Caution: Forms printed from within Add specifications. When using Acrobat 5.x pr uncheck the "Expand small pages to pape 6.x and later products versions, select " dialog.	roducts, unch er size" optior	eck the "Shrink n, in the Adobe	oversized p "Print" dial	pages to paper size" and og. When using Acrobat
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Form **990**

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.

Inter	nal Revenu	ue Service	► Information about	t Form 990 and its instructions	is at www.irs	s.aov/form990.		Inspection
Α	For the	2014 calend	lar year, or tax year beginning	JUL 1, 2014 and	d ending J	JN 30, 2015		
В	Check if applicable:	C Name o	of organization			D Employer ider	ntifica	ition number
	Address	ASSOC.	IATION FOR RESEARCH ON NO					
	change	ORGAN:	ORGANIZATIONS & VOLUNTARY ACTION					20020
	Name change		ousiness as			23	-737	8021
	Initial return	Numbe	r and street (or P.O. box if mail is no	ot delivered to street address)	Room/suite	E Telephone nun		
	Final return/	550 W	EST NORTH STREET			317	-684-	-2120
	termin- ated		town, state or province, country,	and ZIP or foreign postal code		G Gross receipts \$		877,524.
	Amende return	INDIA	NAPOLIS, IN 46202			H(a) Is this a grou		
	Applica tion	F Name a	and address of principal officer: SI					Yes X No
_	pending	550 WES	T NORTH STREET, INDIANAP	OLIS, IN 462		H(b) Are all subordina	tes inclu	uded? Yes No
			X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) or 527	If "No," attac	h a lis	st. (see instructions)
		e: WWW.A				H(c) Group exem		
			X Corporation Trust	Association Other	L Year	of formation: 1971	M	State of legal domicile: DC
Р		Summary						
•	, 1 E			nost significant activities: ASSOC		RESEARCH ON		
nce	1	Control of the Contro	CALL CONTROL TO THE THE THE CONTROL OF THE CALL THE CALL THE CALL THE CALL	ARY ACTION (ARNOVA) IS A				
rus	2 (iscontinued its operations or disposit	osed of more	than 25% of its net		
No.	1 8	Number of vo	ting members of the governing b	ody (Part VI, line 1a)			3	15
5	4 1			e governing body (Part VI, line 1b)			4	15
200	5	Total number	of individuals employed in calend	dar year 2014 (Part V, line 2a)		,,,	5	0
i i	6	Total number		6	135			
Activities & Governance	7a	Total unrelate	ed business revenue from Part VII		7a	0.		
_	b	Net unrelated	business taxable income from F	orm 990-T, line 34		TOTAL SECTION AND ADDRESS OF THE PARTY OF TH	7b	0.
					_	Prior Year		Current Year
٥	8 (Contributions	s and grants (Part VIII, line 1h)			580,52	_	526,416.
Revenue	9	Program serv	rice revenue (Part VIII, line 2g)		177,8		221,907.	
A	10 1	nvestment ir	ncome (Part VIII, column (A), lines	1,38	-	2,199.		
ш	111 (d, 8c, 9c, 10c, and 11e)		122,5	_	127,002.
	12	Total revenue	e - add lines 8 through 11 (must e	qual Part VIII, column (A), line 12)		882,3		877,524.
	13	Grants and s	imilar amounts paid (Part IX, colu	mn (A), lines 1-3)			0.	0.
				nn (A), line 4)		204 41	0.	0.
0	15			fits (Part IX, column (A), lines 5-10)		201,1	0.	332,233.
Exnences	16a			(A), line 11e)			0.	0.
,	b), line 25) • 47		396,3	. 0	365,334.
ш	111			-11d, 11f-24e)	94-140-9-1-94-1400000 1	597,5		697,567.
	2000			art IX, column (A), line 25)		284,79	_	179,957.
725		Revenue less	expenses. Subtract line 18 from	line 12				
SOF					В	ginning of Current You 1,324,59		End of Year 1,547,446.
SSet	ee 20		(Part X, line 16)			49,8		92,355.
Net Assets	21		s (Part X, line 26)	(I'		1,274,79	_	1,455,091.
F P	art II	Signatur	fund balances. Subtract line 21	from line 20		2,272,77		2,200,002.
00001900	CONTRACTOR STATE	-	CAMBOO CONTRACTOR CONT	eturn, including accompanying schedu	lee and etatem	ents and to the hest of	of my k	cnowledge and helief it is
				officer) is based on all information of			,, ,,,,,	and bollon, it is
uu	c, correc	, and complet	c. Decidiation of preparer (other than	omoor / 13 vascu on all imormation or	millon proparci	nas any knowledge.		
çi.	ın l	Signatu	re of officer			Date		
Sig			Q SIDDIQUI, EXECUTIVE DI	RECTOR				
116			print name and title	Christian Control of C				
			eparer's name	Preparer's signature		Date Chec	k	PTIN
De	.	TIME AUNTA ME		Preparer's signature	PA	5/12/10 It	.mplayad	P01062615

