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DLN: 93493315020175

Form 990

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	r the 2	2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014				
B Ch	eck ıf aı	oplicable C Name of organization Americans for Prosperity		D Emplo	yer ider	ntification number
☐ Add	dress ch			75-3	148958	3
∏ Na	me chai	Doing business as				
Ind	ial retui			E Teleph	one num	ber
Fin ret	al urn/tern	Number and street (or P O box if mail is not delivered to street address) Room/suite 2111 Wilson Boulevard No 350	:	(703)	224-3	200
	iended i olication	eturn City or town, state or province, country, and ZIP or foreign postal code Arlington, VA 22201 pending		G Gross	eceipts \$	82,682,125
		F Name and address of principal officer Tim Phillips		s this a group ubordinates?		for
		2111 Wilson Boulevard No 350 Arlington, VA 22201				
		,g.c., ,		re all subord ncluded?	ınates	Γ Y es Γ No
I Ta	x-exem	pt status			a list	(see instructions)
J W	ebsite	: www americansforprosperity org	H(c)	Group exempt	ion nur	nber ►
K For	n of org	anization	L Year	of formation 20	004 M	State of legal domicile DC
Pa	rt I	Summary				
•		Briefly describe the organization's mission or most significant activities ducate U S citizens about the impact of sound economic policy on the nation's	econom	у		
Governance	-					
Ě]	Check this box 📭 if the organization discontinued its operations or disposed of	mara th	25 250/2 of the	notac	coto
Š		theck this box in the organization discontinued its operations of disposed of	more th	an 25% or its	net as	sets
ూ జర	3 1	Jumber of voting members of the governing body (Part VI, line 1a)		з	6	
Activities &	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)			4	4
星	5 7	otal number of individuals employed in calendar year 2014 (Part V, line 2a) .			5	0
닿	6 7	otal number of volunteers (estimate if necessary)			6	20,000
•	7a 7	otal unrelated business revenue from Part VIII, column (C), line 12			7a	0
	ь	let unrelated business taxable income from Form 990-T, line 34			7b	0
				Prior Year		Current Year
gi.	8	Contributions and grants (Part VIII, line 1h)		44,213,		82,499,013
Ravenue	9	Program service revenue (Part VIII, line 2g)		32,	576	182,784
3	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			0	328
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		44,245,	689	82,682,125
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		200,	000	278,045
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0
82	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		3,869,	696	15,503,929
Š	16a	Professional fundraising fees (Part IX, column (A), line 11e)		325,	812	154,482
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ▶4,842,450				
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		30,396,	034	74,475,619
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		34,791,	542	90,412,075
	19	Revenue less expenses Subtract line 18 from line 12		9,454,	147	-7,729,950
Net Assets or Fund Balances			Begir	nning of Curre Year	nt	End of Year
988 988	20	Total assets (Part X, line 16)		12,656,	629	7,611,462
P. A.	21	Total liabilities (Part X, line 26)		2,374,	487	5,059,270
zZ	22	Net assets or fund balances Subtract line 21 from line 20		10,282,	142	2,552,192
	rt 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

Luke Hilgemann CEO
Type or print name and title

Print/Type preparer's name

Preparer's signature

Paid Preparer Use Only Print/Type preparer's name David C Moja Preparer's signature David C Moja

Firm's name F 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

For Paperwork Reduction Act Notice, see the separate instructions.

(Expenses \$ including grants of \$

Total program service expenses ►

81.787.889

) (Revenue \$

Part IV	Checklist of	Required	Schedules

Ċ.	diceknist of required benedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo
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	Yes	
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		
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	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		Νo
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	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
L 5	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		Νo
L7	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		Νo
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \cdot	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? If "Yes," complete Schedule R, Part 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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

tale Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	es es	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5e instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization file Form 8886-T? 5c C If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5b C C If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c C Ga Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	es	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5a Fire Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886-T? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	es	
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Tax Statements, filed for the calendar year ending with or within the year covered by this return		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	\downarrow	
At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c If "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and		Νo
over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		Νo
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organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	$-\!\!\!\!+$	
were not tax deductible?	es	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7a	es	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d If "Yes," indicate the number of Forms 8282 filed during the year		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	\perp	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a Did the sponsoring organization make any taxable distributions under section 4966? 9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b		
10 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on Part VIII, line 12 10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11 Section 501(c)(12) organizations. Enter		
a Gross income from members or shareholders		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	\perp	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c Enter the amount of reserves on hand		
14a Did the organization receive any payments for indoor tanning services during the tax year?		
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		Νo

Form 990 (2014) 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 Nο 1a Enter the number of voting members of the governing body at the end of the tax 1a 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 **b** Enter the number of voting members included in line 1a, above, who are Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 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? . Νo 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Nο Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Yes Each committee with authority to act on behalf of the governing body? . Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code

