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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. 20 For the 2013 calendar year, or tax year beginning 2013, and ending D Employer identification number C Name of organization The Shafeek Nader Trust for the Community Interest, Inc Check if applicable Doing Business As same as "C" above Address change 52-1515687 Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change Initial return 202-387-8030 1530 P Street, NW \Box City or town, state or province, country, and ZIP or foreign postal code Terminated Washington, DC 20005 П Amended return G Gross receipts \$ F Name and address of principal officer H(a) is this a group return for subordinates? Yes No Application pending Claire Nader H(b) Are all subordinates included? Tyes No. 1530 P Street, NW / Washington, DC 20005 **√** 501(c)(3)) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list (see instructions) 501(c) (Tax-exempt status Website: ▶ H(c) Group exemption number ▶ Form of organization 🗸 Corporation 🗌 Trust ☐ Association ☐ Other ▶ L Year of formation M State of legal domicile Briefly describe the organization's mission or most significant activities: Community projects have helped citizens in two Activities & Governance different types of communities strengthen democratic self-governing practices, an innovative pedagogy using the arts has taught children learning is enjoyment in school and with their elders in the community; See Schedule "O" Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 3 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 1 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) . 204,370 203,715 Revenue Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 8,116 10,740 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 63 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 212,495 214,518 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 13 41,225 35,225 Benefits paid to or for members (Part IX, column (A), line 4) 14 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 67,905 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 130,612 115,634 18 Total expenses Add lines 13-17 (must equal Part 1x, column (A), line 25) 218,764 171,837 Revenue less expenses. Subtract line 18 from line 22 10 10 19 40,658 -4,246 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 500,031 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances. Subtract line 21 502,216 500,031 Signature Block Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge taire november 14 Sign Date Signature of officer Here LAIRE NADER TRESIDENI Type or print name and title Print/Type preparer's name Preparer's signature Date Paid Check | if self-employed **Preparer** Firm's name ____ Firm's EIN ▶ **Use Only**

Conversion DEC 1 9 2

Firm's address ▶

May the IRS discuss this return with the preparer shown above? (see instructions) .

For Paperwork Reduction Act Notice, see the separate instructions.

91

Phone no

Cat No 11282Y

2

Yes No
Form 990 (2013)

orm 99	90 (2013)	Page 2
Part		
	Check if Schedule O contains a response or note to any line in this Part III	
•	Briefly describe the organization's mission. To deepen the ability and capacity of citizens to participate and shape the quality of their democracy in their community, seeking excellence in the daily practice of citizenship	L
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?] No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?] No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot the total expenses, and revenue, if any, for each program service reported.	
4a		
	The Connecticut-based Community Lawyer Project was founded to build models of a community lawyer/advocate in different type of communities in order to strengthen democratic self-governing processes and practices. The Citizen Advocacy Center (CAC),	
	based in Elmhurst, IL is a 501(c)(3), and a sister project. The Trust founded this institution with a grant and this support continue. The grants are used to advance the idea and practice of community lawyering through instruction and action, in order to deepen quality of the citizenry and the public's self-governing capacities and resources in the suburban setting west and far west of Chicago.	s.
	Educational workshops, films and lectures are held to advance a more resourceful and self-reliant civic life, with a particular focu on locally-based economies, health care, farmers' market, community gardens, and all such activity directed to meeting basic hurneeds.	
4b	(Code.) (Expenses \$ 7,413 including grants of \$ 5,000) (Revenue \$) The Joe A. Callaway Award for Civic Courage was established by Joe A. Callaway in 1990. The Award recognizes individuals in	
	any area of endeavor who, with integrity and at some personal risk, take a public stance to advance truth and justice, and who	
	challenged prevailing conditions in pursuit of the common good Toward this end, Mr Callaway endowed The Shafeek Nader	
	trust for the Community Interest with a special fund to administer this annual award honoring citizens for their civic courage Through this award Mr. Callaway acknowledged the fundamental role of citizen in strengthening our democracy	
	······································	
4c	(Code:) (Expenses \$ 225 including grants of \$ 225) (Revenue \$) The Freedom of Information prizes are given annually at The Gilbert School in Winsted, CT to the three top contestants who best	
	demonstrate their knowledge of the federal and CT freedom of information laws. These are secondary school students. The prize	es
	are presented at a special school-wide event. This project is organized and conducted by the Community Lawyer Project of the Trust in cooperation with faculty.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	

