (B) line 15)		
Part X Other Liabilities				ne 11e or 11f. See
Form 990, Part X, 1 (a) Descripti		(b) Book value		
Federal income taxes DEFERRED RENT		84,346		

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

Þ.

84,346

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

7

Schedule D (Form 990) 2013

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Vec' to Form 000, Part IV, line 12a	per R	teturn Complete if
1	the organization answered 'Yes' to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements	1	9,641,974
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	<u> </u>	
- a	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII) 383,051	1	
e	Add lines 2a through 2d	2e	469,720
3		3	9,172,254
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		9,172,254
-			
a		-	
Ь	Other (Describe in Part XIII)		
с _	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	9,172,254
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense If the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	8,185,136
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
с	Other losses		
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	467,629
3	Subtract line 2e from line 1	3	7,717,507
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	7,717,507
-	XIII Supplemental Information	_ _	1,7,1,307

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART V, LINE 4	FUNDS TO BE HELD IN PERPETUITY AND INCOME TO BE USED TO SUPPORT ORGANIZATION'S PROGRAM EXPENSES
PART X, LINE 2	THE CENTER IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AS A SECTION 501(A) ORGANIZATION THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE CENTER IS A PUBLICLY SUPPORTED ORGANIZATION HOWEVER, SHOULD THE CENTER HAVE INCOME FROM ACTIVITIES NOT DIRECTLY RELATED TO ITS TAX-EXEMPT PURPOSE, SUCH INCOME WOULD BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME THE CENTER DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2013 AND 2012 THE CENTER'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL, STATE AND LOCAL AUTHORITIES THE TAX RETURNS FOR THE YEARS 2012 TO 2010 ARE OPEN TO EXAMINATION BY FEDERAL,STATE AND LOCAL AUTHORITIES
PART XI, LINE 2D - OTHER ADJUSTMENTS	DIRECT SPECIAL EVENTS
PART XII, LINE 2D - OTHER ADJUSTMENTS	DIRECT SPECIAL EVENTS EXPENSES

Part XIII Supplemental Info	prmation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2013

efil	e GRAPHIC print -	· DO NOT	PROCESS	As Filed Da	ta -	DLN:	93493190000184
SCHEDULE F S(Form 990)			ement of	Activities (Dutside the Unit	ed States	OMBNo 1545-0047
			•	Part IV, line	n answered "Yes" to Form 14b, 15, or 16.		2013
	ent of the Treasury Revenue Service	▶ Informatio			See separate instructions nd its instructions is at и		Open to Public Inspection
ROB	of the organization RT F KENNEDY CENT HUMAN RIGHTS	TER FOR JU	JSTICE			Employer ident	ification number
Pa	't I General Inf "Yes" to Form				ne United States. C	omplete if the organiz	ation answered
1	other assistance, th	ne grantee	es' eligibility f	or the grants o		amount of its grants ar selection criteria used	nd FYes F No
2	For grantmakers. [assistance outside	Describe ir the United	n Part V the o d States.	rganızatıon's p	rocedures for monitor	ing the use of its gran	ts and other
3	Activites per Region	(The follow	ung Part I, line	3 table can be d	uplicated if additional sp	ace is needed)	
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	EUROPE (INCLUDIN ICELAND & GREENL/		0	1	PROGRAM SERVICCES	HUMAN RIGHTS EDUCATION	478,289
	SOUTH AMERICA		0	0	OTHER	MEETINGS WITH CIVIL SOCIETY MEMBERS AND GOVERNMENT OFFICIALS	. 184,957
	Sub-total Total from continuation to Part I	on sheets	c c	-			<u>663,246</u> 0
	Totals (add lines 3a a	,	C			No 50082W Schedu	663,246 ule F (Form 990) 2013

Sche	edule F (Form 990))2013							Page 2		
Par	art II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.										
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
			NORTH AMERICA	MEXICO SCHOOL PROJECT	23,145	WIRE TRANSFER			FAIR VALUE		
			NORTH AMERICA	MEXICO SCHOOL PROJECT	10,548	WIRE TRANSFER			FAIR VALUE		
2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section $501(c)(3)$ equivalency letter										
3	Enter total num	nber of other (organizations or en	tities					2		
ı —								Schedule	F (Form 990) 2013		