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		No
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?	16h		

Section C. Disclosure

- 17 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, MN, MS, NH, NJ, NM, NY, NC, ND, OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI
- 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 Vpon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►Robert Heaton

Part VIII 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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h an or/tr	offic	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			6			ři e d				
(1) Richard Fink	2 00	x						0	0	0
Director	2 00									
(2) Nancy Pfotenhauer	2 00	х						0	0	0
(3) Jim Miller	2 00									
Director		X						0	0	0
(4) James Stephenson	2 00									
Director		X						0	0	0
(5) Frayda Levin	2 00									
Chairman/Director		X		Х				0	0	0
(6) Mark Holden	2 00							_		_
Director	2 00	X						0	0	0
(7) Tim Phillips	18 00								252.242	
President	32 00			Х				142,436	253,219	39,909
(8) Robert Heaton	23 00			.,				124.062	126 516	12.010
CFO	27 00			Х				121,062	136,516	13,819
(9) Luke Hılgemann	14 00			· ·				100 251	245 442	22.004
Chief Operating Officer	36 00			Х				100,251	245,442	32,894
(10) Slade O'Brien	13 00			Х				EO 141	142 710	26 271
VP/Grassroots Leadership Academy	37 00			^				50,141	142,710	26,371
(11) Teresa Oelke	28 00			Х				134,674	101,596	34,703
VP, State Operations	22 00			^				134,074	101,390	34,703
(12) Christopher Fink	39 00			Х				233,598	62,096	37,877
VP, Development	11 00			^				233,396	02,090	37,077
(13) Dennis Vegas	25 00			х				75,473	72,513	8,781
СМО	25 00							. 3, 1, 3	. 2,313	
(14) Jennıfer Stefano	14 00			х				49,485	127,247	7,579
VP of Value Added Events	36 00							,,,,,,	,,	.,=,3
										Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(15) Nolan Ingebrigtson Interim CFO (Partial year)	25 00 25 00			х				49,398	0	3,025	
(16) Victor Bernson	7 00										
VP & General Counsel	43 00			X				90,921	154,811	20,205	
(17) Adam Stryker	32 00			,,				427.072	74 005	24.040	
Interim CTO	18 00			X				127,973	71,985	31,918	
(18) Robert Stuber Director of Development -	39 00 11 00					х		134,088	35,644	17,378	
(19) Derrick Sontag State Director	20 00					х		76,797	110,512	10,803	
(20) David From State Director	16 00					х		52,083	105,745	32,460	
(21) Chase Downham	36 00					х		119,336	46,408	22,305	
Regional Director (22) Mark Lucas	14 00 41 00										
Regional Director	9 00					х		130,553	26,740	2,474	
(23) John Flynn	0 00						×	61,916	46,708	4,719	
Former General Counsel	0 00							01,910	40,708	4,719	

1b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	►	1,750,185	1,739,892	347,220

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►10

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1 a? If "Yes," complete Schedule I for such individual	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule J for such person	5	Yes	

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
1360 LLC PO Box 37046 Baltimore, MD 21297	Media	14,659,561
Target Enterprises LLC 15260 Ventura Blvd Suite 1240 Sherman Oaks, CA 91403	Media	11,894,780
Smart Media Group 814 King Street Ste 400 Alexandria, VA 22314	Media	6,371,703
Innovative Advertising LLC 4250 Highway 22 Ste 7 Mandeville, LA 70471	Print & Mail Design, Distributionrint &	2,734,435
Google Inc Dept 33654 PO Box 39000 San Francisco, CA 94139	Media	1,643,594
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►78

			ule O contains a respo		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क क	1a	Federated cam	paigns 1a					
ons, Giffs, Grants Similar Amounts	b	Membership du	ies 1b					
, Gi	С	Fundraising eve	ents 1c					
iffs ar.	d	Related organiz	zations 1d					
s, G imil	е	Government grant	s (contributions) 1e					
Contributions, and Other Sim	f	All other contributions amounts no	ons, gifts, grants, and 1f ot included above	82,499,013				
filb Off	g	Noncash contributi 1a-1f \$	ons included in lines	427,236				
Conta	h	Total. Add lines	s 1 a - 1 f	🗼	82,499,013			
				Business Code				
Program Serwce Revenue	2a	Registration Fees		900099	121,295	121,295		
Pev	ь	Other Income		900099	61,489	61,489		
931	С							
Serv	d							
an (е							
ીહ	f	All other progra	am service revenue					
Δ	g	Total. Add lines	s 2a-2f		182,784			
	3		ome (including dividen ar amounts)		328			328
	4		stment of tax-exempt bond	-				
	5	Royalties		▶ ↑				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7-	Gross amount	(ı) Securities	(II) Other				
	7a	from sales of assets other						
	_	than inventory						
	Ь	Less cost or other basis and						
	С	sales expenses Gain or (loss)						
	d	Net gain or (los	ss)					
ər	8a	Gross income f events (not inc						
Other Revenue		\$of contributions See Part IV , lir						
her	b	Less directev	penses b					
₹	С		(loss) from fundraising	events 🛌				
	9a		rom gaming activities ne 19					
	Ь	Less direct ex	penses b					
			(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
	b	Less costofa	oods sold b					
			(loss) from sales of inv	entory 🛌				
		Miscellaneou		Business Code				
	11a							
	b							
	С							
	d		ue					
	е	Total. Add lines	s 11a-11d	•				
	12	Total revenue.	See Instructions .	🕨	82,682,125	182,784	0	328

