DLN: 93493287005354

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

foundations) ▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

Open to Public Inspection

A Fo	rthe 2	2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31	-2013								
B Che	eck if ap	oplicable C Name of organization Americans for Prosperity Foundation		D Employ	er ide	ntification number					
☐ Add	Iress cha	ange		52-15	27294	4					
┌ Nar	ne char	Doing Business As									
┌ Init	ıal retur	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telepho	ne num	her					
┌ Ter	Terminated 2111 Wilson Boulevard No 350										
┌ Am	Amended return City or town, state or province, country, and ZIP or foreign postal code										
<mark> ⊢</mark> Арр	lication	Arlington, VA 22201 pending	G Gross re	ceipts s	\$ 14,043,709						
		F Name and address of principal officer	H(a) Is th		•	· · ·					
		Tim Phillips		rdinates?	CCUIII	┌ Yes ┌ No					
		2111 Wilson Boulevard No 350 Arlington, VA 22201	11/6) .								
		, , , , , , , , , , , , , , , , , , ,	H(b) Are a		nates	Γ Y es Γ No					
I Ta	x-exem	pt status	If"N	o," attach	a lıst	(see instructions)					
J W	ebsite	: ► www.americansforprosperityfoundation org	H(c) Grou	up exemptı	on nur	mber ►					
K Forr	n of org	anization 🔽 Corporation 🗆 Trust 🗀 Association 🗀 Other 🕨	L Year of fo	mation 198	37 M	State of legal domicile DE					
Pa	rt I	Summary									
		Briefly describe the organization's mission or most significant activities									
aı.	╘	ducate US persons to increase awareness about a free economy									
ဋ	_										
Ē	_										
Governance	2 0	Check this box 🔭 if the organization discontinued its operations or disposed of	more than 2	25% of its	net as	ssets					
	3 N	Jumber of voting members of the governing body (Part VI, line 1a)			3	6					
Activities &	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)			4	4					
屋	5 ⊺	otal number of individuals employed in calendar year 2013 (Part V, line 2a) .			5	437					
F F	6 ⊺	otal number of volunteers (estimate if necessary)			6	500					
-		otal unrelated business revenue from Part VIII, column (C), line 12			7a	0					
	b∧	let unrelated business taxable income from Form 990-T, line 34			7b	0					
			Pric	or Year		Current Year					
g _i	8	Contributions and grants (Part VIII, line 1h)		22,234,0		12,976,019					
į.	9	Program service revenue (Part VIII, line 2g)		272,0	_	332,213					
Ravenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,1	_	2,232					
	11	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			0	0					
	12	12)		22,512,2	70	13,310,464					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		114,0	38	39,250					
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0					
83	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		7,011,5	28	10,664,964					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		31,7	50	56,930					
ੜੇ	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶3,048,148									
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		17,912,9	45	6,939,848					
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		25,070,2	61	17,700,992					
	19	Revenue less expenses Subtract line 18 from line 12		-2,557,9	91	-4,390,528					
Net Assets or Fund Balances				g of Curren /ear	ıt 📄	End of Year					
10 mg	20	Total assets (Part X, line 16)		11,822,2	79	8,012,392					
A B	21	Total liabilities (Part X, line 26)		1,192,5		1,773,194					
25	22	Net assets or fund balances Subtract line 21 from line 20		10,629,7		6,239,198					
Dat	t II	Signature Block		· ·							

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

Sign
Here

Signature of officer Tim Phillips President
Type or print name and title

Paid Preparer **Use Only**

Print/Type preparer's name David C Moja Preparer's signature Firm's name 🕨 Capin Crouse LLP Firm's address 🟲 972 Emerson Parkway STE A Greenwood, IN 46143

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

Form	1990 (2	013)				Page
Par	t III	Statement of Program Check if Schedule O contains			III	
1	Briefl	y describe the organization's m	ISSION			
Educ	ate US	persons to increase awarenes	of the operation ar	nd value of a free econo	my	
2		e organization undertake any s or Form 990 or 990-EZ? .	ignificant program s		which were not listed on	┌ Yes ┌ No
	If"Ye	s," describe these new service:	on Schedule O			
3	servic	e organization cease conductires?		nt changes in how it co	nducts, any program	┌ Yes ┌ No
4	expen		1 (c)(4) organizatior	ns are required to report	ree largest program services, as r t the amount of grants and allocat	
4a	(Code	, , ,			39,250) (Revenue \$ operation and value of a free economy	332,213)
4b	(Code	, , ,	• •	,) (Revenue \$ on the operation and value of a free ecor) nomy
4c	(Code) (Expenses	5	including grants of \$) (Revenue \$)
4d		r program services (Describe i	•	o. f . ⊄) (Revenue \$	1
		enses \$	including grants of	·) (Veseure à)
4e	Tota	program service expenses 🟲 👚	11,340,90	2		

Part 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^{\bullet}	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	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? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \blacksquare	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	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

art	V	Statements Regarding Other IRS Filings and Tax Compliand					_
		Check if Schedule O contains a response or note to any line in this Part V .			<u> </u>	Yes	.) No
1 a E	nter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	132			110
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	1		
		l e organization comply with backup withholding rules for reportable payments t	o vend	ors and renortable	_		
		g (gambling) winnings to prize winners?			1c	Yes	
Т	ax St	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered		407			
b If	at le	s return			2b	Yes	
		e organization have unrelated business gross income of \$1,000 or more durin			За		Νo
		s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanat</i>			3b		
٥٠	ver, a	time during the calendar year, did the organization have an interest in, or a sa financial account in a foreign country (such as a bank account, securities ac nt)?	count,	or other financial	4a		No
		s," enter the name of the foreign country					
11	ee in	s, enter the name of the foreigh country <u>F</u> structions for filing requirements for Form TD F 90-22 1, Report of Foreigh Ba	nk and	Financial Accounts	-		
		ne organization a party to a prohibited tax shelter transaction at any time duri	-	•	5a		Νo
b D	ıd an	y taxable party notify the organization that it was or is a party to a prohibited	tax she	elter transaction?	5b		No
c If	"Yes	s," to line 5a or 5b, did the organization file Form 8886-T?					
Sa D	nes t	the organization have annual gross receipts that are normally greater than \$1	00 000	and did the	5c 6a		No
		zation solicit any contributions that were not tax deductible as charitable con					110
W	ere n	s," did the organization include with every solicitation an express statement the not tax deductible?	hat suc • •	h contributions or gifts	6b	1	
	_	izations that may receive deductible contributions under section 170(c).			_		
S	ervic	e organization receive a payment in excess of \$75 made partly as a contribut es provided to the payor?			7a		N o
		s," did the organization notify the donor of the value of the goods or services p			7b		
		e organization sell, exchange, or otherwise dispose of tangible personal properm 8282?		which it was required to	7c		Νo
		s," indicate the number of Forms 8282 filed during the year	7d				
		•			1		
		e organization receive any funds, directly or indirectly, to pay premiums on a p ict?	oersona 	ıl benefit	7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a pers	onal be	nefit contract?	7f		No
		organization received a contribution of qualified intellectual property, did the c	organıza	ation file Form 8899 as	7g		
		organization received a contribution of cars, boats, airplanes, or other vehicle	s, dıd t	he organization file a	7h		
th	ne su	oring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring orgess holdings at any time during the year?	anızatı				
		oring organizations maintaining donor advised funds.			8		
		e organization make any taxable distributions under section 4966?			9a		
		e organization make a distribution to a donor, donor advisor, or related person			9b		
		on 501(c)(7) organizations. Enter			55		
		tion fees and capital contributions included on Part VIII, line 12	10a				
b G		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
		on 501(c)(12) organizations. Enter					
		income from members or shareholders	11a				
		income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b				
!a Se	ectio	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99	0 in lie	u of Form 1041?	12a		
b If	"Yes	s," enter the amount of tax-exempt interest received or accrued during the	12b				
•		on 501(c)(29) qualified nonprofit health insurance issuers.			1		
a Is	s the	organization licensed to issue qualified health plans in more than one state? See the instructions for additional information the organization must report on	Sched	ule O	13a		
b E	nter	the amount of reserves the organization is required to maintain by the states	13b				
		the amount of reserves on hand	13c		1		
		e organization receive any payments for indoor tanning services during the ta			14a		No
		s " has it filed a Form 720 to report these payments? If "No " provide an explan	•		14h		140

