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DLN: 93493318057584

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 By law, the IRS

generally cannot redact the information on the form

OMB No 1545-0047

		► Information about Form 990 and its instructions is at <u>www.IRS.gov</u> ,							
		calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31. C Name of organization	-2013	D Emple	ver ident	tification number			
	eck if applica Tress change	INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION		-		incution number			
	ne change	Doing Business As		23-7	268394				
	ıal return	Number and street (sp.D.O. how firead a pot delivered to street address). Description							
	minated	Number and street (or P O box if mail is not delivered to street address) Room/suite 777 NORTH CAPITOL STREET NE STE	2	E Teleph	one numbe	er			
	ended returr	600-TAX City or town, state or province, country, and ZIP or foreign postal code		(202)	962-46	500			
_	olication pend	WASHINGTON, DC 200024240		G Gross	G Gross receipts \$ 349,826,807				
	,	F Name and address of principal officer	H(a) Is the		•				
		JOAN MCCALLEN		rdınates?		∨Yes ∨ No			
		777 NORTH CAPITOL STREET NE STE 600-TAX	H(b) Are a	ll cubord	ınatac	┌ Yes ┌ No			
		WASHINGTON, DC 200024240	inclu		illates	j řesj No			
I Ta	x-exempt st	tus	If "N	o," attach	alıst (see instructions)			
J W	ebsite: ►	WWW ICMARC ORG	H(c) Grou	ıp exemp	ion num	ber ►			
K Forn	n of organiza	tion	L Year of fo	rmation 19	972 M S	itate of legal domicile DE			
Pa	rt I S	ummary							
Governance	THE UND RET: RET: AVA	ESSEN THE BURDENS OF STATE AND LOCAL GOVERNMENTS AND THE ESTABLISHMENT AND ADMINISTRATION OF QUALIFIED AND DEFERR ER SECTIONS 457 AND 401 OF THE INTERNAL REVENUE CODE, BY PR REMENT PLAN ADMINISTRATION AND ASSET MANAGEMENT SERVICE REMENT PLANNING AND INVESTMENT EDUCATION SUPPORT THE COLLABLE TO ALL STATE AND LOCAL GOVERNMENT EMPLOYERS, INCLUBLE RETIREMENT PLAN ADMINISTRATION OR PUBLIC TRUST INVESTMENT	ED COMPE OVIDING T ES, WHICH : ORPORATIO DING MANY	NSATIO HEM WITINCLUDE ON MAKE YTHAT H	N RETIR TH EXTE BROAD S ITS S AVE LII	EMENT PLANS NSIVE D-BASED ERVICES MITED OR NO			
		k this box ▶┌ if the organization discontinued its operations or disposed of	more than 2	:5% of its	net ass	ets			
Activities &									
∄		per of voting members of the governing body (Part VI, line 1a)		•	3 4				
∢		number of individuals employed in calendar year 2013 (Part V., line 2a)			5	824			
		number of volunteers (estimate if necessary)			6	0			
		unrelated business revenue from Part VIII, column (C), line 12			7a	11,649,944			
	b Net	nrelated business taxable income from Form 990-T, line 34			7b	-1,923,422			
	8 Cd	ntributions and grants (Part VIII, line 1h)	Prio	r Year	0	Current Year			
ā		ogram service revenue (Part VIII, line 2g)		170,162,		188,032,713			
Rayenue		vestment income (Part VIII, column (A), lines 3, 4, and 7d)	18,137,031			13,932,288			
æ		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		415,	376	418,229			
		tal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	,	188,715,	141	202,383,230			
)		1,114,	_	1,019,336			
	14 Be	nefits paid to or for members (Part IX, column (A), line 4)			0	0			
ø		larıes, other compensation, employee benefits (Part IX, column (A), lines 10)	,	106,740,	869	114,886,389			
Expenses		ofessional fundraising fees (Part IX, column (A), line 11e)		200,7 10,	0	0			
8		al fundraising expenses (Part IX, column (D), line 25) •0							
ш		her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	. 41,649,327 46,724,8						
		tal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		149,504,	599	162,630,603			
3.04 30.68	19 Re	venue less expenses Subtract line 18 from line 12	Beginning	39,210, g of Curre 'ear		39,752,627 End of Year			
Not Assets or Fund Balances	20 To	tal assets (Part X, line 16)		406,510,	064	452,312,085			
유 사	21 To	tal liabilities (Part X, line 26)		62,094,	907	63,092,562			
		t assets or fund balances Subtract line 21 from line 20	3	344,415,	157	389,219,523			
Unde my kr	r penalties nowledge a rer has ar	gnature Block of perjury, I declare that I have examined this return, including accompany nd belief, it is true, correct, and complete Declaration of preparer (other that y knowledge Signature of officer	officer) is						
		ELIZABETH GLISTA TREASURER							
		ype or print name and title							
De:	1		te Che	eck if employed	PTIN P017848	47			
Paid	d parer	ype or print name and title Print/Type preparer's name Preparer's signature Dai	self-	eck if -employed n's EIN ► 3	P017848				

WASHINGTON, DC 20005 May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

Use Only

✓ Yes ☐ No

orm	1990 (2013)					Page ∡
Par		ment of Program Servif Schedule O contains a res			· · · · · · · · · · · · · · · · · · ·	
1		be the organization's missio	•	·		·
- HE NST	CORPORATIO FRUMENTALITI	N SERVES TO LESSEN TH	E BURDENS OF QUALIFIED ANI	D DEFERRED COMPEN	GOVERNMENTS AND THEIR A ISATION RETIREMENT PLANS	
2		zation undertake any signifi			which were not listed on	
	· ·	990 or 990-EZ?				☐ Yes ☑ No
3	Did the organi	ribe these new services on S zation cease conducting, or		nt changes in how it con	ducts, any program	「Yes ▼ No
		ribe these changes on Sche	dule O			i res i no
4	Describe the o	organization's program servi	ce accomplishn 4) organizations	s are required to report	ee largest program services, as the amount of grants and alloca	
4a					1,019,336) (Revenue \$ MENT PLANNING AND INVESTMENT ED DING 1,092,616 PUBLIC SECTOR EMPL	
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4d	Other progra (Expenses \$	m services (Describe in Sch	nedule O) cluding grants o	f \$) (Revenue \$)
4e	Total prograr	m service expenses ►	134,196,346			

Part IV	Checklist of	Required	Schedules

			Vac	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No_
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 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
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[6]{3}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2013)

GI I	Statements Regarding Other IRS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 133		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 reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
ı	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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
l	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than $$100,000$, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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 provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	The symmetric field manual of off offine a daring the year 1 1 1 1 1	1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	_ <u></u>		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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	<u> </u> 		
	Enter the amount of reserves on hand	 1	 	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	ı	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		Yes	
11a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes	
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b	Yes	
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b	Yes Yes Yes	
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
11a b 12a c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