Part IX Statement of Functional Expenses

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

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	278,045	278,045		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				_
5	Compensation of current officers, directors, trustees, and key employees	1,312,085	409,660	493,855	408,570
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	12,268,457	11,171,858	386,138	710,461
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	262,735	240,733	7,761	14,241
9	Other employee benefits	989,145	894,524	47,879	46,742
10	Payroll taxes	671,507	573,069	42,774	55,664
11	Fees for services (non-employees)				
а	Management				
b	Legal	624,745	15,461	577,331	31,953
C	Accounting	52,215	1,648	47,162	3,405
d	Lobbying	1,281,221	1,281,221		
e	Professional fundraising services See Part IV, line 17	154,482			154,482
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)	4,096,995	3,394,588	654,219	48,188
12	Advertising and promotion	46,815,035	46,048,543	191,979	574,513
13	Office expenses	11,176,911	9,872,182	320,499	984,230
14	Information technology	1,123,738	943,772	82,931	97,035
15	Royalties				
16	Occupancy	253,365	41,999	182,707	28,659
17	Travel	4,509,575	4,038,706	199,357	271,512
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,779,041	1,559,428	21,295	198,318
20	Interest	1,354		1,354	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	127,906	91,540	12,306	24,060
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	Allocated overhead	2,475,282	893,889	496,607	1,084,786
b	List rental	70,855	7,122		63,733
c	Taxes, licenses, fees	14,557	2,735	11,822	
d	Equipment leasing	12,972	12,231	642	99
e	All other expenses	59,852	14,935	3,118	41,799
25	Total functional expenses. Add lines 1 through 24e	90,412,075	81,787,889	3,781,736	4,842,450
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)				<u></u>

Form 990 (2014) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X $\,$. $\,$ Γ **(B)** End of year **(A)** Beginning of year 1 4,931,762 5,929,326 Cash-non-interest-bearing . . . 1

	cush non interest bearing		· L	' '		· · · · · · · · · · · · · · · · · · ·
2	Savings and temporary cash investments		. [2	
3	Pledges and grants receivable, net		. [6,000,000	3	
4	Accounts receivable, net	F	630	4	10,052	
5	Loans and other receivables from current and former officers, diversity employees, and highest compensated employees. Complete Par Schedule L	rectors t II of	, trustees, key		5	
6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and coand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	ontribu iployee	ting employers		6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			955,782	9	505,807
10a	Land, buildings, and equipment cost or other basis Complete		Ī			
	Part VI of Schedule D	10a	694,186			11
b	Less accumulated depreciation	10b	181,606	206,116	10c	512,580
11	Investments—publicly traded securities				11	
12	Investments—other securities See Part IV, line 11				12	
13	Investments—program-related See Part IV, line 11				13	
14	Intangible assets		-		14	
15	Other assets See Part IV, line 11		-	562,339	15	653,697
16	Total assets. Add lines 1 through 15 (must equal line 34)		12,656,629	16	7,611,462	
17	Accounts payable and accrued expenses			1,689,831	17	1,513,694
18	Grants payable				18	
19	Deferred revenue	•			19	
20	Tax-exempt bond liabilities		٠		20	
21	Escrow or custodial account liability Complete Part IV of Scheo	dule D			21	
22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi		tees,			
	persons Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated third parties		<u> </u>		23	
24	Unsecured notes and loans payable to unrelated third parties				24	
25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part			22 / 252		0 - 1
	D		.	684,656		3,545,576
26	Total liabilities. Add lines 17 through 25			2,374,487	26	5,059,270
	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	ando	omplete			
27	Unrestricted net assets	_		10.051.351	27	2,428,486
28	Temporarily restricted net assets	•	 	230,791	28	123,706
29	Permanently restricted net assets		<u></u>		29	.23,.30
	Organizations that do not follow SFAS 117 (ASC 958), check he	re ► 「	and			
30	complete lines 30 through 34. Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building or equipment fund		· · ·		31	
32	Retained earnings, endowment, accumulated income, or other fu		· · ·		32	
33	Total net assets or fund balances		}	10,282,142	33	2,552,192
34	Total liabilities and net assets/fund balances		·	12,656,629	34	7,611,462
J-4	i otal navinties and het assets/fullu palances	•	12,000,029		7,611,462	