216,854

4e Total program service expenses ▶

Part	V Checklist of Required Schedules		12	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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	}	1
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		1
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 98-197 If "Yes," complete Schedule C, Part III	5		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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 V	10	1	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
	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		1
	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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
D	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		1
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		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	N/	(201

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Part	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	No
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	√	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		1
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		1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . 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	24d 25a		√ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
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		√
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		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>·</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		· ·
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
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	1	

Part				_
	Check if Schedule O contains a response or note to any line in this Part V			
4.	Total the same because and in Day 0 of Form 1000 February 0 of extremely and in Day 0 of Form 1000 February 0 of extremely and in Day 0 of Form 1000 February 0 of extremely and in Day 0 of February 0 of Extremely 0 o	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	4.	1	
20		1c	<u> </u>	├
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1	2	,	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	V	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			١,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		-
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		
_	·	4a		<u> </u>
Ь	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?	5 0		,
5a		5a 5b		7
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		
vu	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		<u> </u>
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	""		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			Ť
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		/A-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			l
	organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		V
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b n/a			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		✓
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	_ N/	A
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			L
14a	,,,,	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change Check if Schedule O contains a response or note to any line in this Part VI	s in Schedule O. S	ee ins		ions.
Secti	on A. Governing Body and Management		<u> </u>	<u> </u>	<u>. [/</u>
		1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 3			
ь 2	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?	•	2	√	
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		1
6 7a	Did the organization have members or stockholders?		6 7a		1
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?		7b		1
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	idertaken during			
а	The governing body?		8a	✓	
b	Each committee with authority to act on behalf of the governing body?		8b		1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule Communication is mailing addresses.)	9		1
Secti	on B. Policies (This Section B requests information about policies not required by th	e Internal Reven	ue C) T-11-
10a	Did the organization have local chapters, branches, or affiliates?		10a	Yes	No -/
b	If "Yes," did the organization have written policies and procedures governing the activities o affiliates, and branches to ensure their operations are consistent with the organization's exemption of the organization of the org		10a	N,	/A
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo	re filing the form?	11a	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	✓	L
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b	✓	ļ
C	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? If "Yes,"	12c	1	
13	Did the organization have a written whistleblower policy?	•	13 14	1	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation		14	√	
а	The organization's CEO, Executive Director, or top management official		15a		1
b	Other officers or key employees of the organization		15b		1
16a	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 to the contribute assets.	lar arrangement			
b	with a taxable entity during the year?		16a		✓
7 - 1:	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	-	16b	N	/ <u>A</u>
<u>5ecτι</u> 17	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► NONE				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	501(c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sci Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year	nts, conflict of inte	-	-	, and
20	State the name, physical address, and telephone number of the person who possesses the beorganization The Corporation / 1530 P Street, NW / Washington, DC 20005 202-387-8030	ooks and records	of the		

	(2013)	

Dort VIII	Compensation of Officers, Directors,	Trustana Vay Emplayana	Highest Companyated Employees	
Part VII	Compensation of Officers, Directors,	Trustees, key Employees	, nighest compensated Employees,	ang
	Independent Contractors			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☑ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do x, office or direct	ot ch unles	Pos neck	c) intion more erson lirect		one n an lee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated
(1) Claire Nader President/Treasurer (2) Laura Milleron	10 3 1	1		1				0	0	
(2) Laura Milleron Secretary	08	1		1				0	0	0
(3) Edmund Shaker	11									
Board of Director (4)	.08	/		 	-			0	0	0
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										7.2
(13)										
(14)										

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individual or directi	unles er and	Pos eck s pe	rson	that both is or lemployee	n an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportation compensation related organization (W-2/1099-N	n from	am comp fro orga and	(F) imated ount of other pensation the inization related	on n
(15)					-	 -		-						
(16)					-	_		-		<u> </u>				
			-			_		-						
(18)						_		-						
						-		_					 -	
					L			-			_			
						_		-						
								_						<u> </u>
						_		_						
						_								
(24)		 												
(25)					·		-						•	
С	Sub-total	VII, Sectio						>	0 0 0	ore than \$1	0) of		0
	reportable compensation from the organi	zation >			1131		20046	-, **		JIE MAN WI			1	
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i> \$							-	loyee, or high	est compe	nsated	3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual					? //		s, "						1
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or inc	dıvıdua	5		1
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear													ax
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compens		
NONE														
					_									
		 												