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax 6 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 Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Yes Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . Nο Nο Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . Yes **b** Each committee with authority to act on behalf of the governing body? . . Yes

9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Code	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	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?	164		
	ection C Disclosure	16b		
->E	iction t discinsure			

- List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, 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
- 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 ☐ 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 ▶Robert Heaton 2111 Wilson Boulevard No 350 Arlington, VA 22201 (703) 224-3200

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

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

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

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

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

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

		I								
(A) Name and Title	(B) Average	Pos	ition	(C)		chec	k	(D) Reportable	(E) Reportable	(F) Estimated
	hours per	more	than	one	box	c, unle	ess	compensation	compensation	amount of
	week (list any hours					offic ustee		from the	from related organizations	other compensation
	for related		a uii					organızatıon (W- 2/1099-	(W- 2/1099-	from the
	organizations	걸릴	l je	Officei	<u>©</u>	買賣	Former	` MISC)	` MÍSC)	organization
	below		1	₩.	9	S S	물			and related
	dotted line)	[호호	ti Oli		탉	8 g	`			organizations
		<u>, ≌</u>	3l T		Key employee	∄				
		Individual trustee or director	Institutional Trustee		"	∰				
		-	991			Highest compensated employee				
						Č				
(1) David Koch	2 00	x		х				0	0	0
Chairman										
(2) Nancy Pfotenhauer	2 00	x		х				0	0	0
Director										
(3) Dr Richard Fink	2 00	X						0	0	0
Director										
(4) Debra Gail Humphreys	2 00	l x						0	0	0
Director									_	
(5) Cy Nobles	2 00	×						0	0	0
Director										
(6) Dr Walter Williams	2 00	x						0	0	0
Director								Ŭ		
(7) Tım Phillips	20 00			X				137,340	206,010	31,132
President	30 00			^				137,540	200,010	51,152
(8) Tracy Henke	50 00			х				137,970	0	706
Executive Vice President				^				137,970	0	700
(9) Luke Hilgemann	42 00			х				182,185	35,038	14,737
Chief Operating Officer	8 00			_^				162,163	33,036	14,737
(10) John Flynn partial year	33 00			Х				112.000	CO C15	12 500
Vice President, Secretary,	17 00			^				113,089	60,615	12,598
(11) Teresa Oelke	35 00							120 110	50 764	0.003
VP, State Operations	15 00			Х				138,119	59,764	8,092
(12) Christopher Fink	38 00									
VP, Development	12 00			Х				199,523	60,954	14,437
(13) Jeff Crank partial year	31 00									
Chief Operating Officer	19 00			Х				74,999	46,676	23,995
(14) Victor Bernson	43 00									_
VP & General Counsel	7 00			Х				41,384	6,348	2,486
(15) Nolan Ingebrigtson	25 00									
CFO/Treasurer	25 00			Х				0	0	0
(16) Steve Corder partial year	29 50									_
VP, Treasurer, CFO	20 50			Х				51,350	35,685	12,983
(17) JP Degance partial year	42 50									_
VP External Affairs	7 50			Х				40,940	7,225	4,349
er External Analis	/ 30	<u> </u>				1		l		Form 990 (2013)
										1 01111 220 (2013)

CMI Communications 400 Mile Crossing Blvd Rochester NY 14624

\$100,000 of compensation from the organization $\blacktriangleright 9$

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

			1						1				
	(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot rect	note bo tha or/t	chec x, unle n offic rustee	ess er	(D) Reportable compensatio from the organization (W- 2/1099	from relate organizatio	ion ed ns	Estim amount comper from organiz	nated of other nsation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	3 -	and re organiz	lated
(18)	Eric Wang partial year	36 00					x		05.1	507 26	5 0 20		0.005
Intern	m Legal Counsel	14 00					<u> </u>		95,!	567	5,838		9,095
(19)	Derrick Sontag	41 00					l x		131,:	102 30	0,570		11,502
	Director	9 00				_	<u> </u>						
, ,	Robert Stuber	20 00					x		61,	504 95	5,496		10,977
	or of Development - Direct Marketing David From	30 00 38 00		-		┢	1						
` '	Director	12 00					×		86,6	584 28	8,560		21,894
(22)	Corey Lewandowskı	49 50							127	703	200		25 510
Regio	nal Director of State Operations	50					X		127,7	703	299		25,519
							1						
						-	+	-					
				_		_	-						
1b	Sub-Total						P	<u> </u>		I			
c	Total from continuation sheets to Part	VII, Section A					▶ -						
d	Total (add lines 1b and 1c)						▶		1,619,479	710,0	78		204,502
2	Total number of individuals (including b				ed a	bov	e) who	rec	eived more tha	n			
	\$100,000 of reportable compensation	iroin the organiz	2ation#	-23									
										,	_	Yes	No
3	Did the organization list any former offi on line 1 a? <i>If "Yes," complete Schedule 3</i>			e, ke	y en	nplo	yee, o	r hig	ghest compens	ated employee			
	· ·			•	•		•	• •			3		No
4	For any individual listed on line 1a, is torganization and related organizations individual										4	Yes	
5	Did any person listed on line 1a receive	or accrue com	pensat	tion f	rom	any	unrel	ated	d organization o	r individual for	_	1	
	services rendered to the organization?	If "Yes," comple	te Sche	edule	J for	suc	ch pers	son			5		No
	ection B. Independent Contracto												
1	Complete this table for your five highes		ındepe	nder	nt co	ntra	actors	tha	t received more	than \$100,000	0 of		
	compensation from the organization Re	port compensa								nin the organizat			
		(A) ousiness address						_	Descr	(B) iption of services		(C Comper	
	ml PO Box 1360 Glen Burne MD 21061	91503							Marketing				307,082
	Chalk Media LLC PO Box 2123 Grand Junction CO Dutions Inc 1133 19th St SW 10th Floor Washington								Media IT Support Se	ervices			302,000 262,369
	ing Solutions 6747 E 50th Avenue Commerce City									Design, Distribution			173,094