Liabilities

Net Assets or Fund Balances

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		82,6	582,125	
2	Total expenses (must equal Part IX, column (A), line 25)	(must equal Part IX, column (A), line 25)				
3	Revenue less expenses Subtract line 2 from line 1				112,075	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		-7,7	729,950	
•	The case of fair salahess at segiming of year (mast equal) are // mis es, column (**/,	4		10,2	282,142	
5	Net unrealized gains (losses) on investments	5				
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,					
Do	column (B))	10		2,5	552,192	
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII				. ৮	
				Yes	No	
_	Assumbly with discidly warmen the form 200.					
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 revie 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	<u> </u>	
	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					
С	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 is 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			

DLN: 93493315020175

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	me of the organization ericans for Prosperity			Employer id	entification number
				75-31489	
Par	t I-A Complete if the o	ganization is exempt unde	r section 501(c) or is a section 5	27 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	tıcal campaıgn act	ıvıtıes ın Part IV	
2	Political expenditures			►	\$5,970,134
3	Volunteer hours				
Par	t I=B Complete if the or	ganization is exempt unde	r section 501(c)(3).	
1		e tax incurred by the organization i			\$
2	Enter the amount of any excis	e tax incurred by organization man	agers under section	n 4955 •	\$
3	If the organization incurred a	section 4955 tax, did it file Form 4	720 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	r section 501(c), except section !	501(c)(3).
1	Enter the amount directly exp	ended by the filing organization for	section 527 exemp	ot function activities 🕨	\$5,970,134
2	Enter the amount of the filing exempt function activities	organization's funds contributed to	other organizations	s for section 527	\$0
3	Total exempt function expend	itures Add lines 1 and 2 Enter her	e and on Form 112	0-POL, line 17b ►	\$5,970,134
4	Did the filing organization file	Form 1120-POL for this year?			✓ Yes No
5	organization made payments amount of political contribution	nd employer identification number of For each organization listed, enterins received that were promptly and political action committee (PAC)	the amount paid fro I directly delivered	om the filing organization to a separate political o	's funds Also enter the rganization, such as a nation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds If none, enter -	contributions received
		ee the instructions for Form 990 or 9			

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).				(L)
For e activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	Yes	No		(b) nount
activ	ity.	165	NO	A	nount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a	Volunteers?			1	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			-	
c d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5),	or sec	ction
					Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
c	Total	2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	3			
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
P	art IV Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou (see instructions), and Part II-B, line 1 Also, complete this part for any additional information	p list),	Part II	-A, lın	es 1 and
	Return Reference Explanation				
Part	Internet and radio advertising, direct mail and grassroots advocacy				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493315020175

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.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service **Employer identification number** Name of the organization Americans for Prosperity 75-3148958 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Protection of natural habitat Preservation of a certified historic structure □ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year -_ Number of states where property subject to conservation easement is located ▶_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Pari	Organizations Maintaining Col	<u>llections of Art</u>	:, His	stori	<u>cal Tı</u>	<u>easu</u>	<u>res, or O</u>	<u>the</u>	<u>r Similar A</u>	sse	ts (co	<u>ntınued)</u>
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other recor	ds, cl	heck	any of	he follo	owing that a	re a	significant u	se of	ıts	
а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams				
b	Scholarly research		е	Γ	Othe	-						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ıın ho	w the	y furthe	er the o	rganızatıon	's ex	empt purpos	e in		
5	During the year, did the organization solicit o								ıılar	_		_
	assets to be sold to raise funds rather than to								" . =	-	Yes	No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answere	a "Y	es" to Form	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	edıary	/ for c	ontribu	itions o	r other ass	ets i	not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follo	wing t	able		_					
							-		P	mou	nt	
С	Beginning balance						-	1c				
d	Additions during the year						-	1d				
е	Distributions during the year						_	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, lin	e 21,	for e	scrow	rcusto	dial accou	nt lıa	ibility?	Γ,	Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	eexpl	anatı	on has	been p	rovided in F	art	XIII			Γ
Pai	rt V Endowment Funds. Complete											
_		(a)Current year	(b)Prior	year	b (c) Tv	vo years back	(d)	Three years bac	((e)	Four ye	ars back
1a	Beginning of year balance							\vdash		+		
b	Contributions							-		+		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balan	ce (lır	ne 1g	, colum	n (a)) h	neld as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ►											
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses	ssion of the organiz	atıon	that	are hel	d and a	dmınıstered	d for	the			
	organization by								<u></u>	- (:)	Yes	No
	(i) unrelated organizations		•					•	⊢	a(i) a(ii)		
b	(ii) related organizations							•	· · · -	3b		
4	Describe in Part XIII the intended uses of th											
Par	t VI Land, Buildings, and Equipme					n answ	ered 'Yes	' to	Form 990, I	art	IV, lır	ne
	11a. See Form 990, Part X, line 1	LO.					•		·			
	Description of property				a) Cost o sıs (ınve		(b)Cost or o basis (other		(c) Accumula depreciation		(d) Bo	ok value
1a	_and											
b I	Buildings											
c I	_easehold improvements											
d I	Equipment						130	,533	10	,247		120,286
	Other	<u> </u>					I .	,653	171	,359		392,294
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i> d	qual Form 990, Part .	X, colu	umn (B), line	10(c).)			🛌			512,580