►ELIZABETH GLISTA TREASURER 777 NORTH CAPITOL STREET NE STE

WASHINGTON, DC 20002 (202) 962-4600

<u>Part VII</u> 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

for related organizations below dotted line) (1) JOAN MCCALLEN 40 00 PRESIDENT/CEO/DIRECTOR (2) JACQUELINE CHARNLEY 2 00 DIRECTOR (3) FRANCES GONZALEZ 2 00 DIRECTOR (4) THOMAS LUNDY 2 00 DIRECTOR (5) PEGGY MERRISS 2 00 DIRECTOR (6) DAVID MORA 2 00 DIRECTOR (7) ROBERT O'NEILL 2 00 DIRECTOR (8) TIMOTHY VAILL 2 00 DIRECTOR (9) ROBERT VIVIAN 2 00	Individual trustiee x x x x x	Institutional Trustee	Officei ×	Ke) employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
PRESIDENT/CEO/DIRECTOR 2 00 (2) JACQUELINE CHARNLEY 2 00 DIRECTOR 2 00 (3) FRANCES GONZALEZ 2 00 DIRECTOR 2 00 (4) THOMAS LUNDY 2 00 DIRECTOR 2 00 (6) PEGGY MERRISS 2 00 DIRECTOR 2 00 DIRECTOR 2 00 (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR 30	x x		X				2,152,089	0	37,071
(2) JACQUELINE CHARNLEY DIRECTOR (3) FRANCES GONZALEZ DIRECTOR (4) THOMAS LUNDY DIRECTOR (5) PEGGY MERRISS DIRECTOR (6) DAVID MORA DIRECTOR (7) ROBERT O'NEILL DIRECTOR (8) TIMOTHY VAILL DIRECTOR	X						' ' I		
DIRECTOR 2 00 DIRECTOR 2 00 (4) THOMAS LUNDY 2 00 DIRECTOR 2 00 (5) PEGGY MERRISS 2 00 DIRECTOR 2 00 (6) DAVID MORA 2 00 DIRECTOR 2 00 (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR 2 00	X								.,
(3) FRANCES GONZALEZ DIRECTOR (4) THOMAS LUNDY DIRECTOR (5) PEGGY MERRISS DIRECTOR (6) DAVID MORA DIRECTOR (7) ROBERT O'NEILL DIRECTOR (8) TIMOTHY VAILL DIRECTOR	х						1,750	0	0
DIRECTOR 2 00 (4) THOMAS LUNDY 2 00 DIRECTOR 2 00 (5) PEGGY MERRISS 2 00 DIRECTOR 2 00 (6) DAVID MORA 2 00 DIRECTOR 2 00 (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR 0	х								
DIRECTOR (5) PEGGY MERRISS 2 00 DIRECTOR (6) DAVID MORA 2 00 DIRECTOR (7) ROBERT O'NEILL 2 00 DIRECTOR (8) TIMOTHY VAILL DIRECTOR							1,418	0	0
(5) PEGGY MERRISS 2 00 DIRECTOR (6) DAVID MORA 2 00 DIRECTOR (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR									
(5) PEGGY MERRISS 2 00 DIRECTOR (6) DAVID MORA 2 00 DIRECTOR (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR	,,						9,026	0	O
(6) DAVID MORA 2 00 DIRECTOR (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR	I 🗤								
(6) DAVID MORA 2 00 DIRECTOR 2 00 (7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR 00	X						0	0	0
DIRECTOR (7) ROBERT O'NEILL DIRECTOR (8) TIMOTHY VAILL DIRECTOR									
(7) ROBERT O'NEILL 2 00 DIRECTOR 37 50 (8) TIMOTHY VAILL 2 00 DIRECTOR	×						9,234	0	0
(8) TIMOTHY VAILL 2 00 DIRECTOR									
(8) TIMOTHY VAILL 2 00 DIRECTOR	Х						5,536	397,829	80,549
DIRECTOR									
	х						7,909	0	0
	х						9,234	0	0
DIRECTOR (10) TINA WILLIAMS 2 00									
	х						213	0	0
DIRECTOR (11) ELIZABETH GLISTA 40 00									
			Х				756,278	0	288,334
TREASURER/CFO (12) GEORGE SUZICH 40 00									
			Х				347,320	0	53,239
ASST TREAS/FINANCE MVP									
(13) PATRICIA VAUSE 40 00			Х				296,760	0	35,282
ASST TREAS/FINANCE VP									
(14) RICHARD WHITTY 40 00			х				234,669	0	52,570
ASST TREAS/FINANCE VP							,		ŕ
(15) BARBARA STOTLER 40 00			х				160,608	0	44,272
ASST TREAS/FINANCE DIRECTR							200,000	Ŭ	,272
(16) KATHRYN MCGRATH 40 00			x				1,188,901	0	36,703
SECRETARY/GEN COUNSEL			,				1,100,901	<u> </u>	30,703
(17) ANGELA MONTEZ 40 00							460 170	0	37.003
ASST SEC/DEPUTY GEN CNSL	I		Х				463,172	ď	27,003

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h ar or/tr	cherice Highest compensated	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
(18) GREGORY DYSON	40 00				х			2,390,335	0	55,000
SENIOR VICE PRESIDENT					^			2,390,333	0	33,000
(19) CHRISTOPHER MATZKE SENIOR VICE PRESIDENT	40 00				х			822,345	0	333,099
(20) WAYNE WICKER	40 00				х			4,188,239	0	56,300
SENIOR VICE PRESIDENT								.,		,
(21) DAVID BRAVERMAN MANAGING VICE PRESIDENT	40 00					x		536,996	0	56,888
(22) KAREN CHONG-WULFF	40 00									
MANAGING VICE PRESIDENT						Х		619,077	0	55,313
(23) JULIE DELLINGER MANAGING VICE PRESIDENT	40 00					х		634,998	0	54,398
(24) JAMES ROHRBACHER	40 00									
SENIOR VICE PRESIDENT						х		2,125,633	0	43,160
(25) KEITH SENDALL	40 00									
SENIOR VICE PRESIDENT						Х		2,800,447	0	36,217
1b Sub-Total					<u> </u>	<u></u>				
c Total from continuation sheets to Part	VII, Section A					►				
d Total (add lines 1b and 1c)						•		19,762,187	397,829	1,345,398
Total number of individuals (including b \$100,000 of reportable compensation)				d ab	ove	e) who	rec	eived more than		

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
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 J for such individual	4	Vac	
_		4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 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)	(B)	(C)
Name and business address	Description of services	Compensation
IRON BOW TECHNOLOGIES LLC 4800 WESTFIELDS BOULEVARD CHANTILLY VA 20151	INFORMATION SYSTEMS	715,959
MAYER BROWN LLP 230 SOUTH LASALLE STREET CHICAGO IL 60604	LEGAL SERVICES	631,472
MICROSOFT LICENSING GP 6100 NEIL ROAD RENO NV 89511	INFORMATION SYSTEMS	510,044
DAVIS & HARMAN LLP 1455 PENNSYLVANIA AVENUE NW 120 WASHINGTON DC 20004	LEGAL SERVICES	259,099
ERNST & YOUNG US LLP 200 PLAZA DRIVE SECAUCUS NJ 07094	TAX AND CONSULTING	258,815
	·	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►17

		Check if Schedi	ule O contains a respoi	nse or note to any li	ne in this Part VIII			<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b					
6r. no	c	Fundraising eve	ents 1c					
ß, Al	_							
Gif ilai	d	Related organiz	zations 1d					
ons, Gifts, Grants Similar Amounts	e	Government grant	s (contributions) 1e					
ioi r S	f		ons, gifts, grants, and 1f					İ
tributio Other		sımılar amounts no						
ᅙᆵ	g	Noncash contribution 1a-1f \$	ons included in lines					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f					
9				Business Code				
Пе	2a	RETIREMENT PLAN	IC/TDLICT		176 000 000	176 000 000		
wer				523920	176,800,998	176,800,998		
Program Serwce Revenue	Ь	RETIREMENT ACC		523920	11,195,250		11,195,250	
	С	INVESTMENT ACCO	DUNTS	523920	36,465		36,465	
Ser	d							
Ē	е							
Ž	f	All other progra	am service revenue					
š	g	Total. Add lines	s 2a-2f		188,032,713			
	3		ome (including dividen					
		and other simil	ar amounts)	▶	12,438,852			12,438,852
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties						
		_	(ı) Real	(II) Personal				
	6a	Gross rents Less rental						
	Ь	expenses						
	С	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	148,745,659	191,354				
		assets other	,,					
	ь	than inventory Less cost or						
		other basis and sales expenses	147,261,020	182,557				
	С	Gain or (loss)	1,484,639	8,797				
	d	Net gain or (los	s)		1,493,436			1,493,436
	8a	Gross income f						
Other Revenue		events (not inc \$	luding					
¥e		of contributions	reported on line 1c)					
Re		See Part IV, lin						
er			a .					
₹	b		penses b (loss) from fundraising	ovents -				
•	C Qa		rom gaming activities	events pr				
			ne 19					
			а					
	Ь		penses b					
			(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
		recuins and allo	a a					
	ь	Less cost of a	oods sold b					
		_	(loss) from sales of inv	entory				
		Miscellaneous		Business Code				
	11a	TELEPHONE S	ERVICES	561700	292,000		292,000	
	ь	ACCOUNTING		541200	120,000		120,000	
	С							
	d	All other reven	ue		6,229		6,229	
	e		s 11a-11d	🕨			·	
					418,229			
	12	iocai revenue.	See Instructions .	· · · · 🟲	202,383,230	176,800,998	11,649,944	13.932.288

Form 990 (2013) Part IX Statement of Functional Expenses

)				
Section 50	1(c)(3) ar	id 501(c))(4) org	anızatıons r	must complete all columns All other organizations must complete column (A)
	Chackif	Schodulo	O cont	aine a reen	once or note to any line in this Part IV

	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,019,336	1,019,336		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	14,063,909	8,239,750	5,824,159	
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	77,873,284	65,927,118	11,946,166	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,827,982	6,519,140	1,308,842	
9	Other employee benefits	9,847,893	7,751,568	2,096,325	
10	Payroll taxes	5,273,321	4,428,523	844,798	
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,404,675	928,490	476,185	
c	Accounting	763,619	479,321	284,298	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	184,845	184,845		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	410,739	410,739		
13	Office expenses	2,330,152	2,078,496	251,656	
14	Information technology	5,430,204	4,843,742	586,462	
15	Royalties	400,470	400,470		
16	Occupancy	5,148,135	4,592,136	555,999	
17	Travel	3,383,745	3,210,726	173,019	_
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,751,957	715,899	1,036,058	
20	Interest	20,693	20,693		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,503,016	4,016,690	486,326	
23	Insurance	1,479,141	658,070	821,071	
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	PLAN MAILING/POSTAGE	5,524,565	5,009,664	514,901	
b	DATA PROCESSING	3,104,535	2,593,377	511,158	
С	PLAN PRINTING/PUBLISHNG	2,935,442	2,935,442		
d	PROFESSIONAL SUBSCRPTNS	1,692,137	1,248,255	443,882	
e	All other expenses	6,256,808	5,983,856	272,952	
25	Total functional expenses. Add lines 1 through 24e	162,630,603	134,196,346	28,434,257	0
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)				
·			·	Fo	rm 990 (2013)