35-1489521 Firm's name GREENWALT CPAS, INC. Firm's EIN Preparer Firm's address > 5342 W. VERMONT STREET Use Only Phone no. 317-241-2999 INDIANAPOLIS, IN 46224 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2014)

Part IV Checklist of Required Schedules

ORGANIZATIONS & VOLUNTARY ACTION

			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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		X
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		X
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		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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?			v
	If "Yes," complete Schedule D, Part IV	9	-	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	x	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	A	/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
•	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
d	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	7.10		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	4.01		x
STEELER F	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	900	(2011
		Form	990	(2014

Page 4

Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 X 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 X Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 X 25a 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 X Schedule L, Part I 25b 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," X 26 complete Schedule L, Part II 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 X 27 of any of these persons? If "Yes," complete Schedule L, Part III 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): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28b b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 280 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? X 31 If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X Part V. line 1 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X 36 If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI ... Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O Form 990 (2014)

ORGANIZATIONS & VOLUNTARY ACTION

Par	Check if Schedule O contains a response or note to any line in this Part V				х
	oneda in estinada o containo a response en note to any internation and a activities			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		163	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportab	le gaming			
	(gambling) winnings to prize winners?		1c	х	
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 2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
	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?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authorit				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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 Account	s (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	nization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	gifts			
	were not tax deductible?	******	6b		
7	Organizations that may receive deductible contributions under section 170(c).				.,
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services pr	ovided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requ	irea	7-		x
	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d		7c		A
d	· · · · · · · · · · · · · · · · · · ·	2	70		x
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	?	7e 7f		X
f q	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 889	99 as required?	7g	N/A	10000
h	and the second of the second o		7h	N/A	_
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
			8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	N/A	9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities10b				
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders N/A 11a			1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	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.	N/A	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	N/A	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O.				
D	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				
	Enter the amount of reserves on hand 13c				
14a	BOLD CONTRACTOR OF THE CONTRAC		14a		х
la la	If "Vee " has it filed a Form 720 to report these payments? If "Ne " are side as a suplement in Calabatila O		14h		

Form 990 (2014)

ORGANIZATIONS & VOLUNTARY ACTION 23-7378021 Page 6 Form 990 (2014) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 15 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 15 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a 15b **b** Other officers or key employees of the organization 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 X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶IN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 19 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: SHARIQ SIDDIQUI - 317-684-2120

432006 11-07-14

Form 990 (2014)

441 WEST MICHIGAN STREET, INDIANAPOLIS, IN 46202

Form 990 (2014)

ORGANIZATIONS & VOLUNTARY ACTION

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and 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.