2 Total number of independent contractors (including but not limited to those listed above) who received more than

131,296

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Service Revenue	2a b c d e f g 3 4 5
	3 4 5 6a b c d 7a
Other Revenue	d 8a b c 9a b
	b c 11a b c d e

/III	Statement o Check if Schedu	f Revenue ule O contains a respo	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated camp	paigns 1a					
ь	Membership du	es 1b					
c	Fundraising eve	ents 1 0					
l <u>.</u>							
d		zations 1d					
е	Government grants	s (contributions) 1e					
f	All other contribution	ons, gifts, grants, and 1f ot included above	12,976,019				
g	Noncash contribution 1a-1f \$	ons included in lines	1,006,045				
h	Total. Add lines	s 1a-1f		12,976,019			
			Business Code				
2a	Registration Fees		900099	171,759	171,759		1
ь	Program Service C	harge	900099	160,454	160,454		
c							
d							
е							
f	All other progra	am service revenue					
g	Total. Add lines	s 2a – 2f		332,213			
3		ome (including dividen		·			
	and other simila	aramounts)	•	2,232			2,232
4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·				
5	Royalties		🕨				
63	Gross rents	(ı) Real	(II) Personal				
b	Less rental						
	expenses Rental income						
°	or (loss)						
d	Net rental inco	me or (loss)					
7a	Gross amount	(ı) Securities	(II) Other				
′	from sales of assets other	733,245					
	than inventory Less cost or						
b	other basis and	733,245					
c	sales expenses Gain or (loss)	0					
d	Net gain or (los	is)		0			
8a	Gross income f events (not inc						
		s reported on line 1c)					
1	See Part IV, lin	a					
b	Less direct ex	penses b					
С	Net income or ((loss) from fundraising	events 🛌				
9a	Gross income f See Part IV, lin	rom gaming activities ie 19 • • •					
ь	Less direct ex	a penses b					
		(loss) from gaming act					
10a	Gross sales of returns and allo	owances .					
1 .		a					
	_	oods sold b	a n to m :				
c	Net income or ((loss) from sales of inv	entory Business Code				
11a	, nacenaneous	. Nevellue	Dasiness code				
ь							
c							
d	All other reven	ue					
e		s 11a-11d					
12		See Instructions .	. -				
	. otal levellue.	SECTION ACTIONS	· · · · •	13,310,464	332,213	(2,232

	990 (2013)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al			lete column (A)	
	Check if Schedule O contains a response or note to any line in this		(B)	(c)	<u>.</u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	39,250	39,250		•
2	Grants and other assistance to individuals in the United States See Part IV, line 22		,		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and				
	key employees	1,195,626	357,908	435,344	402,374
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	7,870,642	5,520,935	899,350	1,450,357
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	182,492	118,361	26,855	37,276
9	Other employee benefits	663,905	412,107	197,011	54,787
10	Payroll taxes	752,299	446,990	136,111	169,198
11	Fees for services (non-employees)				
а	Management				
b	Legal	10,678		10,678	
c	Accounting	27,752	1,250	23,751	2,751
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	56,930			56,930
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	739,717	357,580	353,385	28,752
12	Advertising and promotion	988,452	956,180	8,270	24,002
13	Office expenses	882,335	545,086	207,377	129,872
14	Information technology	349,423	110,120	197,721	41,582
15	Royalties	211,122			,
16	Occupancy	1,007,578	310,314	622,367	74,897
17	Travel	1,708,367	1,286,899	81,143	340,325
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	27:22722	2,231,331	55,515	
19	Conferences, conventions, and meetings	936,820	800,355	42,947	93,518
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	192,236	48,059	38,407	105,770
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	Taxes, licenses, fees	32,412	8,758	20,156	3,498
b	Membership	26,823	20,750	2,531	3,542
С.		+		 	
d	A II shi sa sangara				
е	All other expenses	37,255		8,538	28,717
25	Total functional expenses. Add lines 1 through 24e	17,700,992	11,340,902	3,311,942	3,048,148
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X	Balance Sheet

Par	rt X	Check if Schedule O contains a response or note to any line in t	this Part X			
				(A)		(B)
	1			Beginning of year		End of year
	1	Cash-non-interest-bearing		8,791,542		5,692,856
	2	Savings and temporary cash investments		1,005,631		
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		130,662	4	6,338
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	art II of		5	
ts	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary elorganizations (see instructions) Complete Part II of Schedule	contributing employers mployees' beneficiary		6	
Assets	7	Notes and loans receivable, net			7	
ď	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		229,029	<u> </u>	322,474
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1	,	3	<u> </u>
	ь	Less accumulated depreciation	10b 531,82	9 546,778	10c	1,125,566
	11	Investments—publicly traded securities	,		11	1,120,000
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11			13	
	14				14	
	15	Intangible assets		1,118,637		865,158
	16	Other assets See Part IV, line 11		11,822,279		8,012,392
	17	Accounts payable and accrued expenses		1,192,097	17	1,210,855
				1,192,097	18	1,210,005
	18	Grants payable			19	
	19	Deferred revenue				
	20	Tax-exempt bond liabilities			20	
S S	21	Escrow or custodial account liability Complete Part IV of Scho			21	
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqualr	fied			
<u> </u>		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third partie		23		
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of Schedule	456	25	562,339
	26	Total liabilities. Add lines 17 through 25		1,192,553		1,773,194
Ф •	20	Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.		1,102,000	20	1,110,101
ă	27	Unrestricted net assets		9,814,639	27	5,960,473
<u>।</u>	28	Temporarily restricted net assets		815,087	28	278,725
Fund Balance	29	Permanently restricted net assets		111,001	29	
ŭ		Organizations that do not follow SFAS 117 (ASC 958), check h			23	
or F		complete lines 30 through 34.	ere i was			
0	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
ΑS	32	Retained earnings, endowment, accumulated income, or other f			32	
Šet	33	Total net assets or fund balances		10,629,726	33	6,239,198
Z	34	Total liabilities and net assets/fund balances		11,822,279	34	8,012,392
			<u> </u>	1,522,270		7,012,002

Par	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		13,3	310,464
2	Total expenses (must equal Part IX, column (A), line 25)	2		17	700,992
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				390,528
5	Net unrealized gains (losses) on investments	5		10,6	529,726
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		6,2	239,198
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of tl	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ie	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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As Filed Data -

DLN: 93493287005354

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Open to Public **Inspection**