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*	
Part VIII Investments—Program Related. (See Form 990, Part X, line 13.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organizat	on answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizat (a) Description	on answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizat (a) Description	on answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizat (a) Description	on answered 'Yes' to Form 990	(b) Book value
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Part IX Other Assets. Complete if the organizat (a) Description	on answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Desc. (1) Due from affiliate Total. (Column (b) must equal Form 990, Part X, col.(B) line	Ion answered 'Yes' to Form 990 cription	(b) Book value 653,697
Part IX Other Assets. Complete if the organizate (a) Desc. (1) Due from affiliate Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate (a) Desc.	Ion answered 'Yes' to Form 990 cription	(b) Book value 653,697
Part IX Other Assets. Complete if the organizate (a) Desc. (1) Due from affiliate Total. (Column (b) must equal Form 990, Part X, col.(B) line	Ion answered 'Yes' to Form 990 cription	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate Other Liabilities. Complete if the organizate in the organ	15.) ganization answered 'Yes' to Form 990	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) ganization answered 'Yes' to Form 990	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate of th	15.) Ganization answered 'Yes' to Form 990 (b) Book value	(b) Book value 653,697

its With Revenue p	er Ret	t urn Complete ıf
	1	91,709,625
9,027,500		
	2e	9,027,500
	3	82,682,125
	4c	0
	5	82,682,125
nts With Expenses	s per R	l eturn. Complete
	1	99,439,575
9,027,500		
	1	
]	
	2e	9,027,500
	3	90,412,075
]	
	4c	0
	5	90,412,075
ancial statements AFP	taken are tal merits luded in no uncert is gener	re recognized in the s, that the position expenses in the tain tax positions rally no longer
anc	cial statements AFP	and 2013, AFP had no uncer cial statements AFP is genei ations by tax authorities for y

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

Schedule D (Form 990) 2014

DLN: 93493315020175

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

10

Total.

Supplemental Information Regarding 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. Attach to Form 990 or Form 990-EZ.

Inspection

Internal Revenue Service Name of the organization Americans for Prosperity

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number**

75-3148958

Pa	fundraising Acti			janizatio	n answered "Yes" to	Form 990, Part IV, I	ine 17. Form 990-EZ
a b c d	a						√ Yes √ No
ь	If "Yes," list the ten highes to be compensated at leas			fundraıseı	rs) pursuant to agreeme	ents under which the fur	draiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(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	Three Creative 10211 Wincopin Circle Suite 100 Columbia, MD 21146	Direct mail fundraising	Yes	No No	1,745,779	104,463	1,641,316
2	American Target Advertising 9625 Surveyor Court Suite 400 Manassas, VA 20110	Direct mail fundraising		Νo	251,232	50,019	201,213
3							
4							
5							

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

1,997,011

1,842,529

154,482

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut			
			(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)	(4)
Revenue	1	Gross receipts				
ē,	2	Less Contributions				
<u></u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
မှာ	5	Noncash prizes				
eUse	6	Rent/facility costs				
Expenses	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	ies 4 through 9 in colum	n (d)		()
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)		
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>Ф</u>		\$13,000 OH FORM 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>공</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	Г Yes% Г No	┌ Yes% ┌ No	┌ Yes <u>%</u> ┌ No	
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)	•	
	8	Net gaming income summary Subt	cract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ation conducts gaming a	ctivities		
а		the organization licensed to conduct				Fyes Fno
Ь	If"	No," explain				
10a b		re any of the organization's gaming Yes," explain				

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

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DLN: 93493315020175

OMB No 1545-0047

Schedule I (Form 990)

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.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

Americans for Prosperity

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

Employer identification number

75-3148958

Part I	General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Let the People Vote (SPAC) 10803 Gulfdale Suite 100 San Antonio,TX 78216	46-5386403	501(c)(4)	20,000				Program Support
(2) Home School Legal Defense Association 1 Patrick Henry Circle Purcelville, VA 20132	54-1719605	501(c)(3)	23,200				Program Support
(3) Coalition for American Values 6650 W State St 155 Wauwatosa, WI 53213	45-4412825	501(c)(4)	85,500				Program Support

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1
3	Enter total number of other organizations listed in the line 1 table	2

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

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

Part IV Supplemental I	nformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
•	Grant funds were paid pursuant to an agreement requiring the recipient to expend the funds for appropriate purposes. The organization reviews the recipient's Form 990, IRS tax-exemption letter, articles of incorporation, by-laws, and validates the recipient's tax ID #

Schedule I (Form 990) 2014

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DLN: 93493315020175

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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.