Part X Balance Sheet

Pal	τχ	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	40,327,292	2	39,382,455
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	22,154,414	4	24,933,079
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
82	7	Notes and loans receivable, net		7	
ď	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	2,002,290	9	2,290,610
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 74,278,258	, ,		
	Ь	Less accumulated depreciation 10b 60,533,043	7,075,039	10c	13,745,215
	11	Investments—publicly traded securities	293,271,248	11	290,374,900
	12	Investments—other securities See Part IV, line 11	38,551,347	12	77,926,646
	13	Investments—program-related See Part IV, line 11	, ,	13	· · ·
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,128,434	15	3,659,180
	16	Total assets. Add lines 1 through 15 (must equal line 34)	406,510,064	16	452,312,085
	17	Accounts payable and accrued expenses	48,357,013	17	52,856,141
	18	Grants payable	10,007,010	18	02,000,111
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
				21	
68	21	Escrow or custodial account liability Complete Part IV of Schedule D		-21	
Liabiliti	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>. 0</u>		persons Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	13,737,894	25	10,236,421
	26	Total liabilities. Add lines 17 through 25	62,094,907	26	63,092,562
еs —	120	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.	32,33,433		
ē	27	Unrestricted net assets	344,415,157	27	389,219,523
<u>8</u>	28	Temporarily restricted net assets	2 ,	28	
Fund Balance	29	Permanently restricted net assets		29	
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and			
Ξ.		complete lines 30 through 34.			
S 0.	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
45.5	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	344,415,157	33	389,219,523
Ź	34	Total liabilities and net assets/fund balances	406,510,064	34	452,312,085
		rotal habitates and net assets/faile balances	+50,510,504	J -1	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				V
1	Total revenue (must equal Part VIII, column (A), line 12)	1		202,3	383,230
2	Total expenses (must equal Part IX, column (A), line 25)	2		162,6	530,603
3	Revenue less expenses Subtract line 2 from line 1	3		39,7	752,627
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		344,4	415,157
5	Net unrealized gains (losses) on investments	5		3,2	271,353
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		1,7	780,386
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		389,2	219,523
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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As Filed Data -

DLN: 93493318057584

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

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

Open to Public **Inspection**

Name of the organization
INTERNATIONAL CITY MANAGEMENT
ASSOCIATION RETIREMENT CORPORATION

Employer identification number

13300	IATION	_	-						23-7268			
	τI			blic Charity Sta						<u>nstructions</u>		
The o	rganı:		-	te foundation becaus	· ·		= :		-			
1	<u> </u>		-	on of churches, or a				ection 170(l	o)(1)(A)(i).			
2		A scho	ol described	d in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3	Γ			perative hospital se								
4	Γ			h organization opera	ted ın conjun	ction with a	hospital des	cribed in sec	tion 170(b)	(1)(A)(iii). E	nter the	
_	_	hospita	al's name, ci	ty, and state	+ - 6 11		.					_
5	ļ	_		erated for the benefi	_	e or universi	ty owned or o	perated by a	a governmer	itai unit desc	ribea in	
_	_		section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
6	<u> </u>											
7	ı	_		at normally receives		•	support from	a governme	ental unit or i	from the gen	eral public	2
8	Г			on 170(b)(1)(A)(vi). : described in sectio r		•	nplete Part II	.)				
9	, 			at normally receives					uitions mem	nhershin fees	and ares	s c
-	'	_		ities related to its e					•	-		,,
				oss investment inco								
										cax, nom be	1511105505	
10	$\overline{}$		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).									
11	<u>'</u>			ganized and operated							the nurne	coc of
	'	one or the box	more public that descri	ly supported organiz bes the type of supp	ations descr or <u>ti</u> ng organ	ibed in sect ization and (ion 509(a)(1 complete line) or section s 11e th <u>ro</u> u	509(a)(2) S gh 11h	see section 5	09(a)(3).	. Check
	_			b Type II c								
е	ı	other t	_	ox, I certify that the on managers and ot	_					-	· ·	
f				received a written d	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III support	ıng organı	zation,
		check	this box									广
g				2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the			
			ng persons?	rectly or indirectly o	controls outh	or along or t	togothor with	norcone do	scribad in (ii	`	Yes	T No.
							_	persons de:	scribed iii (ii			No
				governing body of th			1111			11g		┼──
				er of a person descr			nhawa?			11g	• •	┼──
				lled entity of a perso						11g	(111)	<u> </u>
h		Provide	e the followi	ng information about	tne supporte	ed organizat	ion(s)					
) Nam		(ii) EIN	(iii) Type of	(iv) Is	th a	(v) Did you	notifi	(vi) Is	+h.a		mount of
_	uppor		(11) LIN	organization	organizati		the organiz		organizat		1 ' '	etary
	ganiza		_		col (i) lis		ın col (i) d		col (i) org		1	port
				lines 1 - 9 above	your gove		suppor	t۶	ın the U	IS?		
				or IRC section	docume	nt?						
				(see instructions))		,					1	
				instructions))	Yes	No	Yes	No	Yes	No	<u> </u>	
Total												

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do						
	not include any "unusual grants ")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished	121,504,04	145,006,489	153,194,401	160,271,865	176,800,998	756,777,794
	in any activity that is related to	, ,	, ,	, ,	, ,	, ,	, ,
3	the organization's tax-exempt purpose Gross receipts from activities						
3	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without						
6	charge Total. Add lines 1 through 5	121,504,04	145,006,489	153,194,401	160,271,865	176,800,998	756,777,794
7a	Amounts included on lines 1, 2, and 3 received from disqualified		, ,	, ,	, ,	, ,	0
	persons						
b	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed	2 240 044	2 64 5 072	2 424 002	2 456 245	2 062 025	45 207 570
	the greater of \$5,000 or 1% of	2,218,84	2,615,872	3,134,003	3,456,815	3,862,035	15,287,570
	the amount on line 13 for the						
	year	2 240 044	2.645.072	2.424.002	2.456.045	2.062.025	45 207 570
	Add lines 7a and 7b	2,218,845	2,615,872	3,134,003	3,456,815	3,862,035	15,287,570
8	Public support (Subtract line 7c from line 6)						741,490,224
Se	ction B. Total Support	•					
Cale	ndar year (or fiscal year	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	beginning in) > Amounts from line 6	121,504,041	145,006,489	153,194,401	160,271,865	176,800,998	756,777,794
9 10a	Gross income from interest,	121,304,041	143,000,403	155,154,401	100,271,003	170,000,550	730,777,734
LVu	dividends, payments received						
	on securities loans, rents,	7,298,092	6,655,712	7,615,377	9,880,126	12,438,852	43,888,159
	royalties and income from						
L	sımılar sources Unrelated busıness taxable						
b	income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	7,298,092	6,655,712	7,615,377	9,880,126	12,438,852	43,888,159
11	Net income from unrelated business activities not						
	included in line 10b, whether or						
	not the business is regularly						
	carried on						
12	Other income Do not include						
	gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	128,802,133	151,662,201	160,809,778	170,151,991	189,239,850	800,665,953
14	First five years. If the Form 990 is check this box and stop here			l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	nization, ▶┌
<u>Se</u> 15	ction C. Computation of Pu Public support percentage for 201			12 column (6)		1 4- 1	
			• •	13, Column (I))		15	92 610 %
16	Public support percentage from 20		•			16	92 460 %
	ction D. Computation of In				(5))		
17	Investment income percentage fo			•	ın (T))	17	5 480 %
18	Investment income percentage from					18	5 6 3 0 %
19a	33 1/3% support tests—2013. If the						line 17 is not ►

^{33 1/3%} support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493318057584

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

Open to Public Inspection

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

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

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

• 9	Section 501(c)(3) organizations th	nat have NOT filed Form 5768 (election undi- nat have NOT filed Form 5768 (election s'' to Form 990, Part IV, Line 5 (Pro	under section 50	01(h)) Complete Part II-B Do	not complete Part II-A
• 8	Section 501(c)(4), (5), or (6) orga	inizations Complete Part III			
Nai	me of the organization ERNATIONAL CITY MANAGEMENT			Employer ident	ification number
	OCIATION RETIREMENT CORPORATION			23-7268394	
Par	t I-A Complete if the or	ganization is exempt under :	section 501(c	c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign acti	vities in Part IV	
2	Political expenditures			.	\$
3	Volunteer hours				
				1/2)	
		ganization is exempt under		c)(3). ·	
1	·	e tax incurred by the organization und		•	\$
2	·	e tax incurred by organization manage		4955	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under :	section 501(c	c), except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to otl	her organizations	for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	¢.
4	Did the filing organization file F				→ Yes
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If	e amount paid fro rectly delivered	m the filing organization's fo to a separate political orgai	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ► ✓ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)	0	9,827
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	0	0
С	Total lobbying expenditures (add lines 1a and 1	b)	0	9,827
d	Other exempt purpose expenditures		162,630,603	36,642,132
e	Total exempt purpose expenditures (add lines 1	c and 1d)	162,630,603	36,651,959
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,000	1,000,000
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
9	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	250,000
h	Subtract line 1g from line 1a If zero or less, ent	er - 0 -	0	0
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0	0
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form 472	0 reporting	