(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer .	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) ALAN ABRAMSON	1.00									
PRESIDENT		Х		х				0.	0.	0
(2) NUNO DE THEMUDO	1.00									
SECRETARY		х		х				0.	0.	0
(3) DWIGHT BURLINGAME	1.00									
TREASURER		х		х				0.	0.	0
(4) FRANCIE OSTROWER	1.00									
PAST PRESIDENT		x						0.	0.	0
(5) LEHN BENJAMIN	1.00									
DIRECTOR		x						0.	0.	0
(6) ANGELA BIES	1.00		\vdash			\vdash				
DIRECTOR		х						0.	0.	0
(7) JOANNE CARMAN	1.00					\vdash				
DIRECTOR		х						0.	0.	0
(8) HECTOR CRDERO-GUZMAN	1.00					T				
DIRECTOR		х						0.	0.	0
(9) CHAO GUO	1.00					Т				
DIRECTOR		х						0.	0.	0
(10) JOHN MCNUTT	1.00					\vdash				
DIRECTOR		х						0.	0.	0
(11) JUDY MILLESEN	1.00									
DIRECTOR		х						0.	0.	0
(12) JOHN RONQUILLO	1.00	\vdash								
DIRECTOR		х						0.	0.	0
(13) MARK SIDEL	1.00									
DIRECTOR		x						0.	0.	0
(14) JESSICA SOWA	1.00					T				7.00
DIRECTOR		x						0.	0.	0
(15) DAVID SUAREZ	1.00									
DIRECTOR		х						0.	0.	0
(16) SHARIQ SIDDIQUI	40.00									
EXECUTIVE DIRECTOR		1		x		1	1	0.	114,606.	33,800

432007 11-07-14

Form 990 (2014)

ORGANIZATIONS & VOLUNTARY ACTION

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hi	ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	(do	not c	Pos heck ss per	ition more rson i		one n an	(D) Reportable compensation from	(E) Reportable compensation from related	5210	(F) stimate nount other	of
	(list any hours for related organizations below line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC) o		compensation from the organization and related organizations	
		_	_		×	1 0						
		L				L						
		\vdash				-						
		-										
		H				\vdash						
1b Sub-total c Total from continuation sheets to Part V								0.	114,606	_	33,	800.
d Total (add lines 1b and 1c)								0.	114,606	_	33,	800.
2 Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100,	000 of reportable			0
compensation from the organization			_								Yes	No
3 Did the organization list any former officer								and the state of t	nployee on			x
line 1a? If "Yes," complete Schedule J for a 4 For any individual listed on line 1a, is the s								ner compensation from t	he organization	3		A
and related organizations greater than \$15 Did any person listed on line 1a receive or										4		Х
rendered to the organization? If "Yes." con										5		х
Section B. Independent Contractors 1 Complete this table for your five highest co	omnensated inc	dene	nde	nt co	ontr	acto	rs th	nat received more than \$	100 000 of compens	ation fr	om	
the organization. Report compensation for	The state of the s										Fishia mo	
(A) Name and business	s address	NC	NE					(B) Description of s	ervices	Compe	C) ensatio	n
		_			_		\dashv			11		
		_		_			-					
	A 10 100 - 40 100	W.Co.	1026	7.1	72	- 62		4	gastini.	100		
2 Total number of independent contractors (\$100,000 of compensation from the organ		ot lir	mited	d to	thos	se lis	ted	above) who received mo	ore than			
										Form	990	(2014)

ORGANIZATIONS & VOLUNTARY ACTION 23-7378021 Form 990 (2014) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 Total revenue Related or Unrelated exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts. 1 a Federated campaigns 1a **b** Membership dues 92,776. 1b c Fundraising events ... d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 433,640. similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 526,416. h Total. Add lines 1a-1f **Business Code** 2 a CONFERENCE FEES 205,907. 900099 205,907. Program Service MANAGING EDITOR STIPEN 900099 16,000. 16,000. f All other program service revenue 221,907. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 2,199. other similar amounts) 2,199. Income from investment of tax-exempt bond proceeds 122,836. 122,836. 5 Royalties (ii) Personal 6 a Gross rents b Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ __ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a MISCELLANEOUS 900099 4,166. 4,166.

4,166.

877.524.

226,073.

125,035.

Form 990 (2014)

d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions.