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

Open to Public Inspection

Name of the organization Americans for Prosperity

Employer identification number

75-3148958

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

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

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

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

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

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation					
Part I, Line 1a	First class travel may be provided if there are last minute flight changes or there is no other available travel alternative. All travel is for a bona fide business purpose					
Part I, Line 3	The organization relied on the methods used by Americans for Prosperity Foundation (a related organization) to establish the compensation of the organization's President					
Part I, Line 4a	John Flynn, former General Counsel, received a serverance payment from Americans for Prosperity Foundation, a related organization, during the tax year					
Part I, Line 7	The Organization pays out discretionary bonuses					
·	Nolan Ingebrigtson, Interim CFO, received the following compensation from an unrelated organization, Center for Shared Services Trust, for services provided to Americans for Prosperity Base Salary - 36,898 Bonus - 12,500 Deferred Compensation - 1,510 Other Nontaxable benefits (health and dental insurance) - 1,515					

Schedule J (Form 990) 2014

Software ID: Software Version:

EIN: 75-3148958

Name: Americans for Prosperity

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	С	(i) Base ompensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
1 Tim Phillips, President	(I) (II)	97,436 173,219	45,000 80,000	0	6,038 10,735	8,329 14,807	156,803 278,761	0
1 Robert Heaton, CFO	(I) (II)	74,062 83,516	47,000 53,000	0	0 0	6,495 7,324	127,557 143,840	0 0
2 Luke Hilgemann, Chief Operating Officer	(I) (II)	56,751 138,942	43,500 106,500	0 0	2,851 6,981	6,688 16,374	109,790 268,797	0 0
3 Slade O'Brien, VP/Grassroots Leadership Academy	(I) (II)	37,141 105,710	13,000 37,000	0 0	842 2,397	6,014 17,118	56,997 162,225	0
4 Teresa Oelke, VP, State Operations	(I) (II)	94,774 71,496	39,900 30,100	0 0	6,603 4,981	13,178 9,941	154,455 116,518	0
5 Christopher Fink, VP, Development	(I) (II)	174,348 46,346	59,250 15,750	0 0	11,673 3,103	18,250 4,851	263,521 70,050	0 0
6 Dennis Vegas, CMO	(I) (II)	62,723 60,263	12,750 12,250	0 0	0 0	4,478 4,303	79,951 76,816	0 0
7 Jennifer Stefano, VP of Value Added Events	(I) (II)	38,285 98,447	11,200 28,800	0	2,015 5,181	107 276	51,607 132,704	0 0
8 Nolan Ingebrigtson, Interim CFO (Partial year)	(I) (II)	36,898 0	12,500 0	0	1,510 0	1,515 0	52,423 0	0
9 Victor Bernson, VP & General Counsel	(I) (II)	72,421 123,311	18,500 31,500	0 0	3,272 5,571	4,204 7,158	98,397 167,540	0
10 Adam Stryker, Interim CTO	(I) (II)	95,973 53,985	32,000 18,000	0 0	5,675 3,192	14,753 8,298	148,401 83,475	0 0
11 Robert Stuber, Director of Development -	(I) (II)	110,388 29,344	23,700 6,300	0 0	8,216 2,184	5,513 1,465	147,817 39,293	0 0
12 Derrick Sontag, State Director	(I) (II)	60,397 86,912	16,400 23,600	0 0	1,493 2,148	2,936 4,226	81,226 116,886	0 0
13 David From, State Director	(I) (II)	40,533 82,295	11,550 23,450	0 0	3,078 6,249	7,634 15,499	62,795 127,493	0
14 Chase Downham, Regional Director	(I) (II)	83,336 32,408	36,000 14,000	0 0	6,473 2,517	9,586 3,729	135,395 52,654	0
15 Mark Lucas, Regional Director	(I) (II)	93,203 19,090	37,350 7,650	0 0	1,767 362	286 59	132,606 27,161	0
16 John Flynn, Former General Counsel	(I) (II)	61,916 46,708	0	0	2,669 2,013	21 16	64,606 48,737	0

DLN: 93493315020175

OMB No 1545-0047

Schedule L

(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. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Open to Public Inspection