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

	Lobbying Expen	ditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	13,537	9,716	38,733	9,827	71,813
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures			38,733	9,827	48,560

		nization is exempt under section 501(c)(3) and has letion under section 501(h)).	NOT			rage 3
	•		(a	a)	(b))
ror eac. activity		below, provide in Part IV a detailed description of the lobbying	Yes	No	Amo	unt
		ntion attempt to influence foreign, national, state or local nfluence public opinion on a legislative matter or referendum,				
a \	√olunteers?					
b F	Paid staff or management (include co	mpensation in expenses reported on lines 1c through 1i)?				
c l	Media advertisements?					
	Mailings to members, legislators, or t					
	Publications, or published or broadca					
	Grants to other organizations for lobb	· · · · ·				
_		staffs, government officials, or a legislative body?				
		onventions, speeches, lectures, or any similar means?				
	Other activities?					
-	Total Add lines 1c through 1i					
		organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax					
		incurred by organization managers under section 4912 ction 4912 tax, did it file Form 4720 for this year?		1		
		nization is exempt under section 501(c)(4), section !	E01(a)	\/F\		
rait	501(c)(6).	mzation is exempt under section 501(c)(4), section s	JOT(C)(3), 0	i secu	<u> </u>
				_	Yes	s No
		dues received nondeductible by members?		⊢	1	
		use lobbying expenditures of \$2,000 or less?		<u> </u>	2	
		ver lobbying and political expenditures from the prior year?	-04 <i>(</i>)		3	
Part		nization is exempt under section 501(c)(4), section ! er (a) BOTH Part III-A, lines 1 and 2, are answered " /es."				
1 [Dues, assessments and similar amou		1			
	Section 162(e) nondeductible lobbying expenses for which the section 527(f	ng and political expenditures (do not include amounts of political) tax was paid).				
	Current year		2a			
	Carryover from last year		2b			
	Total		2c			
		n 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
		on line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and				
	political expenditure next year?	, · ·	4			
	Taxable amount of lobbying and politi		5			
Par	t IV Supplemental Inform	ation				
	ide the descriptions required for Part II-B, line 1 Also, complete this part f	I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou for any additional information	ıp lıst),	Part II	-A, line 2	2, and
	Return Reference	Explanation				
	LIATED GROUP LIST) WAS MAI ASS DC (GR	ERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENTING ORGANIZATION) - 23-7268394, 777 NORTH CAPITOL STREMENTING ORGANIZATION) - 23-7268394, 777 NORTH CAPITOL STREAM OF THE SECTION HAS NOT THE SECTION OF	EET, N HIS OF ITY/CO STE 50 LIC OP	E , STE RGANIZ DUNTY I DO, WAS INION	600-TA ATION MANAGE SHINGTO	AX, HAS EMENT DN,

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3	i age -				
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493318057584

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

етта	r Revenue Service			Inspection
INT	me of the organization ERNATIONAL CITY MANAGEMENT OCIATION RETIREMENT CORPORATION			loyer identification number
	rt I Organizations Maintaining Donor Adv			7268394 or Accounts. Complete if the
	organization answered "Yes" to Form 990	(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year	(a) Donor advised funds		(b) I unus and other accounts
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor			
	funds are the organization's property, subject to the or	ganization's exclusive legal control?		☐ Yes ☐ No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?			
E	rt II Conservation Easements. Complete if	the organization answered "Ves"	to Forn	
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	anization (check all that apply) or education) Preservation of a	an histori a certifie	cally important land area d historic structure
	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 histo	• •	2c	
t	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transferrenthe tax year ▶	ed, released, extinguished, or termina	ted by th	e organization during
	Number of states where property subject to conservat	ion easement is located ►		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, ha	ndling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ements d	luring the year
	A mount of expenses incurred in monitoring, inspecting \$ \begin{align*}	g, and enforcing conservation easemer	ıts durınç	g the year
	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of so	ection 17	7 0 (h)(4)(B)(ı)
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th	e footnote to the organization's financi		
a r	the organization's accounting for conservation easement III Organizations Maintaining Collection	s of Art, Historical Treasures	, or Otl	ner Similar Assets.
3	Complete if the organization answered "Y If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	.16 (ASC 958), not to report in its rev	, or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	.16 (ASC 958), to report in its revenue ets held for public exhibition, education	e statem	ent and balance sheet
	(i) Revenues 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, histor following amounts required to be reported under SFAS			
3			_	b. ¢
а	Revenues included in Form 990, Part VIII, line 1			► \$

b Assets included in Form 990, Part X

Par	TITLE Organizations Maintaining Co	llections of Art,	, His	<u>tori</u>	<u>cal Ti</u>	<u>reası</u>	ures, or O	the	r Similar <i>F</i>	sse	ts (co	ntınued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, ch	eck	any of	the fol	lowing that a	are a	sıgnıfıcant u	se of	ıts	
а	Public exhibition		d	Γ	Loan	orexo	:hange progi	rams				
b	Scholarly research		e	Γ	Othe	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and explai	n hov	v the	y furth	er the	organızatıor	ı's ex	empt purpos	e ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	fthe	organ	ızatıon	ı's collectior	۱?			Yes	┌ No
Par	Part IV, line 9, or reported an am						n answere	d "Y	es" to Form	990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for c	ontribi	utions	or other ass	ets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	able		-					
							-		,	Mou	ınt	
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, line	21?							Γ	Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been	provided in I	Part	XIII			Г
Pa	rt V Endowment Funds. Complete											
		(a)Current year	(b)	Prior	year	b (c) ⊺	wo years back	((d)	Three years bac	k (e)Four ye	ars back
1a	Beginning of year balance							+		-		
b	Contributions					-		+		+		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
е	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g	, colum	nn (a))	held as					
а	Board designated or guasi-endowment	,	•	_								
ь	Permanent endowment ►											
c	Temporarily restricted endowment											
	The percentages in lines 2a, 2b, and 2c shot	ıld equal 100%										
За	Are there endowment funds not in the posses	·	ition t	hat a	are hel	d and a	admınıstere:	d for	the			
	organization by	J									Yes	No
	(i) unrelated organizations			•		•		•		a(i)		
	(ii) related organizations							•	<u> </u>	a(ii)		
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	<u>=</u>				•		•		3b		
	t VI Land, Buildings, and Equipme					n ans	wered 'Ves	:' to	Form 990	Part	TV lin	16
	11a. See Form 990, Part X, line 1		110 01	gai	izatio	11 4115	wered res	,	101111 330,	uit	1 7 , 111	
	Description of property				Cost or s (inves		(b)Cost or o basis (othe		(c) Accumulat depreciation		(d) Boo	k value
1a	Land											
b	Buildings		•							\perp		
	Leasehold improvements		•				4,757	,328	1,795,	927	2	2,961,401
	Equipment		•	<u></u>			28,946	,903	23,730,	528	Ę	,216,375
e	Othor									I		
	O ther						40,574	,027	35,006,	588		5,567,439 3,745,215

provided in Part XIII

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization a	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of va Cost or end-of-year	
(1)Financial derivatives			
(2)Closely-held equity interests	-		
(3)Other (A) FORWARD CREDIT FLSIX (1,938,883 SH)	13,591,571	F	
(B) I-SHARES MSCI EFA (408,500 SH)	27,394,010	F	
(C) INVESCO ABRIX (1,147,018 SH)	13,638,048	F	
(D) RIDGEWORTH SAMBX (2,499,987 SH)	22,649,886	F	
(E) VANTAGEPOINT VPRHX (51,266 SH)	653,131	F	
(2) ************************************	033,131	<u>'</u>	
	-		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	77,926,646		
Part VIII Investments—Program Related. Cor	, ,		orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.	· · · · · · · · · · · · · · · · · · ·		
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	,		
Part IX Other Assets. Complete if the organization		, Part IV, line 11d See I	
(a) Descrip	tion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.			
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	iization answered 'Yes' to	o Form 990, Part IV, I	ine 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes			
RETIREMENT BENEFIT OBLIGATION, NONCURRENT	6,327,177		
OBLIGATIONS UNDER CAPITAL LEASES OTHER LIABILITIES	621,891		
·			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,236,421		