ORGANIZATIONS & VOLUNTARY ACTION

Form 990 (2014) ORGANIZATIONS & VOLUME Part IX Statement of Functional Expenses

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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,			W. C. 20100	
	trustees, and key employees	118,810.	86,256.	13,737.	18,817
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	170 776	120 056	21 205	16 425
7	Other salaries and wages	178,776.	130,956.	31,395.	16,425
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	34,647.	17,902.	13,590.	2 155
9	Other employee benefits	34,047.	17,902.	13,390.	3,155
10	Payroll taxes				
11	Fees for services (non-employees):	=			
	Management	3,726.	2,333.	902.	491
b		17,180.	12,497.	2,701.	1,982
c		17,100.	12,457.	2,701.	1,502
	Lobbying Professional fundraising services. See Part IV, line 17				
e	Investment management fees				
g	G				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	25,921.	19,908.	4,161.	1,852
14	Information technology	11,565.	10,404.	225.	936
15	Royalties				
16	Occupancy	10,290.	6,571.	2,327.	1,392
17	Travel	44,469.	17,231.	27,238.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	136,422.	127,411.	9,011.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,162.		5,162.	
23	Insurance	-57.	2,948.	-3,524.	519
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	CONFERENCE SCHOLARSHIPS	45,995.	45,995.		
b	NVSQ EXPENSES	44,780.	44,780.		
c	BANK AND CREDIT CARD FE	11,825.	7,423.	2,835.	1,567
d	TELEPHONE/FAX/COPIER	5,089.	3,210.	1,201.	678
е	All other expenses	2,967.	910.	2,057.	
25	Total functional expenses. Add lines 1 through 24e	697,567.	536,735.	113,018.	47,814
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)				Form 990 (201

Form 990 (2014)

Part X Balance Sheet

ORGANIZATIONS & VOLUNTARY ACTION

Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 120,134. 668,762. Cash - non-interest-bearing 1 280,014. 1,057,948. 2 Savings and temporary cash investments 2 290,000. 301,375. 3 3 Pledges and grants receivable, net 16,021. 4 Accounts receivable, net 6.304. 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 8 8 Inventories for sale or use 36,567. 28,319. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 44,143. 10a _____10b 40,777. 5,162. 3 366. 10c b Less: accumulated depreciation 28,072. 30,000. 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets Other assets. See Part IV, line 11 15 15 1,324,598. 1,547,446. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 55,757. 16,557. Accounts payable and accrued expenses 17 17 18 18 33,249. 36,598. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 92 355. 49,806. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Assets or Fund Balances 869,801. 698,358. 27 Unrestricted net assets 27 557,261. 385,816. Temporarily restricted net assets 28 28 19,175. 19,175. Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds Net 1,455,091. 1,274,792. 33 Total net assets or fund balances 1,547,446. 1,324,598. 34 Total liabilities and net assets/fund balances 34 Form 990 (2014)

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

3h

Form 990 (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

2014

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990
ASSOCIATION FOR RESEARCH ON NON-PROFIT

Employed

ASSOCIATION FOR RESEARCH ON NON-PR

Employer identification number

ORGANIZATIONS & VOLUNTARY ACTION 23-7378021 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and			1			
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
_	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
0	by each person (other than a						
	governmental unit or publicly		Maria de la composición dela composición de la composición dela composición dela composición dela composición de la composición de la composición dela composición de la composición dela		INSTALL S		
	supported organization) included	100000000000000000000000000000000000000	Electric Controls				
	on line 1 that exceeds 2% of the						
	amount shown on line 11.		Establish				
	column (f)						
6							
	Public support. Subtract line 5 from line 4.						
_	ndar year (or fiscal year beginning in)	(a) 2010	/b) 2011	(-) 2012	(d) 2013	(a) 2014	(f) Total
	Amounts from line 4	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(i) rotal
8	Gross income from interest.						
0	dividends, payments received on						
	securities loans, rents, royalties				1		
	and income from similar sources						
9	Net income from unrelated business						
5	activities, whether or not the						
					=		
10	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
11	assets (Explain in Part VI.) Total support. Add lines 7 through 10						
	Gross receipts from related activities,	oto (soo instructi	one)			12	
12	First five years. If the Form 990 is for	Den grant de resonante de la constante de		d fourth or fifth to			
13	organization, check this box and sto	A STATE OF THE PARTY OF THE PAR				The state of the s	
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2014 (I	ine 6. column (f) d	ivided by line 11. d	column (fi)		14	%
	Public support percentage from 2013					15	%
	33 1/3% support test - 2014. If the			n line 13, and line	14 is 33 1/3% or n	nore, check this box	
	stop here. The organization qualifies						
b	33 1/3% support test - 2013. If the						
	and stop here. The organization qual						
172	10% -facts-and-circumstances test						
	and if the organization meets the "fac	The second secon					
	meets the "facts-and-circumstances"				and the same of th		
h	10% -facts-and-circumstances test						
	more, and if the organization meets the	and the second of the second of	Same and the same of the same				
	organization meets the "facts-and-circ						
18	Private foundation. If the organization						
	- Anna and					edule A (Form 990	Company of the compan