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

Page **3**

(a) Type of grant or	(b) Region	(c) Number of	(d) A mount of	(e) Manner of cash	(f) A mount of	(g) Description	(h) Method o
assistance		recipients	cash grant	dısbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV , appraisal, othe

1	Was the organization a US transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	ম	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	<u> </u>	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	F	Yes	শ	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	ম	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	F	Yes	ম	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	L	No

Schedule F (Form 990) 2013

Part V Supplemental Information

ReturnReference

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

Explanation

Returnketerence	Explanation
PART I, LINE 2	THE ROBERT F
,	KENNEDY (RFK)
	HUMAN RIGHTS
	AWARD IS
	PRESENTED
	ANNUALLY TO
	INDIVIDUALS WHO,
	AT GREAT PERSONAL
	RISK, STAND UP TO
	OPPRESSION IN THE
	NONVIOLENT
	PURSUIT OF RESPECT
	FOR HUMAN RIGHTS
	THE AWARD
	REFLECTS ROBERT
	KENNEDY'S
	ABSOLUTE
	OPPOSITION TO
	TYRANNY AND HIS
	BELIEF IN THE POWER
	OFINDIVIDUAL
	MORAL COURAGE TO
	INJUSTICE THE
	AWARD,
	ESTABLISHED IN
	1984, SEEKS TO
	DRAW THE WORLD'S
	ATTENTION TO THE
	WORK OF ONE OR
	MORE COURAGEOUS
	INDIVIDUALS THE
	RFK HUMAN RIGHTS
	AWARD LAUREATES
	WHO MAKE GREAT
	PERSONAL
	SACRIFICES, OFTEN
	RISKING THEIR
	LIVES, TO PROMOTE
	RESPECT FOR HUMAN
	RIGHTS AND REALIZE
	POSITIVE CHANGE
	<u> </u>
	+
	<u> </u>
	l
	1
	<u> </u>
	+
	Schedule F (Form 990) 2013

efile GRAPHIC print ·	- DO NOT PROCESS	As File	ed Data	-	DLN:	93493190000184
SCHEDULE G Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complete if the organization organization by Attach	draisin ation answer tion entered to Form 990 o	g or G red "Yes" to more than \$ or Form 990-	mation Regard aming Activitie Form 990, Part IV, lines 17, 1 15,000 on Form 990-EZ, line 6 EZ. See separate instructio Z) and its instructions is at wy	S 8, or 19, or if the ja. ns.	OMB No 1545-0047 2013 Open to Public Inspection
Name of the organization ROBERT F KENNEDY CENT AND HUMAN RIGHTS						tification number
Part I Fundraising Form 990-EZ	Activities. Complete filers are not required				o Form 990, Part IV,	, line 17.
 a Mail solicitations b Internet and email c Phone solicitation d In-person solicitation d or key employees list b If "Yes," list the ten h 	is itions ave a written or oral agre ed in Form 990, Part VII)	ement with or entity entities (1	e f g n any indiv in connec	Solicitation of non Solicitation of gove Special fundraising vidual (including officer tion with professional fu	government grants ernment grants g events s, directors, trustees undraising services?	I∽ Yes I No ndraiser is
(i) Name and address o ındıvıdual or entıty (fundraıser)	f (ii) Activity	fundrais custo cont	Did serhave ody or rol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
CHARITYBUZZ 437 FIFTH AVE 11TH <u>NEWYORK, NY 1001</u>		Yes Yes	No	1,571,078	300,396	1,270,682
Fotal			▶	1,571,078	300,396	1,270,682

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

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

Schedule	G	Form	990	or 99	0-E7	2013
Juneaure	0		220	01 22	U – L Z .	2015

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5.000.