Name o	of t	he	organiz	ati	on
Americar	is fo	or P	rosperity	Foι	ındatıc

Employer identification number

			ı	i	Yes	No	Yes	No				
(i) Name o supported organizatio		ted	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	your governing support? document?		(vi) Is organiza col (i) or in the l	tion in ganized	mon	mount of etary port		
h		Provide	the following	ng information about	the support	ed organıza	tion(s)					
		(ii) A fa	amıly memb	er of a person descri lled entity of a perso	bed in (i) ab	ove?				119	g(ii) g(iii)	
		(i) A p		rectly or indirectly o				persons d	escribed in (ii		Yes g(i)	No
f g		If the o check t Since A	rganization this box August 17, 2	received a written do						e III suppor	tıng organı	zation,
e	Γ	other tl		ox, I certify that the on managers and otl								
11	Γ	one or the box	more publici that descri	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr orting organ	nbed in sec ization and	tion 509(a)(1 complete line) or section es 11e thro	n 509(a)(2) s ugh 11h	See section	509(a)(3).	. Check
10	Γ			ganızed and operated								
				oss investment inco ganization after June						tax) from b	usinesses	
	,			ities related to its ex								
8 9	 -			described in sectior at normally receives					ubutions mer	nhershin fee	s and aros	55
7	_ -	describ	ed in sectio	at normally receives on 170(b)(1)(A)(vi).	(Complete F	Part II)		_	nental unit or	from the ger	neral public	3
6	Γ			local government or		tal unit des	cribed in sect	ion 170(b)	(1)(A)(v).			
	'	_	•	A)(iv). (Complete P	=		it, omica or c	peracea by	a governmen	icar ame aco	cribed iii	
5	Г			ty, and state erated for the benefi	t of a college	or univers	ity owned or o	pperated by	a governmei	ntal unit des	cribed in	
4	Г	A medi	cal research	n organization operat	ted in conjun	ction with a	a hospital des	cribed in s	ection 170(b)	(1)(A)(iii).	Enter the	
3	<u></u>			perative hospital se				on 170(b)(1	L)(A)(iii).			
2	<u></u>		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
1												
Part				blic Charity Starte foundation because						instructions	5.	
					. () !!				52-1527			

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🕨 Gifts, grants, contributions, and membership fees received (Do 10,375,217 16,922,075 24,846,639 22,234,000 12,976,019 87,353,950 not include any "unusual grants ") 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 10,375,217 16,922,075 24,846,639 22,234,000 12,976,019 87,353,950 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 24,239,936 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 63,114,014 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total beginning in) 🟲 10,375,217 16,922,075 24,846,639 22,234,000 12,976,019 87,353,950 Amounts from line 4 Gross income from interest, dividends, payments received on 236,580 69,499 45,704 6,199 2,232 360,214 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 73,712 1,617 2,696 78,025 capital assets (Explain in Part IV) 11 Total support (Add lines 7 87,792,189 through 10) Gross receipts from related activities, etc (see instructions) 12 12 1,469,356 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 14 71 890 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 70 400 % 16a 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 ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	in) ►		 ` '	, ,	<u> </u>	. ,	
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
7	organization's benefit and either						
	paid to or expended on its						
	behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)				1		
	ndar year (or fiscal year beginning	I				I	
Care	in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	1017 E-						
9	A mounts from line 6						
9 10a	,						
	Amounts from line 6						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after						
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after						
10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included						
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for	or the organization	on's first, second	, third, fourth, or f	fifth tax year as a	1 501(c)(3) organ	
10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fe check this box and stop here		·	, thırd, fourth, or f	fifth tax year as a	1 501(c)(3) organ	nization, ▶
10a b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe	ercentage		fifth tax year as a		
10a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (ercentage f) divided by line		fifth tax year as a	15	
10a b c 11 12 13 14 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the check this box and stop here	ic Support Pe (line 8, column (ercentage f) divided by line		fifth tax year as a		
10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Puble Public support percentage for 2013	ic Support Pe (line 8, column (2 Schedule A, Pa	ercentage f) divided by line art III, line 15	13, column (f))	fifth tax year as a	15	
10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ection C. Computation of Pub Public support percentage from 201	ic Support Pe (line 8, column (2 Schedule A, Pa estment Inco	ercentage f) divided by line art III, line 15 me Percenta	13, column (f))		15	
10a b c 11 12 13 14 Se 15 16 Se 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the section C. Computation of Public support percentage for 2013 Public support percentage from 201 ction D. Computation of Inventional section of Invention of Invention in the section of Inventional se	ic Support Pe (line 8, column (2 Schedule A, Pa estment Inco 2013 (line 10c, co	ercentage f) divided by line art III, line 15 me Percentage blumn (f) divided	13, column (f)) ge by line 13, colum		15 16	
10a b c 11 12 13 14 See 15 16 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the sale of th	ic Support Per (line 8, column (2 Schedule A, Parestment Inco 2013 (line 10 c, con 2012 Schedule A	ercentage f) divided by line art III, line 15 me Percentag blumn (f) divided A, Part III, line 1	13, column (f)) ge by line 13, colum 7	n (f))	15 16 17 18	▶

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru			
Facts And Circumstances Test					
Retu	ırn Reference	Explanation			
		Schodulo A / Form 0	000 er 000 E7) 201		

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493287005354

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

Inspection

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

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Americans for Prosperity Foundation 52-1527294 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955

Enter the amount of any excise tax incurred by organization managers under section 4955 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made?

If "Yes," describe in Part IV

Part	I-C Complete if the organization is exempt under section 501(c), except section	1 50	01(c)(3).
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	 -	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	•	\$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	F	.

Did the filing organization file Form 1120-POL for this year? ☐ Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

encadio o (i	01111 330 01 330 22 / 2013		ı ağı
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form	5768	(election
	under section 501(h)).		

Check	▶ □	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		expenses, and share of excess lobbying expenditures)
	. —	

В	Check F if the filing organization checked box	, , ,		
	Limits on Lobbying E (The term "expenditures" means an		(a) Filing organization's totals	(b) Affiliate group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	0	
C	Total lobbying expenditures (add lines 1a and 1b)	0	
d	Other exempt purpose expenditures		17,700,992	
е	Total exempt purpose expenditures (add lines 1	and 1d)	17,700,992	
f	Lobbying nontaxable amount Enter the amount f columns	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e	1 1 1	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	† I I	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000

nter-0-	
---------	--

h Subtract line 1g from line 1a If zero or less, enter -0-

j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting
	section 4911 tax for this year?

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

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total				
2a	Lobbying nontaxable amount				0					
b	Lobbying ceiling amount (150% of line 2a, column(e))									
С	Total lobbying expenditures				0					
d	Grassroots nontaxable amount				250,000	250,000				
e	Grassroots ceiling amount (150% of line 2d, column (e))					375,000				
f	Grassroots lobbying expenditures									

	a" reamons a to lines. In through 1, below, provide in Part IV a detailed description of the lebbying		a)		
ctivity.	s" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	Yes	No		b) ount
legisl	g the year, did the filing organization attempt to influence foreign, national, state or local ation, including any attempt to influence public opinion on a legislative matter or referendum, gh the use of		1		
a Volur	nteers?				
b Paid	staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	a advertisements?				
	ngs to members, legislators, or the public?				
	cations, or published or broadcast statements?				
	ts to other organizations for lobbying purposes?				
	t contact with legislators, their staffs, government officials, or a legislative body?			-	
	es, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	ractivities?				
_	Add lines 1c through 1i		ı		
	ne activities in line 1 cause the organization to be not described in section 501(c)(3)? es," enter the amount of any tax incurred under section 4912			-	
	es," enter the amount of any tax incurred by organization managers under section 4912				
	filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ı		
	A Complete if the organization is exempt under section 501(c)(4), section	2 501(0	1(5)	or seci	tion
ait III	501(c)(6).	. 501(0)(3),	or sec	
				Y	es N
1 Were	substantially all (90% or more) dues received nondeductible by members?		[1	
2 Did th	ne organization make only in-house lobbying expenditures of \$2,000 or less?			2	
	ne organization agree to carry over lobbying and political expenditures from the prior year?			3	
Part III-	B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."				
1 Dues	, assessments and similar amounts from members	1			
	on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political nses for which the section 527(f) tax was paid).				
	ent year	2a	<u> </u>		
	over from last year	2b			
c Total		2c			
	egate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
	ices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exces the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	5			
	cal expenditure next year?	4			
5 Taxa	ble amount of lobbying and political expenditures (see instructions)	5			
Part IV	Supplemental Information				
	ne descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g line 1 Also, complete this part for any additional information	roup list)	, Part I	I-A , line	2, an
	Return Reference Explanation				
orm 990,	Schedule C The organization has an election under section 501(h) in effect, howe expenditures during the tax year ended 12/31/13	ver it did	not hav	e any lo	bbyin