Schedule A (Form 990 or 990-EZ) 2014 ORGANIZATIONS & VOLUNTARY ACTION Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support	ow, piedoc compie	oto r art ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	471,625.	109,038.	158,334.	580,520.	526,416.	1,845,933.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			Ø	2		
3	Gross receipts from activities that are not an unrelated trade or business under section 513	251,571.	253,075.	222,531.	177,878.	221,907.	1,126,962.
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf				-		
5	The value of services or facilities furnished by a governmental unit to the organization without charge		e.				
6	Total. Add lines 1 through 5	723,196.	362,113.	380,865.	758,398.	748,323.	2,972,895.
	Amounts included on lines 1, 2, and 3 received from disqualified persons			7			0.
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year				ill.		0.
(Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6.)						2,972,895.
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6	723,196.	362,113.	380,865.	758,398.	748,323.	2,972,895.
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	143,851.	134,411.	55,463.	122,817.	125,035.	581,577.
Ł	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						77
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	143,851.	134,411.	55,463.	122,817.	125,035.	581,577.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,220.	913.	1,688.	1,115.	4,166.	9,102.
13	Total support. (Add lines 9, 10c, 11, and 12.)	868,267.	497,437.	438,016.	882,330.	877,524.	3,563,574.
14	First five years. If the Form 990 is for t	the organization's	first, second, third	fourth, or fifth ta	x year as a section	501(c)(3) organizati	ion,
_	check this box and stop here						
_	ction C. Computation of Public			Sund fother where any			
15	Public support percentage for 2014 (lin	and the same of the same	and the second s	lumn (f))		15	83.42 %
16						16	81.43 %
	ction D. Computation of Invest			10 1 (0)		49	16.32 %
	Investment income percentage for 201			100		17	70
18	Investment income percentage from 2 a 33 1/3% support tests - 2014. If the company is a 33 1/3% support tests - 2014.			line 14 and line		18 3 1/3% and line 17	70
198	more than 33 1/3%, check this box and						IS NOT
t	33 1/3% support tests - 2013. If the c	organization did no	ot check a box on I	ine 14 or line 19a	, and line 16 is mo	re than 33 1/3%, an	d
20	line 18 is not more than 33 1/3%, check		The second secon				
20	Private foundation. If the organization	uiu not check a b	ox on line 14, 19a,	or 19b, check th	is DOX and See Ins		

432023 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 ORGANIZATIONS & VOLUNTARY ACTION

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? /f "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.

	Yes	NO
1	0==0	
2		
2-		
3a		
l man		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
10.27		
8		
9a		
9b		
00		
9c		
10a		
401		
10b 990 or 99		0011

Schedule A (Form

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

4

5

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013e Excess from 2014

ASSOCIATION FOR RESEARCH ON NON-PROFIT

nedule A (Form 990 or 990-EZ) 2014 ORGANIZATIONS & VOLUNTARY ACTION	23-7378021	Page
nedule A (Form 990 or 990-EZ) 2014 ORGANIZATIONS & VOLUNTARY ACTION Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 1	7a or 17b; and Part III, line	12.
Also complete this part for any additional information. (See instructions).		
· ·		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Employer identification number