Name of the or Americans for Pro								,,	, cr ideiic		on numbe	
									48958			
	ess Benefit Tra											
	plete if the organiza											
1 (a) Nam	ne of disqualified pe	rson (b) F		ıp between d and organızat		(c) Desc	ription	on of transaction		(d) Co Yes		
				and organizat	-					\rightarrow	Yes	No
	amount of tax ıncur	red by organ	ızatıon ma	inagers or dis	squalified per	sons during t	he year	· unde	rsectior ▶ ¢	١		
art III Loans to ai Complete if th	amount of tax, if an nd/or From Int e organization ansv	erested P	Persons. on Form 99	90-EZ, Part			· · ·	, line 7	* \$	the org	anızatıoı	1
3 Enter the a Cart II Loans to a Complete if the reported an arr (a) Name of	nd/or From Int	verested P vered "Yes" (, Part X, line (c) Purpose of	Persons. on Form 99 5, 6, or 22 (d) Loan	90-EZ, Part 2 to the			Part IV	In	. т	ved rd or	anızatıor (i)Wrı agreen	tten
3 Enter the a art II	nd/or From Into e organization answer on Form 990 (b) Relationship	verested P vered "Yes" (, Part X, line (c) Purpose of	Persons. on Form 99 5, 6, or 22 (d) Loan or from t	90-EZ, Part 2 to the	V , line 38a, c	or Form 990, I	(g)	In	26, or if (h) Approby boai	ved rd or	(i)Wrı	tten
3 Enter the and a second a second and a second a sec	nd/or From Into e organization answer on Form 990 (b) Relationship	verested P vered "Yes" (, Part X, line (c) Purpose of	Persons. on Form 99 5, 6, or 22 (d) Loan or from t organizati	90-EZ, Part of to the confidence of the confiden	V , line 38a, c	or Form 990, I	(g) defa	In ult?	26, or if (h) Approby boaicommit	ved rd or	(i)Wrı agreen	tten nent
art III oans to al complete if the ported an are a) Name of interested person tal	nd/or From Integration answer in the organization answer in the organization (b) Relationship with organization	rerested P vered "Yes" o , Part X, line (c) Purpose of loan	Persons. on Form 99 5, 6, or 22 (d) Loan or from t organizati To	90-EZ, Part 2 to the ton? From	V, line 38a, c (e)Original principal amount	or Form 990, I	(g) defai	In ult?	26, or if (h) Approby boaicommit	ved rd or	(i)Wrı agreen	tten nent?
art III oans to all omplete if the eported an are a) Name of nterested person all rt IIII Gra	nd/or From Into e organization answer mount on Form 990 (b) Relationship with organization ants or Assista mplete if the org	rerested P vered "Yes" o , Part X, line (c) Purpose of loan	Persons. on Form 99 5, 6, or 22 (d) Loan or from t organizati To fiting In nswered	90-EZ, Part to the ton? From terested i	V, line 38a, c (e)Original principal amount	or Form 990, F	(g) defail Yes	In ult?	26, or if (h) Approby boaicommit Yes	ved rd or rtee?	(i)Wrı agreen	tten nent?

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.											
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sha of organiz reveni	: :ation's						
				Yes	No						
(1) Christopher Fink	Family relationship with	263,520	Employee compensation		No						

Part V Supplemental Information

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

Director, Richard Fink

Return Reference	Explanation

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493315020175

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.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** Americans for Prosperity 75-3148958 Part I Types of Property (a) (b) (c) (d) 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 goods Cars and other vehicles . . **7** Boats and planes . . . Intellectual property . . . Securities—Publicly traded . Χ 427,236 Fair market value 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Oualified conservation contribution—Other . . . 15 Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . . **18** Collectibles **19** Food inventory . . . 20 Drugs and medical supplies . **21** Taxidermy Historical artifacts 23 Scientific specimens . . Archeological artifacts . . 25 O ther **▶** (___ **26** Other ►(___ **27** Other►(_____ 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 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a Νo

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

b If "Yes," describe in Part II

describe in Part II

	nether the organization is reporting in Part I, column (b), the number of contributions, the served, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
, , ,	The number of contributors represents the number of contributions received, not the number of items

Schedule M (Form 990) (2014)

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As Filed Data -

DLN: 93493315020175

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public Inspection

Name of the organization Americans for Prosperity	Employer identification number
interiedris for Flosperity	75-3148958