201104410 0 (101111 330 01 330 12) 2013		r age -			
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				
l					

Schedule D (Form 990) 2013

DLN: 93493287005354

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

nal Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspect	ion
Name of the organization Americans for Prosperity Foundation			Emp	ployer ident if ica	tion numbe	r
nericans for Prosperity	, Foundation		52-	1527294		
	izations Maintaining Donor Adv				. Complet	e ıf th
organiz	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds	1	(b) Funds and	other accou	nte
Total number at	t end of year	(a) Donor advised funds	-	(b) Fullus allu (other accou	IILS
	ributions to (during year)					
	its from (during year)					
Aggregate valu	e at end of year					
	ration inform all donors and donor advisor rganization's property, subject to the or		nor adv	ised	☐ Yes	┌ No
used only for cl	ration inform all grantees, donors, and do haritable purposes and not for the benef				☐ Yes	□ No
	ermissible private benefit? rvation Easements. Complete if	the organization answered "Yes"	to Forr	m 990 Part I\	,	, 140
Preservation Protection Preservation Complete lines	conservation easements held by the orgon of land for public use (e g , recreation of natural habitat on of open space	or education) Preservation of a Preservation of a	certifie	ed historic struc	ture	
easement on th	ne last day of the tax year			T		
Total number o	f conservation easements		2a	Held at the	End of the	Year
-"	restricted by conservation easements		2a 2b			
-	servation easements on a certified histo	oric structure included in (a)	2c			
Number of cons	servation easements included in (c) acq ire listed in the National Register	• • • • • • • • • • • • • • • • • • • •	2d			
	servation easements modified, transferr	ed, released, extinguished, or terminat	ted by tl	he organızatıon	during	
Number of stat	es where property subject to conservati	ion easement is located 🛌				
	nization have a written policy regarding t the conservation easements it holds?	the periodic monitoring, inspection, hai	ndling o	f violations, and	┌ Yes	┌ No
Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements	during the year		
-	enses incurred in monitoring, inspecting	, and enforcing conservation easemen	ts durın	g the year		
Does each con and section 17	servation easement reported on line 2(o 0(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ection 1	70(h)(4)(B)(ı)	┌ Yes	┌ No
balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the n's accounting for conservation easeme	e footnote to the organization's financia				
	izations Maintaining Collection ete if the organization answered "Y		, or Ot	her Similar	Assets.	
works of art, his	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furthera		
works of art, his	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e the following amounts relating to thes	ts held for public exhibition, education				ıc
(i) Revenues II	ncluded in Form 990, Part VIII, line 1			► \$		
(ii) Assets incl	luded in Form 990, Part X			► \$		
	•					
	tion received or held works of art, histor nts required to be reported under SFAS	ical treasures, or other similar assets 116 (ASC 958) relating to these item:		ncıal gaın, provid	de the	
following amoui					de the	

Par	4 💵 Organizations Maintaining Co	<u>llections of Art,</u>	Hist	ori	<u>cal Treas</u>	<u>ures, or Ot</u>	the	<u>r Similar As</u>	sets (d	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ls, che	eck	any of the fo	llowing that a	re a	sıgnıfıcant use	ofits	
a	Public exhibition		d	\sqcap	Loan or exc	change progra	ams			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how	the	y further the	organization'	s ex	empt purpose	ın	
5	During the year, did the organization solicit o								_	_
Dos	assets to be sold to raise funds rather than t								Yes	No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					on answered	1 1	es to Form s	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary f	for c	ontributions	or other asse	ets r		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	followi	ng t	able	_				
								Ar	nount	
С	Beginning balance					_	1c			
d	Additions during the year						1d			
e	Distributions during the year					<u> </u>	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						│ Yes	∏ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	explai	natı	on has been	provided in P	art)	KIII		
Pa	rt V Endowment Funds. Complete									
1a	Beginning of year balance	(a)Current year	(b)F	Prior	year b (c)	Two years back	(d)1	hree years back	(e)Four	ears back
ь	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curi	ent vear end halanc	e (line	1 a	column (a))) held as	I			
– a	Board designated or quasi-endowment	ent year end barane	c (iiiic	9	, corumn (u))	, ileia as				
b	Permanent endowment									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shot	ıld equal 100%								
3a	Are there endowment funds not in the posses		tion th	hat a	are held and	administered	for	the		
	organization by								Yes	No
	(i) unrelated organizations			•			•	3a		<u> </u>
	(ii) related organizations							3a(_	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the						•	3	b	<u> </u>
	t VI Land, Buildings, and Equipme					wered 'Yes'	to	Form 990. Pa	art IV. I	ıne
	11a. See Form 990, Part X, line :				nearion and					
	Description of property) Cost or other sis (investment)			(c) Accumulated depreciation	(d) B	ook value
1a	Land									
	Buildings									
b	bullatings								_	
	Leasehold improvements					382,7	748	187,23	9	195,509
c	•					382,7 276,2	$\overline{}$	187,23 147,41	_	•
c d e	Leasehold improvements					276,2 998,4	242 405	147,41 197,18	0	195,509 128,832 801,225

See Form 990, Part X, line 12.	mpiete if the organization	answered 'Yes' to Form 99	u, Part IV, line IID.
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year marke	et value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. C	omplete if the organizatio	n answered 'Yes' to Form 9	90, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation	 on
	(=, = = = = = = = = = = = = = = = = = =	Cost or end-of-year marke	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organization			
(a) Descr	ription		(b) Book value
(1) Deposits			180,502
(2) Due from affiliate			684,656
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1	15.)		865,158
Part X Other Liabilities. Complete if the organization			
Form 990, Part X, line 25.	(h) Dealerealer		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Due to affiliate	562,339		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	562,339		