2014

	ASSOCIATION FOR	RESEARCH ON NON-PROFIT	
	ORGANIZATIONS &	VOLUNTARY ACTION	23-7378021
Organization type (chec	ck one):		
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1	nonexempt charitable trust not treated as a private foundation	
	527 politi	cal organization	
Form 990-PF	501(c)(3)	exempt private foundation	
	4947(a)(1	nonexempt charitable trust treated as a private foundation	
	501(c)(3)	taxable private foundation	
and the second s		General Rule or a Special Rule.	
Note. Only a section 50	1(c)(7), (8), or (10) org	anization can check boxes for both the General Rule and a Special Rul	e. See instructions.
General Rule			
	•	990-EZ, or 990-PF that received, during the year, contributions totaling Complete Parts I and II. See instructions for determining a contributor's	
Special Rules			
sections 509(a))(1) and 170(b)(1)(A)(v	ction 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to i), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount Parts I and II.	or 16b, and that received from
year, total cont	tributions of more tha	ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a n \$1,000 exclusively for religious, charitable, scientific, literary, or educ or animals. Complete Parts I, II, and III.	
year, contribut is checked, en purpose. Do no	ions exclusively for re ter here the total com ot complete any of th	etion 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a sligious, charitable, etc., purposes, but no such contributions totaled motifications that were received during the year for an exclusively religious e parts unless the General Rule applies to this organization because it ons totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc.,
		by the General Rule and/or the Special Rules does not file Schedule B its Form 990; or check the box on line H of its Form 990-EZ or on its Fo	

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
ASSOCIATION FOR RESEARCH ON NON-PROFIT
ORGANIZATIONS & VOLUNTARY ACTION

Employer identification number

23-7378021

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
ASSOCIATION FOR RESEARCH ON NON-PROFIT
ORGANIZATIONS & VOLUNTARY ACTION

Employer identification number

23-7378021

Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
		\$	32
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	3
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
_			
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
urti			
_			
		\$	<u></u>
(a)		(2)	-
No. rom	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(see instructions)	Date received
_			
453 11-05-	14	Schedule B (Form	990, 990-EZ, or 990-PF) (2

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ASSOCIATION FOR RESEARCH ON NON-PROFIT

Employer identification number

Pai		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		
1	Total number at end of year	(0)			
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in wri	ting that the assets held in donor advise	ed funds		
J	are the organization's property, subject to the organization's exc	(2) [1] - (1) - (tation with the state of the st		
6	Did the organization inform all grantees, donors, and donor advi				
	for charitable purposes and not for the benefit of the donor or d	y and the control of the first of the control of the			
	impermissible private benefit?		Yes No		
Pai			art IV line 7		
1	Purpose(s) of conservation easements held by the organization		are ry, mio 7.		
1	Preservation of land for public use (e.g., recreation or edu		orically important land area		
	Protection of natural habitat	Preservation of a certi			
	Preservation of open space	Preservation of a certi	med filstofic structure		
2	Complete lines 2a through 2d if the organization held a qualified	Loopseyation contribution in the form of	of a concentration easement on the last		
2		Conservation contribution in the form of	of a conservation easement on the last		
	day of the tax year.		Held at the End of the Tax Year		
	Total number of concernation accoments				
a	Total number of conservation easements Total acreage restricted by conservation easements		2.		
b	Number of conservation easements on a certified historic struct	ura included in (a)			
C	Number of conservation easements included in (c) acquired after		11701170		
u			(C) AND		
3	listed in the National Register Number of conservation easements modified, transferred, releasements				
3	AND THE RESERVE OF THE PROPERTY OF THE PROPERT	sed, extinguished, or terminated by the	organization during the tax		
4	Number of states where property subject to conservation essen	nent is located			
5	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				
3	violations, and enforcement of the conservation easements it has		Yes No.		
6	Staff and volunteer hours devoted to monitoring, inspecting, an				
7	그렇게 하다 아니아 얼마가 있었습니다. 아마 그 나는 보다 아마 하다 아마				
8	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)? Yes No				
9	In Part XIII, describe how the organization reports conservation				
	include, if applicable, the text of the footnote to the organization				
	conservation easements.	. o manolar statements that december to	no organization o accounting to		
Pai	t III Organizations Maintaining Collections of A	rt, Historical Treasures, or Oth	ner Similar Assets.		
	Complete if the organization answered "Yes" to Form 99				
1a	If the organization elected, as permitted under SFAS 116 (ASC		ent and balance sheet works of art.		
	historical treasures, or other similar assets held for public exhibit				
	the text of the footnote to its financial statements that describes				
b	If the organization elected, as permitted under SFAS 116 (ASC		and balance sheet works of art, historical		
1570	treasures, or other similar assets held for public exhibition, educ				
	relating to these items:				
	(i) Revenue included in Form 990, Part VIII, line 1		> \$		
2	If the organization received or held works of art, historical treasu		PRODUCE AS COMPANY		
	the following amounts required to be reported under SFAS 116		No.		
а		y 100 000) rotating to those items.	> \$		
	Assets included in Form 990, Part X				
			HILLIEF PORTS AND ADDRESS AND		