			(a) Event #1 NY GALA (event type)	(b) Event #2 AUCTION (event type)	(c) Other events <u>1</u> (total number)	(d) Total events (add col (a) through col (c))
ынe	1	Gross receipts	2,314,165	3,142,156	1,636,138	7,092,459
Revenue	2	Less Contributions	177,100	1,571,078	462,814	2,210,992
Ŗ	3	Gross income (line 1 minus line 2)	2,137,065	1,571,078	1,173,324	4,881,467
	4	Cash prizes				
ပ	5	Noncash prizes			536,350	536,350
Expenses	6	Rent/facility costs			5,290	5,290
ă Ă	7	Food and beverages	233,880			233,880
urea	8	Entertainment	104,025		16,467	120,492
2	9	Other direct expenses .	33,389	1,571,078		1,604,46
						(2 500 470
	10	Direct expense summary Add lin	nes 4 through 9 in column	(d)		(2,500,479
	10 11	Direct expense summary Add lir Net income summary Subtract li			· · · · · •	
Par		Net income summary Subtract li Gaming. Complete if the or	ne 10 from line 3, column rganization answered	(d)	rt IV, lıne 19, or repo	2,380,988
	11	Net income summary Subtract li	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)	rt IV, line 19, or repo	2,380,988 rted more than
	11 t III	Net income summary Subtract li Gaming. Complete if the or	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)		2,380,988 rted more than (d) Total gaming (add col (a) through col
Keveinie	11 t III 1	Net income summary Subtract li Gaming. Complete if the or \$15,000 on Form 990-EZ, li	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)		2,380,988 rted more than (d) Total gaming (add col (a) through col
Kevenue	11 t II 1 2	Net income summary Subtract II Gaming. Complete if the or \$15,000 on Form 990-EZ, III Gross revenue	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)		2,380,988 rted more than (d) Total gaming (add col (a) through col
EXpenses Revenue	11 t II 1 2	Net income summary Subtract II Gaming. Complete if the or \$15,000 on Form 990-EZ, III Gross revenue Cash prizes	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)		(d) Total gaming (add col (a) through col
reditaxpenses kevenue	11 t III 1 2 3 4	Net income summary Subtract II I Gaming. Complete if the or \$15,000 on Form 990-EZ, III Gross revenue Cash prizes Non-cash prizes	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)		2,380,988 rted more than (d) Total gaming (add col (a) through col
rect Expenses Revenue	11 1 2 3 4 5	Net income summary Subtract II Gaming. Complete if the or \$15,000 on Form 990-EZ, III Gross revenue Cash prizes Non-cash prizes Rent/facility costs	ne 10 from line 3, column rganization answered ne 6a. (a) Bingo	(d)		2,380,988 rted more than (d) Total gaming (add col (a) through col
Direct Expenses Revenue	11 1 2 3 4 5	Net income summary Subtract II I Gaming. Complete if the or \$15,000 on Form 990-EZ, III Gross revenue . Cash prizes . Non-cash prizes . Rent/facility costs . Other direct expenses .	rganization answered ne 6a. (a) Bingo	(d)	(c) O ther gaming	2,380,988 rted more than (d) Total gaming (add col (a) through col

Page **2**

Schedule G (Form 990 or 990-EZ) 2013

Does the organization operate gaming activities with nonmembers? Image: Comparization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in a The organization's facility a The organization's facility b An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name ▶	
formed to administer charitable gaming? Image: Comparison of the percentage of gaming activity operated in the organization's facility Image: Comparison of the percentage of gaming activity operated in the organization's facility a The organization's facility Image: Comparison of the percentage of t	No
13 Indicate the percentage of gaming activity operated in a The organization's facility 13a b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name	
a The organization's facility 13a b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name	sГNo
 b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? revenue?	%
Name Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	%
Address 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
revenue?	
revenue?	
	_ _
b If "Yes." enter the amount of gaming revenue received by the organization IP \$ and the	S I NO
b If "Yes," enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party * \$	
c If "Yes," enter name and address of the third party	
Name 🕨	
Address 🕨	
16 Gaming manager information	
Name 🕨	
Gaming manager compensation 🏲 \$	
Description of services provided 🕨	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	s 🗖 No
 b Enter the amount of distributions required under state law distributed to other exempt organizations or spent 	5 1 110
in the organization's own exempt activities during the tax year 🕨 \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	v), and
Return Reference Explanation	