Part		evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1		ıts W	ith Re	venue	per R	eturn Complete If
1		r support per audited financial statements					1	T
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12						
а	Net unrealized gains on invest	ments	2a					
b	Donated services and use of fa	acilities	2b				1	
c	Recoveries of prior year grants	5	2c				1	
d	Other (Describe in Part XIII)		2d				1	
e	Add lines 2a through 2d .		٠				2e	
3	Subtract line 2e from line 1 .						3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1						
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a					
b	Other (Describe in Part XIII)		4b				1	
С	Add lines 4a and 4b		· .	٠			4c	
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)				5	
Part		xpenses per Audited Financial Sta			Vith E	xpense	s per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line						_
1	,	raudited financial statements		•			1	
2		t not on Form 990, Part IX, line 25						
а	Donated services and use of fa	acilities	2a	_			_	
b	, ,		2b				_	
C			2c					
d	Other (Describe in Part XIII)		2d				_	
e	Add lines 2a through 2d				•		2e	
3							3	
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:						
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a				_	
b	Other (Describe in Part XIII)		4b				_	
C	Add lines 4a and 4b						4c	
5		nd 4c. (This must equal Form 990, Part I, line	18)				5	
Part	Supplemental Inf	ormation						
Part		Part II, lines 3, 5, and 9, Part III, lines 1a a lines 2d and 4b, and Part XII, lines 2d and						de any additional
	Return Reference	Explanation						
Part X	, Line 2	The financial statement effects of a tax post consolidated financial statements when it is the position will be sustained upon examinate expenses in the consolidated statements of Organization had no uncertain tax positions consolidated financial statements. The Organization by federal taxing authorities	s more ition I factiv s that o	likely nteres ities <i>A</i> qualify	than n t and p As of D for rec	ot, based enalties, i ecember 3 ognition o	on the If any, a 31, 20: r discl	technical merits, that are included in 13 and 2012, the osure in the

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

DLN: 93493287005354

OMB No 1545-0047

Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information Regarding

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

Name of the organization

Employer identification number

			52-1527294	
Part I Fundraising Activities. Complete if Form 990-EZ filers are not required to			o Form 990, Part IV,	, line 17.
Indicate whether the organization raised funds thrown in the property of the	e f g ent with any indi- entity in connec tities (fundraise)	Solicitation of non-Solicitation of gove Special fundraising vidual (including officerstion with professional fundraisional fund	government grants ernment grants g events s, directors, trustees undraising services?	V Yes
or entity (fundraiser)	(iii) Dıd fundraıser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1 A merican Philanthropic 18 North Church St 2 West Chester, PA 19382	Yes No	0	56,930	-56,930
2				
3				
4				
5				
6				
7				
8				
9				
10				
Total			56,930	-56,930

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, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT,

Pa	rt II	more than \$15,000 of fundra	aising event contribu			
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
######################################		(event type)	(event type)	(total number)		
E CE	1	Gross receipts				
έVe	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)	(add col (a) through col (col)			
	4	Cash prizes				
ம	5	Noncash prizes				
Expense	6	Rent/facility costs				
	7	Food and beverages .				
	8	Entertainment				
출	9	Other direct expenses .				
	10	Direct expense summary Add line	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Subtract lir	ne 10 from line 3, colum	n (d)		
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Φ		\$13,000 ON TOTAL 330 EZ, III		(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
welku				bingo/progressive bingo		
<u>~</u>	1	Gross revenue				
Ses	2	Cash prizes				
xpen	3	Non-cash prizes		(c) Other events (add col (a) through col (c)) (event type)		
	4	Rent/facility costs				
ㅁ	5	Other direct expenses				
	6	Volunteer labor	_	1_	_	
	7	Direct expense summary Add lines	3 2 through 5 in column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ition operates gaming a	ctivities		
а				•		Fyes Fno
b	If"	No," explain				
10a b						· · 「Yes 「No

_							11
Does	s the organization operate gaming activit					Yes No	ɔ
12	Is the organization a grantor, beneficia	•			•		
	formed to administer charitable gaming	17				· · Fyes	Γ _{No}
13	Indicate the percentage of gaming acti	vity operated in					
а	The organization's facility				-		%
b	An outside facility				13b		%
14	Enter the name and address of the pers	on who prepares th	ie organization's gan	ning/special events	s books and rec	ords	
	Name 🟲						
	Address►						
15a b	Does the organization have a contract revenue?	venue received by	the organization 🟲 \$			· · 「Yes	Гио
c	If "Yes," enter name and address of the	e third party					
		,					
	Name 🕨						
	Address ►						
16	Gaming manager information						
	Name 🕨						
	Gaming manager compensation 🟲 \$						
	Description of services provided						
17 a	Director/officer Mandatory distributions Is the organization required under stat retain the state gaming license?		table distributions fr		ceeds to	_	-
b	Enter the amount of distributions requi	red under state law	distributed to other			Г Yes	J No
Pai	rt IV Supplemental Information Part III, lines 9, 9b, 10b, 15 additional information (see)	on. Provide the e b, 15c, 16, and 1	xplanations requi				, and
	Return Reference			Explanation			
		<u> </u>					

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General Information on Grants and Assistance

Schedule I

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Americans for Prosperity Foundation

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

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

OMB No 1545-0047

DLN: 93493287005354

Open to Public **Inspection**

Employer identification number

52-1527294

		o Governments and receive					"Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grai or assistance
1) Georgia Public Policy Foundation 3200 Cobb Galleria Parkway Ste 214 Atlanta, GA 30339	58-1943161	501 (c) 3	9,250				Program Support
2) United Sportsmen of Wisconsin Foundation Inc L3201 Hostack Road Maribel, WI 54227	46-1633617		30,000				Program Support

Part I, Line 2

(a)Type of grant or assistance

(b) Number of

(f)Description of non-cash assistance

Ī	Grants and Other Assistance to Individuals in the United States. Compl	ete if the organization answered	"Yes" to Form 990,	Part IV, line 22.
_	Part III can be duplicated if additional space is needed.	, and the second	•	ŕ

(d)A mount of

(e)Method of valuation

(c)A mount of

(a) Type of grant of assistance	recipients	cash grant	non-cash assistance	(book, FMV, appraisal, other)	(1)Description of non-cash assistance
Part IV Supplemental Inf	formation. Provide the inf	ormation required in Pa	rt I, line 2, Part III, col	umn (b), and any other a	dditional information.
	Explanation				

Grant funds were paid pursuant to an agreement requiring the recipient to expend the funds for appropriate purposes

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DLN: 93493287005354

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Open to Public Inspection

Name of the organization Americans for Prosperity Foundation **Employer identification number**

52-1527294

Pa	Part I Questions Regarding Compensation	·		
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or 990, Part VII, Section A, line 1a Complete Part III to provide any relevant inform			
	▼ First-class or charter travel	residence for personal use		
	Travel for companions Payments for busines	ss use of personal residence		
	□ Tax idemnification and gross-up payments □ Health or social club	dues or initiation fees		
	☐ Discretionary spending account ☐ Personal services (e	g , maid, chauffeur, chef)		
b	b If any of the boxes in line 1a are checked, did the organization follow a written poli reimbursement or provision of all of the expenses described above? If "No," comp		Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expens directors, trustees, officers, including the CEO/Executive Director, regarding the i		Yes	
		2	165	
3	Indicate which, if any, of the following the filing organization used to establish the organization's CEO/Executive Director Check all that apply Do not check any boused by a related organization to establish compensation of the CEO/Executive D	exes for methods		
	▼ Compensation committee	contract		
		•		
	Form 990 of other organizations Approval by the board	d or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a will or a related organization	th respect to the filing organization		
a	a Receive a severance payment or change-of-control payment?	4a	Yes	
b	b Participate in, or receive payment from, a supplemental nonqualified retirement pla	an? 4b		Νo
C	c Participate in, or receive payment from, an equity-based compensation arrangeme	ent? 4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts	for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization person compensation contingent on the revenues of	pay or accrue any		
а	a The organization?	5a		No
Ь	b Any related organization?	5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization proper compensation contingent on the net earnings of	pay or accrue any		
а	The organization?	6a		No
b	b Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization payments not described in lines 5 and 6? If "Yes," describe in Part III	provide any non-fixed 7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a c			
	subject to the initial contract exception described in Regulations section 53 4958	3-4(a)(3)? If "Yes," describe		
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption processection 53 $4958-6(c)$?	edure described in Regulations 9		