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

Schedule D (Form 990) 2014

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

3,366.

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 ORGANIZATIONS & V	OLUNTARY ACTION		23-7378021 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" to			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	r end-of-year market value
Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			***************************************
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost of	r end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Complete if the organization answered "Yes" to (a) [Description	Id. See Form 990, Part X, line 15.	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	.		
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" to	Form 990 Part IV line 1	1e or 11f. See Form 990. Part X. line	25
. (a) Description of liability		b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line	25.1		
Liability for uncertain tax positions. In Part XIII, provide t		the organization's financial statemen	nts that reports the
organization's liability for uncertain tax positions under f			
organization a nability for uncertain tax positions under t	THE THO (MOD 140). CHECK I		Schedule D (Form 990) 20

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Inspection

Internal Revenue Service Name of the organization

ASSOCIATION FOR RESEARCH ON NON-PROFIT ORGANIZATIONS & VOLUNTARY ACTION

Employer identification number 23-7378021

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INTERDISCIPLINARY COMMUNITY OF PEOPLE DEDICATED TO FOSTERING THROUGH
RESEARCH AND EDUCATION THE CREATION, APPLICATION, AND DISSEMINATION OF
KNOWLEDGE ON NONPROFIT ORGANIZATIONS, PHILANTHROPY, CIVIL SOCIETY, AND
VOLUNTARY ACTION, ARNOVA IS THE US - BASED, NATIONAL AND INTERNATIONAL
ASSOCIATION THAT CONNECTS SCHOLARS, TEACHERS, AND PRACTICE LEADERS
INTERESTED IN RESEARCH ON NONPROFIT ORGANIZATIONS, VOLUNTARY ACTION,
PHILANTHROPY, AND CIVIL SOCIETY. ARNOVA IS A NEUTRAL, OPEN FORUM
COMMITTED TO STRENGTHENING THE RESEARCH ABOUT AND HELPING BETTER
PRACTICE IN THESE REALMS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BASED, NATIONAL AND INTERNATIONAL ASSOCIATION THAT CONNECTS SCHOLARS,
TEACHERS, AND PRACTICE LEADERS INTERESTED IN RESEARCH ON NONPROFIT
ORGANIZATIONS, VOLUNTARY ACTION, PHILANTHROPY, AND CIVIL SOCIETY.
ARNOVA IS A NEUTRAL, OPEN FORUM COMMITTED TO STRENGTHENING THE RESEARCH
ABOUT AND HELPING BETTER PRACTICE IN THESE REALMS.
FORM 990, PART V, LINE 7.A. AND 7.B.:
FOR DUES - ARNOVA HAS TWO KINDS OF DUES - REGULAR (INDIVIDUAL,
INSTITUTIONAL, AND STUDENT) AND SUPPORTING (INDIVIDUAL AND
INSTITUTIONAL). THE SUPPORTING PORTION, THE EXCESS AMOUNT OVER AND
ABOVE THE DUES FEE, IS CONSIDERED A DONATION. THE MAJORITY OF THE
SUPPORTING CATEGORY COMES FROM THE INSTITUTIONAL DESIGNATION AND THESE
COMPANIES CANNOT DEDUCT THE CHARITABLE PORTION FOR TAX PURPOSES. AS
SUCH, ARNOVA DOES NOT MAINTAIN A PROCESS TO SEND ACKNOWLEDGEMENT
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014)

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