Page **3**

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLN: 93493190000184
Schedule I (Form 990)	-	омв № 1545-0047 2013					
Department of the Treasury Internal Revenue Service	Information	mation about Schedule I			s.gov/form990.		Inspection
Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u> . Inspection Inspectio					r identification number		
AND HUMAN RIGHTS	mation on Grants	and Accistance				13-252	2784
 Does the organization m the selection criteria use Describe in Part IV the 	aıntaın records to sub ed to award the grants	stantiate the amount of t or assistance?					🖓 Yes 🔽 N
		o Governments and recipient that receive					
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descripti non-cash assis	
(1) GO CAMPAIGN 2461 SANTA MONICA BLVD 437 SANTA MONICA,CA 90404	20-4542914	501(C)3	13,600				PASS-THROUGH GRANT - FOR THE IMPROVEMENTS ON A MEXICO SCHOOL

 1

Schedule I (Form 990) 2013

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) HUMAN RIGHTS AWARD	1	30,000		FM∨	
Part IV Supplemental Inform	ation. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanation	·	· · · ·		
					Cohodula T (Farma 000) 2012

Schedule I (Form 990) 2013

efil	e GRAPHIC p	rint - DO NOT PROCESS	As Filed	Data -		DLN: 9	349319	0000	184
Sch	edule J	Com	pensat	tion Inf	ormation	0	MBNo 1	545-0	047
	n 990)	For certain Officers,		Trustees, ated Empl	Key Employees, and Highe	st	20	13)
		🕨 Complete if the organi			s" to Form 990, Part IV, li	ine 23.			
	nent of the Treasury Revenue Service				parate instructions.		Open to Inspe		
	ne of the organiz	► Information about Schedule J ((Form 990)) and its ir		<u>gov/form990</u> . Employer ident if id	-		
ROB	ERT F KENNEDY CE					Employer identific	ation nun	nber	
	HUMAN RIGHTS					13-2522784			
Ра	rt I Questi	ons Regarding Compensati	on						
_								Yes	No
1a		opiate box(es) if the organization p Section A, line 1a Complete Part I							
		or charter travel	-	-	llowance or residence for	-			
	<u></u>	companions		_	for business use of perso				
	Tax idemni	fication and gross-up payments	Г	Health or	social club dues or initiati	on fees			
	☐ Discretiona	ary spending account	Г	Personal	services (e g , maid, chauf	feur, chef)			
b		xes in line 1a are checked, did the or provision of all of the expenses					1b		
2		ation require substantiation prior to							
	directors, trust	ees, officers, including the CEO/Ex	ecutive Di	rector, reg	arding the items checked	in line 1a?	2	Yes	
3	Indicate which	for a file following the files are	ropization	used to as	tablich the componention	oftho			
5	organization's (ıf any, of the following the filing org CEO/Executive Director Check all	that apply	Do not c	neck any boxes for method	ds			
		ed organization to establish compe				plaın ın Part III			
	-	tion committee	· · · · · · · · · · · · · · · · · · ·		nployment contract				
		nt compensation consultant	·	-	ation survey or study				
	✓ Form 990 0	of other organizations	ম	Approvai	by the board or compensa	tion committee			
4	During the year or a related org	r, dıd any person lısted ın Form 990 anızatıon), Part VII,	, Section A	, line 1a with respect to t	he filing organizati	on		
а	Receive a seve	rance payment or change-of-contro	ol payment	?			4a		No
b		pr receive payment from, a supplem	• •		tırement plan?		4b		No
с	Participate in, d	pr receive payment from, an equity-	-based con	npensatioi	n arrangement?		4 c		No
		of lines 4a-c, list the persons and				n Part III			
_		and 501(c)(4) organizations only r	-						
5		ted in Form 990, Part VII, Section contingent on the revenues of	A, line 1a,	aid the or	ganization pay or accrue a	iny			
а	The organizatio						5a		No
	Any related org						5b		No
_		5a or 5b, describe in Part III							
6		ted in Form 990, Part VII, Section contingent on the net earnings of	A, lıne 1a,	dıd the or	ganization pay or accrue a	iny			
а	The organizatio	n ^{>}					6a		No
b	Any related org	anization?					6b		No
	If "Yes," to line	6a or 6b, describe in Part III							
7	For persons list	ted in Form 990, Part VII, Section lescribed in lines 5 and 6? If "Yes,"				n-fixed	7		No
8		nts reported in Form 990, Part VII nitial contract exception described					8		No
9		8, did the organization also follow t	the rebutto	hle presur	nntion procedure describe	d in Regulations	•		NU
3	section 53 495		ine repuild	Die presul	npriori procedure describe	a in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	- W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred In prior Form 990
(1) KERRY KENNEDY MEMBER/RFK PRESIDENT	(i) (ii)	2 5 0 ,5 3 9 0	0 0	0	15,050 0	8,998 0	274,587 0	0 0
(2) LYNN DELANEY MEMBER/EXECUTIVE DIRECTOR	(i) (ii)	174,640 0	17,000 0	6 ,0 0 0 0	11,900 0	8,998 0	218,538 0	0 0
(3)JOHN ZURICK CHIEF OPERATION OFFICER	(i) (ii)	2 4 3 ,8 8 5 0	1,458 0	0 0	17,500 0	17,393 0	280,236 0	0 0
(4) JOHN HEFFERNAN DIRECTOR, STTP	(i) (ii)	1 39,375 0	15,400 0	0	10,780 0	17,393 0	182,948 0	0 0
(5) SANTIAGO CANTON DIRECTOR, PHR	(i) (ii)	183,273 0	0 0	0	12,600 0	8,998 0	204,871 0	0 0