Part		evenue per Audited Financial Statements With Revenue p vered 'Yes' to Form 990, Part IV, line 12a.	er Ro	eturn Complete if
1		r support per audited financial statements	1	
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12		
a	Net unrealized gains on invest	ments 2a		
b	Donated services and use of fa	acılıtıes		
С	Recoveries of prior year grants	s		
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d .		2e	
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and	l 4c. (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expenses	per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line 12a.		
1	· · · · · · · · · · · · · · · · · · ·	raudited financial statements	1	
2		t not on Form 990, Part IX, line 25		
а		acilities		
b				
С				
d				
е	Add lines 2a through 2d		2e	
3			3	
4		0, Part IX, line 25, but not on line 1:		
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)			
С	Add lines 4a and 4b		4c	
5		nd 4c. (This must equal Form 990, Part I, line 18)	5	
	XIII Supplemental Inf			
Part \		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Return Reference	Explanation		
PART	X, LINE 2	FIN 48 (ASC 740) FOOTNOTE TO THE CORPORATION'S AUDITED FID PROVIDES THE FOLLOWING DISCLOSURE THE FASB ASC 740, INCOESTABLISHES GUIDELINES FOR RECOGNIZING, MEASURING, AND DESTABLISHES GUIDELINES FOR RECOGNIZING, MEASURING, AND DESTABLISHES GUIDELINES FOR RECOGNIZING, MEASURING, AND DESTABLISHES IN FINANCIAL STATEMENTS MANAGEMENT HAS EVALUADED TO MATERIAL IMPACT ON ITS CONSOLIDATED FINANCIAL STACCORDINGLY, NO ADJUSTMENTS FOR UNRECOGNIZED TAX BENEFINTEREST OR PENALTIES WERE REQUIRED AS OF DECEMBER 31, 20 CORPORATION WOULD RECOGNIZE ACCRUED INTEREST RELATED BENEFITS IN INTEREST EXPENSE AND PENALTIES IN "OTHER EXPECONSOLIDATED STATEMENTS OF REVENUE, EXPENSES AND CHANKMANAGEMENT IS NOT AWARE OF ANY TAX POSITIONS FOR WHICH POSSIBLE THAT THE TOTAL AMOUNTS OF UNRECOGNIZED TAX BEISIGNIFICANTLY INCREASE OR DECREASE DURING THE NEXT TWELT THE TAX YEARS IN THE FOUR-YEAR PERIOD ENDING DECEMBER 31 TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES,	OME TOUSCLUATE PLICATEM FITS ()13 I TO U NSES GES I IT IS NEFIT VE M(, 201	TAXES, OSING TAX RETURN D THE ATION OF ASC 740 MENTS OR RELATED F APPLICABLE, THE NRECOGNIZED TAX " IN THE N NET ASSETS REASONABLY TS WOULD ONTHS EACH OF 3 REMAINS SUBJECT

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

Schedule D (Form 990) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Internal Revenue Service	nal Revenue Service					
	ization _ CITY MANAGEME .ETIREMENT CORP				Employer ident	ification number
Part I Gen		n on Activitie		ne United States. Co		ation answered
1 For grantmother assis	nakers.Does the o tance, the grantee	rganization masses' eligibility fo	aintain records or the grants o	to substantiate the are assistance, and the s	election criteria used	nd Yes No
	nakers. Describe in outside the United		ganızatıon's p	rocedures for monitorii	ng the use of its gran	ts and other
3 Activites pe	r Region (The follow	ung Part I, line 3	3 table can be d	uplicated if additional spa	ce is needed)	
(a)	Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EUROPE (IN ICELAND &	NCLUDING GREENLAND)	0	0	INVESTMENTS		1,741,679
(2) NORTH AM AND MEXIC	ERICA (CANADA CO)	0	0	INVESTMENTS		
(3)						
(4)						
(5)						
3a Sub-total		0	0			1,741,679
b Total from c to Part I	ontinuation sheets	0	0			
c Totals (add	lines 3a and 3h)	0	l			1 741 679

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

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

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	THE CORPORATION ENGAGED JPMORGAN CHASE BANK TO SERVE AS A THIRD-PARTY CUSTODIAN OF ITS FOR EIGN INVESTMENTS DURING THE YEAR, THE CORPORATION ACQUIRED AND SOLD SEVERAL FOREIGN GOVER NMENT BONDS HELD IN THE CUSTODIAN'S OMNIBUS FINANCIAL ACCOUNTS IN BELGIUM AND CANADA THE MAXIMUM AGGREGATE VALUE OF THESE INVESTMENTS IN BELGIUM WAS \$3,358,000 AND THE YEAR-END VALUE WAS \$1,742,000 THE MAXIMUM AGGREGATE VALUE OF THESE INVESTMENTS IN CANADA WAS \$859,000 THE CORPORATION SOLD THE CANADIAN HOLDINGS BEFORE YEAR-END THE CORPORATION DID NOT HAVE AN INTEREST IN, OR SIGNATURE OR OTHER AUTHORITY OVER ANY FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES

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Part I General Information on Grants and Assistance

Schedule I (Form 990)

Department of the Treasury

INTERNATIONAL CITY MANAGEMENT

ASSOCIATION RETIREMENT CORPORATION

Internal Revenue Service Name of the organization

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

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

Attach to Form 990

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

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

OMB No 1545-0047

DLN: 93493318057584

Inspection

Employer identification number

23-7268394

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 gran or assistance
L) CENTER FOR STATE ND LOCAL GOVERNMENT XCELLENCE INC 77 NORTH CAPITOL TREET NE 5TH LOOR /ASHINGTON, DC 20002	26-2661207	501(C)(3)	979,336				GRANT FOR PUBLIC RESEARCH INTO STATE AND LOCAL GOVERNMENT RETIREMENT COMPENSATION AND BENEFITS
2) ICMA-RC ANTAGEPOINT PUBLIC MPLOYEE MEMORIAL CHOLARSHIP FUND 77 NORTH CAPITOL TREET NE STE 600 00 /ASHINGTON, DC 20002	52-2281478	501(C)(3)	30,000				SCHOLARSHIPS FOR DEPENDENTS OF PUBLIC SECTOR EMPLOYEES WHO DIE IN THE LINE OF DUTY
B) HABITAT FOR UMANITY METRO IARYLAND INC 110 GAITHER ROAD IAITHERSBURG, MD 08771422	52-1299516	501(C)(3)	10,000				ASSISTANCE IN BUILDING AFFORDABLE HOUSING FOR LOW- INCOME RESIDENTS OF MONTGOMERY COUNTY, MD

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

(a)Type of grant or assistance	e (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 In	formation. Provide the inf	ormation required in Pa	art I, line 2, Part III, co	umn (b), and any other a	dditional information.
Return Reference	Explanation				

Return Reference

PART I, LINE 2

SUPPLEMENTAL INFORMATION ON GRANTS MADE BY THE CORPORATION TO ADVANCE ITS MISSION, THE CORPORATION SUPPORTS RESEARCH INTO RETIREMENT COMPENSATION AND BENEFIT ISSUES FACING STATE AND LOCAL GOVERNMENT EMPLOYERS IN PROVIDING SUCH SUPPORT, THE CORPORATION MADE GRANT PAYMENTS TO THE CENTER FOR STATE AND LOCAL GOVERNMENT EXCELLENCE, INC, A SECTION 501(C)(3) PUBLIC CHARITY THE CORPORATION MONITORS THE ACTIVITIES OF THIS ORGANIZATION BY ATTENDING PRESENTATIONS AND REVIEWING PUBLICATIONS THROUGH WHICH RESEARCH FINDINGS ON STATE AND LOCAL GOVERNMENT EMPLOYER AND EMPLOYEE RETIREMENT TOPICS ARE BEING DISSEMINATED IN ADDITION, THE CORPORATION MAINTAINS REPRESENTATION ON THE BOARD OF DIRECTORS OF THIS ORGANIZATION THE CORPORATION ALSO MADE GRANTS IN SUPPORT OF ICMA-RC VANTAGEPOINT PUBLIC EMPLOYEE MEMORIAL SCHOLARSHIP FUND, A SECTION 501(C)(3) PUBLIC CHARITY, WHICH INDEPENDENTLY AWARDS AND MAKES QUALIFYING HIGHER EDUCATION SCHOLARSHIP PAYMENTS TO DEPENDENTS OF PUBLIC

OWN CHARITABLE PROGRAM GUIDELINES

SECTOR EMPLOYEES WHO DIE IN THE LINE OF DUTY THE INDIVIDUAL RECIPIENTS ARE SELECTED BY THIS ORGANIZATION UNDER ITS

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OMB No 1545-0047

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

Name of the organization INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION

Employer identification number 23-7268394

Pa	rt I	Questions Regarding Compensatio	n				
						Yes	No
la				ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	굣	First-class or charter travel	Г	Housing allowance or residence for personal use			
	<u> </u>	Travel for companions	Г	Payments for business use of personal residence			
	Γ	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Γ	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b		ny of the boxes in line 1a are checked, did the or mbursement or provision of all of the expenses do			1b	Yes	
2		I the organization require substantiation prior to le ectors, trustees, officers, including the CEO/Exe		- · · · · · · · · · · · · · · · · · · ·	2	Yes	
3	org	licate which, if any, of the following the filing orga anization's CEO/Executive Director Check all t ed by a related organization to establish compens	hat appl				
	굣	Compensation committee	굣	Written employment contract			
	~	Independent compensation consultant	굣	Compensation survey or study			
	굣	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4		ring the year, did any person listed in Form 990, a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Red	ceive a severance payment or change-of-control	paymen	it?	4a		No
b	Par	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				Yes	
С		ticipate in, or receive payment from, an equity-b			4c		No
		Yes" to any of lines 4a-c, list the persons and pr					
	Onl	ly 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5		persons listed in Form 990, Part VII, Section Anpensation contingent on the revenues of	, lıne 1a	, did the organization pay or accrue any			
а	The	e organization?			5a		Νo
b	Αn	y related organization?			5b		No
		Yes," to line 5a or 5b, describe in Part III					
5		persons listed in Form 990, Part VII, Section A	, line 1a	, did the organization pay or accrue any			
а	The	e organization?			6a		No
b	Αn	y related organization?			6b		No
	If"	Yes," to line 6a or 6b, describe in Part III					
7		persons listed in Form 990, Part VII, Section A ments not described in lines 5 and 6? If "Yes,"			7	Yes	
3	We sub	re any amounts reported in Form 990, Part VII,	paid or a		8		No
9		Yes" to line 8, did the organization also follow th	e rebutt	able presumption procedure described in Regulations	٩		140

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

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

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	FIRST-CLASS TRAVEL THE CORPORATION'S TRAVEL GUIDELINES PROVIDE DIRECTORS WITH THE OPTION OF FIRST-CLASS TRAVEL WHEN IT INVOLVES EXTENUATING CIRCUMSTANCES, SUCH AS LATE NIGHT ARRIVALS AND LONGER FLIGHT TIMES WHILE ATTENDING BOARD MEETINGS IN 2013, TWO OF TEN DIRECTORS USED THIS OPTION TRAVEL FOR COMPANIONS IN CONSIDERATION OF PERSONAL AND FAMILY OBLIGATIONS, THE CORPORATION'S TRAVEL GUIDELINES PROVIDE FOR ASSISTANCE IN DEFRAYING TRAVEL COSTS OF COMPANIONS OR FAMILY MEMBERS WHO MAY ACCOMPANY DIRECTORS TO BOARD MEETINGS ALTHOUGH NOT PAID DIRECTOR FEES FOR THEIR SERVICES, DIRECTORS RECOGNIZE TAXABLE INCOME IN THE AMOUNT OF ANY SUCH ASSISTANCE IN 2013, EIGHT OF TEN DIRECTORS RECEIVED PAYMENTS UNDER THIS POLICY
PART I, LINE 4B	SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN IN 2000, THE BOARD OF DIRECTORS ADOPTED A SECTION 457(F) SUPPLEMENTAL RETIREMENT PLAN FOR SENIOR EXECUTIVES THE BOARD REVIEWED COMPARABILITY DATA PROVIDED BY AN INDEPENDENT COMPENSATION OR SULITANT BEFORE APPROVING THIS PLAN AS PART OF AN OVERALL PROGRAM OF REASONABLE COMPENSATION THEREAFTER, THE BOARD HAS PERIODICALLY REVIEWED COMPARABILITY DATA THROUGH 2013 AS THE RIGHTS OF ITS PARTICIPANTS ACCRUED OR VESTED UNDER THE PLAN AFFER EACH SUCH REVIEW, THE BOARD HAS DETERMINED THAT THE AMOUNTS ACCRUED OR PAID UNDER THE PLAN WERE REASONABLE AS PART OF THE INDIVIDUAL PARTICIPANTS' OVERALL COMPENSATION NONE OF THE PLAN PARTICIPANTS TOOK PART IN THE BOARD'S DELIBERATIONS OF DECISIONS RELATING TO THIS PLAN PERSONS USTED IN FORM 90, PARTIVIT, SECTION A, WHO WERE ELIGIBLE AND APPROVED BY THE BOARD TO PARTICIPATE AND EARN UNVESTED CREDIT TOWARD REFIGEN OF THE PLAN PROVIDED THE PLAN AS ADDIVISED ON THE PROVIDED THE PLAN AS ADDIVISED ON THE PROVIDED TO THE PART OF THE PLAN AS ADDIVISED ON THE PARTICIPANTS AND PART VILL SECTION AS AND AS DETERMINED BY THE CORPORATION'S ACTUARIES ELIGIBLE AND APPROVED PLAN APARTICIPANTS INCLUDED THE PLAN AS ADDIVISED ON THE PROVIDED ON THE PROVIDED THE PLAN AS ADDIVISED ON THE PROVIDED ON THE PART OF THE PLAN AS ADDIVISED ON THE PART OF THE PART OF THE PLAN AS ADDIVISED ON THE PART OF THE PART
PART I, LINE 7	FROM 2004 TO PRESENT NON-FIXED PAYMENTS THE CORPORATION OFFERS SHORT-TERM, FUNCTIONAL, AND LONG-TERM INCENTIVE COMPENSATION PROGRAMS FOR CERTAIN EXECUTIVES THESE PLANS ARE ESTABLISHED BY THE CORPORATION'S BOARD BASED ON RECOMMENDATIONS OF THE ADMINISTRATION AND COMPENSATION COMMITTEE OF THE BOARD THE PROGRAMS HAVE SPECIFIC GOALS AND OBJECTIVES THAT ARE APPROVED IN ADVANCE BY THE BOARD, AND IN THE BOARD'S DISCRETION, PARTICIPANTS MAY BE AWARDED COMPENSATORY AMOUNTS BASED ON PERFORMANCE IN ACCORDANCE WITH SUCH GOALS AND OBJECTIVES THE CORPORATION'S BOARD APPROVES ALL AMOUNTS

EARNED AND RECEIVED A FORM OF SUCH PAYMENTS DURING 2013

UNDER THESE PROGRAMS AND RELIES ON MARKET DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT TO DETERMINE THEIR REASONABLENESS AS PART OF THE PARTICIPANTS' OVERALL COMPENSATION ALL PERSONS LISTED ON FORM 990, SCHEDULE J, PART II Software ID: Software Version:

EIN: 23-7268394

Name: INTERNATIONAL CITY MANAGEMENT

ASSOCIATION RETIREMENT CORPORATION

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation		SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
JOAN MCCALLEN PRESIDENT/CEO/DIRECTOR	(I) (II)	646,212 0	1,499,333 0	6,544 0	25,500 0	11,571 0	2,189,160 0	(
ROBERT O'NEILL DIRECTOR	(I) (II)	5,536 362,864	,	0	0 56,884	0 23,665	5,536 478,378	
ELIZABETH GLISTA TREASURER/CFO	(1) (11)	306,851 0	433,067 0	16,360 0	260,067 0	28,267 0	1,044,612	(
GEORGE SUZICH ASST TREAS/FINANCE MVP	(II)	209,190 0	137,278 0	852 0	25,500 0	27,739 0	400,559 0	(
PATRICIA VAUSE ASST TREAS/FINANCE VP	(I) (II)	177,190 0	118,823 0	747 0	25,500 0	9,782 0	332,042 0	(
RICHARD WHITTY ASST TREAS/FINANCE VP	(I) (II)	163,104 0	70,982 0	583 0	24,020 0	28,550 0	287,239 0	(
BARBARA STOTLER ASST TREAS/FINANCE DIRECTR	(I) (II)	121,521 0	38,717 0	370 0	16,582 0	27,690 0	204,880	(
KATHRYN MCGRATH SECRETARY/GEN COUNSEL	(I) (II)	396,212 0	541,333 0	251,356 0	25,500 0	11,203 0	1,225,604	(
ANGELA MONTEZ ASST SEC/DEPUTY GEN CNSL	(I) (II)	243,232 0	201,494 0	18,446 0	25,500 0	1,503 0	490,175 0	(
GREGORY DYSON SENIOR VICE PRESIDENT	(I) (II)	257,957 0	362,693 0	1,769,685 0	25,500 0	29,500 0	2,445,335 0	1,184,416
CHRISTOPHER MATZKE SENIOR VICE PRESIDENT	(I) (II)	277,560 0	542,450 0	2,335 0	306,087 0	27,012 0	1,155,444 0	(
WAYNE WICKER SENIOR VICE PRESIDENT	(I) (II)	424,732 0	894,905 0	2,868,602 0	25,500 0	30,800 0	4,244,539 0	1,721,348
DAVID BRAVERMAN MANAGING VICE PRESIDENT	(I) (II)	234,495 0	283,858 0	18,643 0	25,500 0	31,388 0	593,884 0	(
KAREN CHONG-WULFF MANAGING VICE PRESIDENT	(I)	286,412 0	329,971 0	2,694 0	25,500 0	29,813 0	674,390 0	(
JULIE DELLINGER MANAGING VICE PRESIDENT	(II)	271,260 0	343,661 0	20,077	25,500 0	28,898 0	689,396 0	(
JAMES ROHRBACHER SENIOR VICE PRESIDENT	(I) (II)	208,874 0	264,110 0	1,652,649 0	25,500 0	17,660 0	2,168,793 0	534,750
KEITH SENDALL SENIOR VICE PRESIDENT	(1) (11)	260,300 0	515,900 0	2,024,247	25,500 0	10,717 0	2,836,664 0	1,234,472

DLN: 93493318057584

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► 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.