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

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

Note. The sum of columns (B)(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	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Tım Phillips President	(i) (ii)	103,340 155,010	/		3,060 4,590		1	
(2)Luke Hilgemann Chief Operating Officer	(i) (ii)	115,089 22,134			5,491 1,056		'	
(3)John Flynn partial year Vice President, Secretary,	(i) (ii)			0	3,418 1,832		•	
(4)Teresa Oelke VP, State Operations	(i) (ii)				4,144 1,793			
(5)Christopher Fink VP, Development	(i) (ii)				5,860 1,790			
(6)Derrick Sontag State Director	(i) (ii)		/		3,933 917			
(7)Robert Stuber Director of Development - Direct Mar	(i) (ii)	54,844 85,156	, ,		1,845 2,865		1	
(8)Corey Lewandowski Regional Director of State Operation	(i) (ii)	105,754			4,254 10			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

tibe complete the part for any addition	THE THIRD THE CONTROL OF THE CONTROL
Return Reference	Explanation
•	First class travel may be provided if there are last minute flight changes and there is no other available travel alternative. All travel is for a bona fide business purpose
,	Steve Corder, the now former Vice President, Treasurer and CFO received a severance payment in the amount of \$12,692 from the organization and related organization. Likewise, Tracy Henke, the now former Executive Vice President, received a severance payment in the amount of 114,500 from the organization and related organization.
Part I, Line 7	Employees are eligible to receive discretionary bonuses based on performance

Schedule J (Form 990) 2013

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DLN: 93493287005354

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

Name of the organization

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b Column		cess Benefit Transactions (section 501(c)(3) and section 501 applete if the organization answered "Yes" on Form 990, Part IV, line 25a me of disqualified person amount of tax incurred by organization managers or disqualified persons. amount of tax, if any, on line 2, above, reimbursed by the organization. coans to and/or From Interested Persons. omplete if the organization answered "Yes" on Form 990-EZ, Part V, line rganization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) (c) (d) Loan to (e) Original principal or from the organization organization organization? To From To From	E04()(1)	52-1527294									
(a) Name of disqualified person (b) Relationship between disqualified person of transaction (c) Description of transaction (d) Correct Yes N (e) Description of transaction (d) Correct Yes N (e) Description of transaction (e) Description of transaction (f) N (i) Relationship between disqualified persons during the year under section (ii) State of the organization answered transaction in the principal and organization reported an amount of tax, if any, on line 2, above, reimbursed by the organization												406	
person and organization Test the amount of tax incurred by organization managers or disqualified persons during the year under section 1958		nter the amount of tax incurre 958 nter the amount of tax, if any II Loans to and/or is Complete if the organiz organization reported a ame of (b) Relationship with organization											recte
III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Iame of Relationship With organization Purpose of Ioan Io	(,						(-)				·		No
III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Iame of Relationship With organization Purpose of Ioan Io		Excess Benefit Tran Complete if the organization a) Name of disqualified person er the amount of tax incurre is a er the amount of tax, if any, Loans to and/or F Complete if the organization reported a ne of (b) Relationship with organization Grants or Assistan Complete if the orga me of interested person (b) Re interested person (c) Relationship with organization (d) Re interested person											-
III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Iame of Relationship With organization Purpose of Ioan Io						on 501(c)(3) and section 501(c)(4) organizations only). on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40 ship between disqualified in and organization managers or disqualified persons during the year under section		•					
III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Iame of Relationship With organization Purpose of Ioan Io													
III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Iame of Relationship With organization Purpose of Ioan Io													•
Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Idame of (b) (c) (d) Loan to or from the organization or from the organization or from the organization? To From (From (F	4958 .							the year	r unde • •	rsection	n		
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Jame of rested rested rest of the organization of the organization or from the	Enter the a	amount of ta	x, ıf any, on l	ıne 2, above	, reimbursed l	by the organizat	ion			> \$			
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Jame of rested rested rest of the organization of the organization or from the		one to s-	d/or From	n Into-o-	tod Dorses								
arme of rested Relationship with organization Promoted an amount on Form 990, Part X, line 5, 6, or 22 To From Yes No Ye							/ line 38a oi	Form 0	an p	art IV li	ıne 26	orifthe	
To From Yes No Y								FUIIII 9	90, P	aitiv,ii	ille 26,	or ii tile	
Relationship with organization Purpose of loan organization? To From Yes No Ye								(a) In		(b)		(i)\//r	ıtton
rson with organization organization? amount by board or committee? To From Yes No Yes		1		1 ` '		1	' '						
organization To From Yes No						1 ' '	due	Jueiaui	lacia dic.				Hent
To From Yes No Y			I	Jorganiza	GOII.	amount				1. 1			
To From Yes No Y		organizati								1			
To From Yes No Y										1	ttee?		
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the line of interested person and the line organization and the line of interested person and the line organization and				To	From			Yes	No	+	1	Yes	
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the				- ' - 	110111			+	''	+	+ "	1	
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the								+		+	+	_	
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the								-		-	+		
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the								_				_	
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the													
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the													
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the													
Grants or Assistance Benefitting Interested Persons. Complete If the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the control of assistance person (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person and the control of assistance (e) Purpose of assistance person and the control of assistance person and the		•	<u> </u>	<u> </u>		•	•		•				
Complete if the organization answered "Yes" on Form 990, Part IV, line 27. Name of interested person and the contract person (c) A mount of assistance person (d) Type of assistance (e) Purpose of assistance (e) Purpose of assistance (e) Purpose of assistance (figure 1) Purpose of assistance (figure 2) Purpose of assistance (fig	Gra	ants or A		•	a Interest	ed Persons.				_ L		I	
Name of interested person and the (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance							art IV. line	27.					
person interested person and the									uctano	/	A Durno	co of acc	ricta
						unit on assistant	e (u) i yp	e ui ass	istaiit	ع) ا عـ	Pulpo	'SE UI aS:	sista
	perso	"		•									
			o i ga										

Complete if the organization			o 282 28h or 28c		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's
(1) Christopher Fink	Family relationship with Director, Richard Fink	210,582	Employee compensation Note As a Member of the Board of Directors, Richard Fink excuses himself from compensation related decisions involving Christopher Fink	Yes	No No
(2) Americans for Prosperity	Entity more than 35% controlled by Americans for Prosperity Foundation	645,249	Reimbursement for expenses		No
(3) Americans for Prosperity	Entity more than 35% controlled by Americans for Prosperity Foundation	5,310,270	Payment received for services		No