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference

Explanation

Schedule J (Form 990) 2013

Pepartment of the Treat Itemal Revenue Serv Name of the ROBERT F KENN AND HUMAN RIC Part I Ex Cor	990-EZ) Isuny Ice Dorganization	⊧ı	"Yes"	► Co on Form 99	mplete if the	-		ons					5-0047
Pepartment of the Treat Itemal Revenue Serv Name of the G ROBERT F KENN AND HUMAN RIG Part I Ex Cor	asury Ice	►I	"Yes"	► Co on Form 99	mplete if the	e organization a						~~ /	^
Name of the ROBERT F KENN AND HUMAN RIC Part I Ex Cor	organization	⊧I			0. Part IV. li	Form 990 or 990-EZ) Complete if the organization answered					-	1117	· · /
Name of the ROBERT F KENN AND HUMAN RIC Part I Ex Cor	organization	►I	b. A++-	es" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28o or Form 990-EZ, Part V, line 38a or 40b.					,			201	J
Name of the ROBERT F KENN AND HUMAN RIC Part I Ex Con	organization	►I	F ALLO			990-EZ. ► See		ructions			Op	en to l	Public
ROBERT F KENN AND HUMAN RIC Part I Ex Cor			Informatio	on about Sc		m 990 or 990-E		truction	ıs is at	:		nspec	
ROBERT F KENN AND HUMAN RIG Part I Ex Cor					<u>www.irs</u>	.gov/form990	•						
Part I Ex Cor		OR JUST	FICE					E	mploy	er ident	ificatio	on numb	er
Cor										22784			
												4.01	
I (a) Na	mplete if the me of disqua					0, Part IV, line n disqualified	(c) Des						rrected?
		inicu p			on and organ		(c) Dest	enption	ortia	insuction	' F	Yes	No
													-
													-
													-
													_
													-
) Enter the	a amount of t		urred by o	raanization	managers or	disqualified pe	reone during t	be year	runda	reaction	!		-
4958.		• •		• • •	• • •		••••	-	• •	F \$	·		
3 Enterthe	e amount of t	ax, ıf a	ny, on line	e 2, above,	reimbursed b	y the organizat	ion			▶ \$			
		-			ed Persons	5. 990-EZ, Part \	/ lune 38a or	Form 9	90 P =	art IV lu	ng 26	orifthe	
						line 5, 6, or 22		10111.2	50,10	, II	ne 20,	or in the	
(a) Name of	(b)		(c)	(d) Loan		(e)Original	(f)Balance	(g) In		(h)			ritten
interested person	Relation: with	ship F	Purpose o Ioan	f or from t organizat		principal amount	due	default	£?	A pprov by	ed	agree	ment?
•	organıza	tion							board or committee?				
				То	From	-		Yes	No	Yes	No	Yes	No
												_	
											<u> </u>		
- + - I			b							ļ		-	
⁻ otal Part III G	vonte ou A	:-+	▶ \$		Tatovost	ed Persons.							
						i Form 990, P	art IV. line 2	27.					
(a) Name of				hıp betweei		int of assistanc			ıstanc	e (e) Purpo	se of as	sistance
pers	son	Inter	•	rson and th	e								
			organız	zation									