Transactions with Interested Persons

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

Name of the organization **Employer identification number** INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION 23-7268394 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) (d) Loan to (e)Original (f)Balance (i)Written (c) (g) In (h) ınterested Relationship Purpose of or from the principal due default? Approved agreement? with organization? amount bν person loan organization board or committee? Τо Yes Yes No From No Yes Total Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (d) Type of assistance (b) Relationship between (c) A mount of assistance (a) Name of interested (e) Purpose of assistance person interested person and the organization

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) Sharing of organization's revenues?			
				Yes	No		
(1) VANTAGETRUST	SEE PART V	116,977,993	SEE PART V		No		
(2) THE VANTAGEPOINT FUNDS	SEE PART V	44,839,142	SEE PART V		No		
		·					

Part V Supplemental Information

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

Return Reference	Explanation
PART IV EXPLANATION	TO ACCOMPLISH ITS TAX-EXEMPT MISSION, THE CORPORATION PROVIDES INVESTMENT ADVISORY, TRANSFER AGENCY, AND MANAGEMENT AND ADMINISTRATIVE SUPPORT SERVICES TO VANTAGETRUST (REVENUE RULING 81-100 GROUP RETIREMENT TRUST) AND THE VANTAGEPOINT FUNDS (REGISTERED INVESTMENT COMPANY) IN WHICH CERTAIN
	GOVERNMENTAL RETIREMENT PLANS ADMINISTERED BY THE CORPORATION INVEST THEIR ASSETS BY ARRANGEMENT AND APPROVAL OF THE BOARDS OF DIRECTORS OF VANTAGETRUST AND THE VANTAGEPOINT FUNDS, SEVERAL DIRECTORS AND OFFICERS OF THE CORPORATION ALSO SERVE AS DIRECTORS AND OFFICERS OF THESE ENTITIES THE TRANSACTION AMOUNTS SHOWN IN FORM 990, SCHEDULE L, PART IV, COLUMN C, CONSTITUTE PROGRAM SERVICE REVENUE RECEIVED BY THE CORPORATION, AS REFLECTED IN THE TOTALS SHOWN ON THE FORM 990, PART VIII, LINE 2A

Schedule L (Form 990 or 990-EZ) 2013

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As Filed Data -

DLN: 93493318057584

OMB No 1545-0047 2013

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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 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.

Employer identification number Name of the organization INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION 23-7268394

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	DURING 2013, JOAN MCCALLEN AND ROBERT O'NEILL ALSO SERVED AS DIRECTORS ON THE BOARD OF THE CENTER FOR PUBLIC ADMINISTRATION AND SERVICE, INC, AN ORGANIZATION THAT OWNS AND MANAGES THE OFFICE BUILDING LOCATION OF THE CORPORATION'S HEADQUARTERS IN WASHINGTON, D.C. JOAN MCCALLEN, ELIZABETH GLISTA, AND RICHARD WHITTY ALSO SERVED AS OFFICERS OF THIS ENTITY DURING 2013, DAVID MORA ALSO SERVED AS A DIRECTOR ON THE BOARD OF THE VANTAGEPOINT FUNDS, AN INVESTMENT COMPANY IN WHICH CERTAIN OF THE RETIREMENT PLANS ADMINISTERED BY THE CORPORATION INVEST THEIR ASSETS LIKEWISE, JOAN MCCALLEN, ELIZABETH GLISTA, GEORGE SUZICH, RICHARD WHITTY, KATHRYN MCGRATH, AND ANGELA MONTEZ SERVED AS OFFICERS OF THIS ENTITY

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	CERTAIN ACTIONS OF THE CORPORATION'S BOARD OF DIRECTORS MAY BE REVIEWED OR APPROVED BY ANOTHER SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION, INTERNATIONAL CITY/COUNTY MANAGEMENT ASSOCIATION DIRECTORS WHO HAVE BEEN SELECTED BY THE CORPORATION'S BOARD ARE ALSO SUBJECT TO APPOINTMENT BY THIS SECTION 501(C)(3) ORGANIZATION IN ADDITION, ANY DECISION BY THE CORPORATION'S BOARD TO REMOVE A DIRECTOR OR AMEND ITS CHARTER WOULD BE SUBJECT TO CONCURRENCE OR APPROVAL BY THIS SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION HOWEVER, THIS ORGANIZATION DOES NOT HAVE THE POWER TO REMOVE CORPORATION'S DIRECTORS AND DESIGNATE NEW DIRECTORS

Return Reference	Explanation
SECTION A, LINE 7B	CERTAIN GOVERNANCE DECISIONS OF THE CORPORATION'S BOARD OF DIRECTORS MAY BE REVIEWED OR APPROVED BY ANOTHER SECTION 501(C)(3) TAX-EXEMPT ORGANIZATION SEE THE RESPONSE TO THE FORM 990, PART VI, SECTION A, LINE 7A, ABOVE

Return Reference	Explanation			
	THE CORPORATION'S ANNUAL FORM 990 UNDERGOES A NUMBER OF INTERNAL AND EXTERNAL REVIEWS BEFORE IT IS FILED WITH THE IRS IT IS REVIEWED BY OUTSIDE TAX COUNSEL AND AN INDEPENDENT TAX ACCOUNTING FIRM THE FORM IS ALSO EXAMINED BY SENIOR MANAGEMENT AND PROVIDED TO THE CORPORATION'S DIRECTORS BEFORE IT IS FILED			

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CORPORATION'S BOARD OF DIRECTORS HAS ADDPTED A WRITTEN CONFLICT OF INTEREST POLICY THAT APPLIES TO ALL OF ITS DIRECTORS. IN ADDITION, THE BOARD OF DIRECTORS HAS ADOPTED, AND THE SENIOR MANAGEMENT HAS IMPLEMENTED, A SEPARATE WRITTEN CONFLICT OF INTEREST POLICY THAT APPLIES TO OFFICERS AND ALL CLASSES OF EMPLOY EES. THE CORPORATION'S CONFLICT OF INTEREST POLICIES DEFINE "CONFLICTS OF INTEREST" AND ESTABLISH REPORTING, REVIEW, AND DISCIPLINARY PROCEDURES. THE CORPORATION MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICIES THROUGH DISCLOSURE, WHISTLEBLOWER, AND OTHER PERIODIC REPORTING PROCESSES DESIGNED TO IDENTIFY INVESTMENT OR BUSINESS TRANSACTIONS AND AFFILIATIONS THAT MAY BE SIGNIFICANT AND GIVE RISE TO CONFLICTS OF INTEREST ALL DIRECTORS, OFFICERS, AND EMPLOYEES MUST ACKNOWLEDGE RECEIPT AND UNDERSTANDING OF THE RESPECTIVE CONFLICT OF INTEREST POLICIES EACH YEAR IN ADDITION, DIRECTORS, OFFICERS, AND SENIOR MANAGERS (INCLUDING KEY EMPLOYEES) ARE REQUIRED TO REPORT ANY EMPLOY MENT, INVESTMENT, BUSINESS, OR FAMILY RELATIONSHIPS THAT MAY INVOLVE THE CORPORATION, ITS DIRECTORS, OFFICERS, AND EMPLOYEES, OR CERTAIN THIRD PARTIES THAT MAY HAVE MATERIAL BUSINESS OR FINANCIAL RELATIONSHIPS WITH THE CORPORATION, TO INCLUDE SIGNIFICANT VENDORS AND SERVICE PROVIDERS THE CORPORATION AND ITS BOARD OF DIRECTORS HAVE ESTABLISHED PROCEDURES FOR REVIEWING AND ENFORCING MATTERS INVOLVING POTENTIAL OR ACTUAL CONFLICTS OF INTEREST IN ORDER TO PRECLUDE DIRECTORS, OFFICERS, OR EMPLOYEES (IN DECISION-MAKING CAPACITIES) FROM PARTICIPATING IN DELIBERATIONS OR DECISIONS IN WHICH CONFLICTS MAY BE FOUND TO EXIST THE CORPORATION'S CONFLICT OF INTEREST POLICIES ARE ADMINISTERED BY THE COMPLIANCE AND LEGAL DEPARTMENTS, WITH DETERMINATIONS MADE AND EFFECTED BY THE CHIEF COMPLIANCE OFFICER, AND, WHEN APPROPRIATE, THE CHIEF EXECUTIVE OFFICER OR THE AUDIT AND OVERSIGHT COMMITTEE OF THE BOARD OF DIRECTORS, WITH ANY POTENTIALLY CONFLICTED PARTIES BEING RECUSED