Part V Supplemental Information

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

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93493287005354

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization **Employer identification number** Americans for Prosperity Foundation 52-1527294 Part I Types of Property (b) (d) (a) (c) Check Number of contributions Noncash contribution Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII. line 1 g 1 Art—Works of art . . . 2 Art—Historical treasures 3 Art—Fractional Interests . 4 Books and publications Clothing and household Cars and other vehicles . . Boats and planes Intellectual property . . . 9 Securities—Publicly traded . Χ 733,245 Fair market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . . 13 Oualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . . 15 Real estate—Residential . 16 Real estate—Commercial . . 17 Real estate—Other . . . 18 Collectibles **19** Food inventory . . . Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts 23 Scientific specimens . . 24 Archeological artifacts . . . 25 Other ▶ (Χ 272,800 Fair market value Software) **26** Other ▶(Other▶(_ 27 28 Other ► (Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Νo **b** If "Yes," describe the arrangement in Part II 3<u>1</u>_ Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Yes

b If "Yes," describe in Part II

describe in Part II

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

32a

Νo

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.

Harriber of items rec	cived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
Part I, Column (b)	The number of contributors represents the number of contributions received

Schedule M (Form 990) (2013)

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DLN: 93493287005354

OMB No 1545-0047

2013

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Name of the organization Americans for Prosperity Foundation Employer identification number

52-1527294

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 11 and Line 17	
Form 990, Part VI, Section A, line 1	Several Members of the Board of Directors are on the Executive Committee of the AFP Founda tion Board of Directors. Under the AFP Foundation bylaws, the Executive Committee may exer cise the powers of the Board when the Board is not in session, but must report its actions to the Board at the next Board meeting. The Executive Committee may not. (1) amend, alter , or repeal the organization's bylaws or articles of incorporation, (2) elect, appoint, or remove any officer or director, or (3) authorize the disposition of any of the organization's property and assets
Form 990, Part VI, Section A, line 2	Richard Fink and David Koch - Business Relationship Richard Fink and Christopher Fink - Family Relationship
Form 990, Part VI, Section B, line 11	The Form 990 is prepared by an independent CPA firm. The COO, Treasurer, and general couns el review. Form 990 prior to sending to the board. The 990 is then distributed to the board for review and questions prior to filing with the IRS.
Form 990, Part VI, Section B, line 12c	Each director, officer, and member of a committee with governing board delegated powers sh all annually sign the conflict of interest statement. The Chairman reviews the signed stat ements if a conflict arises, that individual would abstain from voting and participating in the discussion of that matter.
Form 990, Part VI, Section B, line 15	The board, or committee thereof, reviews comparative entities to determine compensation le vels for the CEO and other officers and key employees of the organization. Substantiation of compensation is included in personnel files. This process was last completed during the tax year for all officers of the organization.
Form 990, Part VI, Section C, line 19	The organization makes available to the public documents required by law to be made publicly available in accordance with IRS procedures
Form 990, Part V, Line 2a, Part VII, Part IX, Lines 5-10 and Schedule J	The filing organization shares employees with Americans for Prosperity, a related organization. The filing organization handles all applicable filings with the IRS. Compensation paid to individuals working for both organizations is reported in Part VII, Part IX and Schedule J based on the percentage of time devoted to each respective organization. Part VII, Columns D and E need to be added togethter in order to tie out to Form W-2, Box 5 wages.
Form 990, Part VIII, Line 7a/7b	The organization has a policy whereby all contributed securities are immediately sold thro ugh the broker that receives those contributions on the organization's behalf
Form 990, Part XII, Line 2c	The organization's Board assumes responsibility for oversight of the audit of its financia I statements and selection of its independent accountant. This process has not changed sin ce the prior year.

DLN: 93493287005354

2013

OMB No 1545-0047

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions. ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization Americans for Prosperity Foundation

Employer identification number

52-1527294

(a)			Form 990, Part		I		
Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) PRDIST LLC 2111 Wilson Blvd 350 Arlington, VA 22201 27-3120702	Educate and mobilize citizens	VA	0	0	Americans for Prosperity		
The stiff action of Poloted Toy, Evenue Over		h	anne de l'IVa a l'an	- Faure 000 Pa	+ TV lune 24 has a use sh		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations durin	g the tax year.	ne organization ar	iswered "Yes" or	i Form 990, Pai	t IV, line 34 because it	nau on	ie
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c)	tus (f) Direct controlling (3)) entity	Section (13) co	
(1) Americans for Prosperity	Educate and mobilize	DC	501(c)(4)		Americans for Prosperity	Yes	No No
2111 Wilson Blvd 350	citizens	DC DC	301(c)(4)		Foundation		140
Arlington, VA 22201 75-3148958							

(a) Name, address, and EIN of			(c)	(d)	(e)	(f)	(g)	(h	1)	(i)	[(i)	(k)
Name, address, and EIN of related organization		Primary activity	domicile domicile (state or foreign country)	entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-yea assets	Disprop r allocat	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	nging ner?	Percentage ownership
					,			Yes	No		Yes	No	
Identification of Related Orga line 34 because it had one or mo								wered	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlli entity	(e) Type of entit (C corp, S corp, or trust)	y Share of to	otal Share of	(g) e of end- -year ssets		(h) ercentage ownership	Section (b) (continue)	(13) olled	
						1					Yes		No
I			I							I			

Pa	Transactions With Related Organizations Complete if the organization answers	wered "Yes" on Form	1 990, Part IV, line	e 34, 35b, or 36.		V	No						
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	NO						
	uring the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?										
	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a 1b		No No						
	Girl, grant, or capital contribution to related organization(5)												
С	c Gift, grant, or capital contribution from related organization(s)												
d	d Loans or loan guarantees to or for related organization(s)												
e Loans or loan guarantees by related organization(s)													
f	f Dividends from related organization(s)												
g	g Sale of assets to related organization(s)												
h	Purchase of assets from related organization(s)				1h		No						
i	i Exchange of assets with related organization(s)												
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No						
k Lease of facilities, equipment, or other assets from related organization(s)													
Performance of services or membership or fundraising solicitations for related organization(s)													
m Performance of services or membership or fundraising solicitations by related organization(s)													
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes							
0	Sharing of paid employees with related organization(s)				10	Yes							
D	Reimbursement paid to related organization(s) for expenses				1 p	Yes							
а	Reimbursement paid by related organization(s) for expenses				1 q	Yes							
·													
r	Other transfer of cash or property to related organization(s)				1r		No						
s	Other transfer of cash or property from related organization(s)				1s		No						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complet		overed relationships	and transaction thresholds									
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount i	nvolved							
L) A	mericans for Prosperity	N	1,166,994	Market Value		_							
2) Ai	mericans for Prosperity	0	3,977,753	Cost									
3) Ai	mericans for Prosperity	Р	165,523	Cost									
1) A	mericans for Prosperity	0	645,249	Cost									

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

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

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations'		(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
									_		1	1	
			I		1				_	1		•	

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013