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zation's
				Yes	No
(1) MARK FREITAS	BOARD MEMBER	29,438	INSURANCE BROKERAGE FIRM (MARK EDWARD PARTNERS)		No
(2) MARVIN S ROSEN	BOARD MEMBER	24,861	TELECOMMUNICATION COMPANY FOR NY OFFICE (NBS/FUSION TELECOMMUNICATIONS INT'L)		No
(3) JOHN ZURICK	CHIEF OPERATION OFFICER	50,000	COMPASS PROGRAM CONSULTANT (ZQI, INC)		No

Return Reference

Explanation

Schedule L (Form 990 or 990-EZ) 2013

efile GRAP	HIC print - DO NOT PF	ROCESS	As Filed Data -	DLN: 93493190000184			
SCHEDULE N	1	No	ncash Contrib	utions	ОМВМ	No 1545-0047	
(Form 990)		NU			•	21042	
	►Co	mplete if t	he organizations answe	red "Yes" on Form		2013	
Department of the Trea	asurv		990, Part IV, lines 29 o ► Attach to Form 99		One	n to Public	
Internal Revenue Serv	-	it Schedule M	4 (Form 990) and its instru			nspection	
Name of the or	rganization			Em	ployer identificatio	n number	
ROBERT F KENNE AND HUMAN RIGH	DY CENTER FOR JUSTICE			1.2	-2522784		
Part I T	ypes of Property			15	-2322704		
	<u>///</u>	(a)	(b)	(c)	(d)		
		Check	Number of contributions	Noncash contribution	Method of de		
		If	or items contributed	amounts reported on	noncash contribi	ution amounts	
		applicable		Form 990, Part VIII, line 1g			
1 Art—Worl	ks of art						
2 Art—Hist	orical treasures .						
3 Art—Frac	tional interests						
4 Books an	d publications		_				
-	and household						
5	other vehicles						
	d planes						
	ual property						
9 Securitie	s—Publicly traded .	Х	3	17,388			
10 Securitie	s—Closely held stock .						
	s—Partnershıp, LLC,						
	nterests s—Mıscellaneous						
12 Securicie 13 Qualified							
contribut							
	ion—Other						
	te-Residential						
	te-Commercial						
	ite—Other les						
	entory						
	d medical supplies						
	1y						
	lartifacts						
23 Scientific	specimens						
24 Archeolo	gıcal artıfacts 🛛 .						
25 Other►(X	325	1,571,078	FAIR VALUE		
AUCTIONITE 26 Other►(-	38	417 231	FAIR VALUE		
HP GOLF ITE			50	117,201			
27 Other►()						
28 Other►()				<u> </u>		
	of Forms 8283 received by t						
for which	the organization completed	Form 8283,	, Part IV , Donee Acknowle	dgement 2:	,	Yes No	
30a During ti	he year, dıd the organızatıor	n receive by	contribution any property i	reported in Part I lines 1	through 28 that Γ	Yes No	
	held for at least three years						
	npt purposes for the entire h					30a No	
	describe the arrangement i				Ē Ē		
			liev that requires the revia	w of any non-standard sa	ntributions?	31 No	
	e organization have a gift ac						
	e organization hire or use th tions?			olicit, process, or sell nor		32a Yes	
b If"Yes,"	' describe in Part II				Γ		
	ganızatıon dıd not report an 2 ın Part II	amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,		