Explanation

990 Schedule O, Supplemental Information

Return Reference

Richard Fink and Chris Fink have a family relationship
T. F. 200
The Form 990 is prepared by an independent CPA firm. The COO, CFO, and General Counsel revulew the Form 990. The 990 is then distributed to the audit committee, acting on behalf of the board for review and questions prior to filing with the IRS.
The Organization has in place a conflict of interest policy covering all staff, directors and officers that it monitors through the quarterly meetings of the Board of Directors' Au dit Committee and an annual employee survey Should a conflict be disclosed, it is address ed by company management or the board, as appropriate
The board for Americans for Prosperity Foundation, a related organization, reviews compara tive data in determining pay for the CEO and other officers and key employees. This process is documented in the employee's personnel file. This process was last completed during the tax year for all officers.
The organization makes available to the public documents required by law to be made publicly available in accordance with IRS procedures
The filing organization shares employees with Americans for Prosperity Foundation, a relat ed organization. The related 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 primarily on the percentage of time devoted to each respective or ganization. Part VII, Columns D and E need to be added together in order to tie out to Form W-2, Box 5 wages.
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
The organization's Audit Committee assumes responsibility for oversight of the audit of it s financial statements and selection of its independent accountant. This process has not c hanged since the prior year.

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DLN: 93493315020175

OMB No 1545-0047 2014

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

Name of the organization Americans for Prosperity

Employer identification number

75-3148958

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	<u> </u>		•	<u> </u>	
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) PRDIST LLC 2111 Wilson Blvd Suite 350 Arlington, VA 22201 27-3120702	Educate and mobilize citizens	VA	0	2,000	Americans for Prosperity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))			512(b) introlled
						Yes	No
(1) Americans for Prosperity Foundation 2111 Wilson Blvd 350 Arlington, VA 22201 52-1527294	Educate citizens	DE	501(c)(3)	Line 7	N/A		No

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

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

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

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

(5) Americans for Prosperity Foundation

Pa	rt V Tra	ansactions With Related Organizations Complete if the organ	ıızatıon answe	ered "Yes" on Form	ı 990, Part IV, lıne	e 34, 35b, or 36.			
	Note. Com	plete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	No
1 D	uring the tax	x year, did the orgranization engage in any of the following transactions with	one or more re	lated organizations lis	sted in Parts II-IV?				
а	Receipt of	(i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/				1a		No
b	Gıft, grant,	, or capital contribution to related organization(s)					1b		No
С	Gıft, grant,	or capital contribution from related organization(s)					1 c		No
d	Loans or lo	oan guarantees to or for related organization(s)					1d		No
e	Loans or lo	oan guarantees by related organization(s)					1e		No
f	Dividends	from related organization(s)					1f		No
g	Sale of ass	sets to related organization(s)					1 g		No
h	Purchase	of assets from related organization(s)					1h	Yes	
i	Exchange	of assets with related organization(s)					1i		No
j	Lease of fa	cilities, equipment, or other assets to related organization(s)					1j		No
k		acilities, equipment, or other assets from related organization(s)					1k		No
I	Performanc	e of services or membership or fundraising solicitations for related organiza	ition(s)				11		No
m	Performanc	e of services or membership or fundraising solicitations by related organiza	ition(s)				1m		No
n	Sharing of f	acilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
0	Sharing of	paid employees with related organization(s)					10	Yes	
р	Reimburse	ement paid to related organization(s) for expenses					1p	Yes	
q	Reimburse	ement paid by related organization(s) for expenses					1q	Yes	
	0 + h - u + u - u						1		No
		sfer of cash or property to related organization(s)					1r 1s		No
S	Other tran	sfer of cash or property from related organization(s)					13		
2	If the answ	ver to any of the above is "Yes," see the instructions for information on who i	must complete		vered relationships	and transaction thresholds			
		(a) Name of related organization		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining an	nount i	nvolved	
(1) Ar	nericans for Pr	ospenty Foundation		N					
(2) Ar	mericans for Pr	ospenty Foundation		0					
(3) Ar	nericans for Pr	ospenty Foundation		Р					
(4) Ar	nericans for Pr	rospenty Foundation		Q					

Н

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

I													
(a)	(b)	(c)	(d)		(e)	(f)	(g)	(h)		(i)	(j)		(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are	all partners	Share of	Share of	Disproprtiona	te	Code V-UBI	General or	- 1	Percentage
	1 ' ''	domicile	ıncome	1	section	total	end-of-year	allocations?		amount in	managing	- 1	ownership
	1	(state or	(related,	į r	501(c)(3)	ıncome	assets			box 20	partner?	- 1	
	1 '	`foreign	unrelated,		ganizations?					of Schedule	i '	- 1	
	1		excluded from		,=					K-1	i	- 1	
	1	1	tax under	Ĺ	ļ					(Form 1065)	i	- 1	. !
	1 '	1	sections 512-	1	I					(101111 2000)	i	- 1	
	1 '	1				√ '	l l			i 1		\longrightarrow	
	1 '	1	514)	Yes	No			Yes	No		Yes	No	
	 '		4	—'								ш	
l	1	1	1	1'									

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

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014