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE 2013 COMPENSATION OF THE CORPORATION'S CEO AND OTHER SENIOR EXECUTIVES WAS REVIEWED AND APPROVED, IN ADVANCE, BY VOTE OF THE INDEPENDENT MEMBERS OF THE CORPORATION'S BOARD OF DIRECTORS IN EVALUATING SUCH COMPENSATION, THE BOARD HAD THE BENEFIT OF RECOMMENDATIONS FROM ITS ADMINISTRATION AND COMPENSATION COMMITTEE, ALSO COMPRISED OF INDEPENDENT DIRECTORS NO MEMBER OF THE BOARD OR THE COMMITTEE VOTING ON SUCH COMPENSATION HAD OR HAS A CONFLICT OF INTEREST IN RESPECT THERETO AS PART OF THE REVIEW AND APPROVAL PROCESS, THE BOARD AND COMMITTEE OBTAINED FROM AN INDEPENDENT COMPENSATION CONSULTANT, AND RELIED ON, DATA ON MARKET COMPARABILITY COMPENSATION FOR COMPARABLE POSITIONS IN COMPARABLE ORGANIZATIONS, INCLUDING DATA OBTAINED FROM FORM'S 990 OF OTHER TAX-EXEMPT ORGANIZATIONS, PUBLICLY-AVAILABLE FINANCIAL AND MARKET DATA ON RELEVANT PRIVATE SECTOR ENTITIES, AND COMPENSATION STUDIES COMPILED BY THIRD-PARTY COMPENSATION EXPERTS BOARD AND COMMITTEE DELIBERATIONS AND DECISIONS ON SUCH COMPENSATION MATTERS WERE FULLY AND CONTEMPORANEOUSLY DOCUMENTED DURING 2013, THIS REVIEW AND APPROVAL PROCESS WAS UNDERTAKEN FOR EACH OF THE FOLLOWING PERSONS AND POSITIONS JOAN MCCALLEN (PRESIDENT, CHIEF EXECUTIVE OFFICER), ELIZABETH GLISTA (TREASURER, CHIEF FINANCIAL OFFICER), KATHRYN MCGRATH (SECRETARY, GENERAL COUNSEL), GREGORY DYSON (SENIOR VICE PRESIDENT), CHRISTOPHER MATZKE (SENIOR VICE PRESIDENT), WAYNE WICKER (SENIOR VICE PRESIDENT), DAVID BRAVERMAN (MANAGING VICE PRESIDENT), KAREN CHONG-WULFF (MANAGING VICE PRESIDENT), JULIE DELLINGER (MANAGING VICE PRESIDENT), JAMES ROHRBACHER (SENIOR VICE PRESIDENT), AND, KETH SENDALL (SENIOR VICE PRESIDENT) THE CORPORATION ALSO CONDUCTS BIANNUAL INTERNAL STUDIES OF COMPENSATION AMOUNTS PROVIDED TO THE MEMBERS OF ITS BOARD OF DIRECTORS THIS REVIEW PROCESS WAS UNDERTAKEN IN 2012 USING COMPARABILITY DATA GATHERD FROM RECENT FORMS 990 OF OTHER TAX-EXEMPT ORGANIZATIONS AND FROM PUBLICLY-DISCLOSED FINANCIAL AND MARKET INFORMATION ON RELEVANT PRIVATE SECTOR ENTITIES (ALTHOUGH THEY ARE NOT PAID

Return Reference	n Reference Explanation			
	SENIOR MANAGEMENT OF THE CORPORATION HAS APPROVED AND IMPLEMENTED A PUBLIC DISCLOSURE POLICY WHICH SETS OUT PROCEDURES FOR MAKING ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICIES, FINANCIAL DATA AND TAX DOCUMENTS AVAILABLE FOR INSPECTION UPON REQUEST BY THE GENERAL PUBLIC			

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN UNRECOGNIZED NONQUALIFIED RETIREMENT PLAN COSTS 1,721,439 CHANGE IN AN INVESTMENT ACCOUNTED FOR USING THE EQUITY METHOD 58,947

DLN: 93493318057584

2013

OMB No 1545-0047

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Re

Related Organizations and Unrelated Partnerships

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

SCHEDULE R

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

INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION

Employer identification number 23-7268394

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.							
(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) ICMA-RC SERVICES LLC 777 NORTH CAPITOL STREET NE STE 600 WASHINGTON, DC 20002 52-2138303	SEC-REGST'D BROKER- DEALER DISTRIBUTES MUTUAL FUND & RETRMT TRUST INTERESTS	DE	13,867,055	4,419,544	INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION		
(2) VANTAGEPOINT TRANSFER AGENTS LLC 777 NORTH CAPITOL STREET NE STE 600 WASHINGTON, DC 20002 52-2138305	SEC-REGST'D TRANSFER AGENT SERVICES RETIREMENT TRUST & MUTUAL FUND ASSETS	DE	143,272,389	0	INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION		
(3) VANTAGEPOINT INVESTMENT ADVISERS LLC 777 NORTH CAPITOL STREET NE STE 600 WASHINGTON, DC 20002 52-2138307	SEC-REGST'D ADVISER MANAGES MUTUAL FUND ASSETS HELD BY RETIREMENT TRUST	DE	22,455,096	0	INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION		
(4) VANTAGETRUST COMPANY LLC 777 NORTH CAPITOL STREET NE STE 600 WASHINGTON, DC 20002	STATE-REGULATED TRUST COMPANY MANAGES RETRMT PLAN ASSETS	NH	116,984,847	2,484,772	INTERNATIONAL CITY MANAGEMENT ASSOCIATION RETIREMENT CORPORATION		
Part II Identification of Related Tax-Exempt Organi	izations Complete if	the organization	answered "Yes"	on Form 990 P	art IV line 34 because it had one		

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)	(b)	(c)	(d)	(e)	(f)	(g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling	Section	512(b)
		or foreign country)		(If section 501(c)(3))	entity	(13) cc	ntrolled
							tity?
						Yes	No
(1) INTERNATIONAL CITYCOUNTY MANAGEMENT ASSOCIATION	DEVELOPING AND ADVANCING PROFESSIONAL	IL	501(C)(3)	LINE 9			No
777 NORTH CAPITOL STREET NE STE 500	LOCAL GOVERNMENT MANAGEMENT				N/A		
WASHINGTON, DC 20002	THE TOTAL PROPERTY OF						
36-2167755						1	1

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlli entity	Predon income(unrela exclude tax u section	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(g) Share of me end-of-year assets	(h) Disproprtiona r allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part		(k) Percenta ownersh	age
						' '/			Yes	No		Yes	No		
															_
Part IV Identification of Related line 34 because it had one of									wered	d "Yes	" on Form	990,	Part :	IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Lega domici (state or fo countr	le oreign	Dii	(d) rect controlling entity	Type o	, S corp,	(f) Share of total income		(g) of end- year assets	of- Percer owne	ntage		(i) ection 51 (b)(13) controlled entity?	d
(1) CENTER FOR PUBLIC ADMINISTRATION AND SERVICE INC	REIT HOLDING THE HEADQUARTERS OFFICE BUILDING	MD		N/A	N/A C		2,867,4		140 6,550,		5,550,341 33 330			res N	10
777 NORTH CAPITOL ST NE WASHINGTON, DC 20002 52-1655825															

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule									
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?										
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b	Gift, grant, or capital contribution to related organization(s)				1b		No			
C	Gift, grant, or capital contribution from related organization(s)				1c		No			
d	Loans or loan guarantees to or for related organization(s)				1d		No			
е	Loans or loan guarantees by related organization(s)				1e		No			
f	f Dividends from related organization(s)									
g	Sale of assets to related organization(s)				1g		No			
h	Purchase of assets from related organization(s)				1h		No			
i	Exchange of assets with related organization(s)				1i		No			
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No			
k	k Lease of facilities, equipment, or other assets from related organization(s)									
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes				
m Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
0	Sharing of paid employees with related organization(s)				10		No			
р	Reimbursement paid to related organization(s) for expenses				1р	Yes				
q	Reimbursement paid by related organization(s) for expenses				1q		No			
r	Other transfer of cash or property to related organization(s)				1r	Yes				
s	Other transfer of cash or property from related organization(s)				1s		No			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	·								
	Name of related organization Tran	(b) nsaction	(c) Amount involved	(d) Method of determining amo	unt in	volved				
	type	pe (a-s)								

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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

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

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013