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

Schedule M (Form 990) (2013) Page 2				
Part II Supplemental Information. Provide the information required by Part I, lines 30b,				
32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.				
Return Reference	Explanation			
	FOR THE AUCTION, THE ORGANIZATION USES A PROFESSIONAL FUNDRAISING SERVICE TO LIST NON-CASH CONTRIBUTIONS ON THEIR AUCTION WEBSITE FOR DONATIONS			

Schedule M (Form 990) (2013)

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -		DLN: 93493190000184
SCHEDULE O				OMB No 1545-0047
(Form 990 or 990-EZ)	Supplementa	Supplemental Information to Form 990 or 990-EZ		
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990 or 990-EZ.			2013 Open to Public Inspection
	Information about	Schedule O (Form 990 www.irs.gov/fo	or 990-EZ) and its instructions is at rm990.	
Name of the organization ROBERT F KENNEDY CENTER FOR JUSTICE		Employe	r identification number	
AND HUMAN RIGHTS			13-252	2784

990 Schedule O, Supplemental Information

Return Reference	Explanation			
FORM 990, PART VI, SECTION A, LINE 2	ETHEL KENNEDY, KERRY KENNEDY, JOE KENNEDY III, AND MATT KENNEDY ALL SERVED ON THE BOARD OF DIRECTORS DURING THE TAX YEAR AND ARE FAMILY RELATED			
FORM 990, PART VI, SECTION B, LINE 11	AN ACCOUNTING FIRM PREPARES THE FORM 990 AND THE DRAFT IS REVIEWED BY THE OUTSOURCED ACCOUNTANT, WHO COMPARES THE DRAFT TO THE AUDITED FINANCIAL STATEMENTS THE OUTSOURCED ACCOUNTANT AND THE EXECUTIVE DIRECTOR ADDRESS ANY AREAS OF CONCERN, AND THE FINAL FORM 990 IS FORWARDED TO THE MEMBERS OF THE BOARD OF DIRECTORS PRIOR TO FILING			
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY THE BOARD ADDRESSES ANY POTENTIAL OR POSSIBLE CONFLICTS WITH STAFF OR BOARD MEMBERS THERE IS A TRANSPARENT PROCESS IN WHICH ANY POSSIBLE CONFLICT ISSUE IS DISCUSSED WITH THE PERSON AND THEN OPENLY AMONG THE BOARD MEMBERS, WHO REVIEW THE SITUATION, AND MAKE RECOMMENDATIONS, APPROVALS AND DECISIONS THE EXECUTIVE COMMITTEE WILL TY PICALLY REVIEW THE SITUATION FIRST AND THE BOARD WILL TAKE INTO CONSIDERATION THEIR POSITION AS WELL			
FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT, CHIEF OPERATION OFFICER, AND EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED AND APPROVED BY THE CHAIRMAN OF THE BOARD THE CHAIRMAN USES FORM 990S OF OTHER ORGANIZATIONS, COMPENSATION SURVEYS, AND OTHER MEANS TO DETERMINE THE REASONABLENESS OF THE EXECUTIVE DIRECTOR'S COMPENSATION THE BOARD APPROVES THE COMPENSATION OF THE ONLY BOARD MEMBER WHO IS A KEY EMPLOYEE. THE EXECUTIVE DIRECTOR DETERMINES THE COMPENSATION OF THE OTHER STAFF USING BUDGET GUIDELINES, AS APPROVED BY THE BOARD THE COMPENSATION WAS LAST REVIEWED IN 2013			
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT AVAILABLE TO THE PUBLIC THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST			
FORM 990, PART IX, LINE 11G	SERVICES FOR STTP TRAINING INSTITUTE TRAININGS PROGRAM SERVICE EXPENSES 49,000 MANAGEMENT AND GENERAL EXPENSES 0 TOTAL EXPENSES 49,000 SERVICES FOR JUVENUE JUSTICE PROGRAM PROGRAM SERVICE EXPENSES 0 TOTAL EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 TOTAL EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 TOTAL EXPEN			