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

Par	VIII	Statement of Revenue			D = -4 \ / // //		
		Check if Schedule O contains a resp	oonse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
है है	1a	Federated campaigns 1a				V	
ira Per	ь	Membership dues 1b					
ğ,	C	Fundraising events 1c					
ar /	d	Related organizations 1d	200,000				
ii.	e	Government grants (contributions) 1e					
r S	f	All other contributions, gifts, grants,		1			
ğ ğ		and similar amounts not included above 1f	3,715				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$		1			
	h	Total. Add lines 1a-1f	>	203,715			
Program Service Revenue			Business Code				
Ven	2a						
æ	b		<u>-</u>				
Š	С						
Ser	d						<u> </u>
Ę	e						
ğ	f	All other program service revenue.					
	9	Total. Add lines 2a-2f	>				
	3	Investment income (including divide and other similar amounts)					
	١.	-		10,740	····		10,740
	4	Income from investment of tax-exempt bo					
	5	Royalties	(ii) Personal			···	
	6a	Gross rents	(1) (0.001.12.				
	b	Less. rental expenses					
	C	Rental income or (loss)					
	d	· · · · · · · · · · · · · · · · · · ·					
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					•
	ь	Less cost or other basis			i		
		and sales expenses .	i				
	С	Gain or (loss)		.			
	d	Net gain or (loss)	•				
e	- Ra	Gross income from fundraising				-	
Revenue		events (not including \$					
		of contributions reported on line 1c). See Part IV, line 18 a					
Other	l .	Less: direct expenses b		1			
		Net income or (loss) from fundraising	events . 🕨				
	9a	Gross income from gaming activities.					
	į	See Part IV, line 19 a					
		Less direct expenses b	·——				
		Net income or (loss) from gaming active	/ities ▶				
	10a	Gross sales of inventory, less		ļ			
		returns and allowances a	63	İ	II.	1	
		Less cost of goods sold . b	0				
	<u>c</u> _	Net income or (loss) from sales of inve		63	63		
	4.	Miscellaneous Revenue	Business Code	ļ		l	
	11a	••••••					
	b						
	C	All other recent					
	d	All other revenue [
	е 12	Total. Add lines 11a–11d	🟲	0			
	1 14	i otal levellue. See High Uchonis	🖊 1	214 518	63	กเ	10 740

	17,7	prote an coramina v			
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .	<u></u>	<u> </u>
	t include amounts reported on lines 6b, 7b, , 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	30,000	30,000	1	
2	Grants and other assistance to individuals in the United States See Part IV, line 22	5,225	5,225		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	,			
_	•		0		
4 5	Benefits paid to or for members	0	0	0	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		<u> </u>		
-	· · · · · · · · · · · · · · · · · · ·	0			0
7 8	Other salaries and wages	62,997	62,997	0	0
0		0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	4,909	4,909	0	0
11	Fees for services (non-employees):		_	_	_
a	Management	0	0	0	0
b	Legal	0	0	0	0
C	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
e	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column	0	0	0	0
g	(A) amount, list line 11g expenses on Schedule O.)	102.042	402.042		•
12	Advertising and promotion	102,043	102,043	0	0
13	Office expenses		0 124	0	0
14	Information technology	8,474 0	8,134 0	340	
15	Royalties		0	0	0
16	Occupancy		0	0	0
17	Travel	192	192	0	0
18	Payments of travel or entertainment expenses	1921	1921		
	for any federal, state, or local public officials	0	اه	o	0
19	Conferences, conventions, and meetings .	3,354	3,354	0	0
20	Interest	3,334	3,334	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	305	0	305	
23	Insurance	1,265	0	1,265	
24	Other expenses. Itemize expenses not covered	1,203		1,203	
24	above (List miscellaneous expenses in line 24e If			į	
	line 24e amount exceeds 10% of line 25, column		•		
	(A) amount, list line 24e expenses on Schedule O)				
а	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	— —— —————————————————————————————————			
b					
C					
d		_ 			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	218,764	216,854	1,910	
26	Joint costs. Complete this line only if the	210,764	210,054	1,910	
	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)				5 000

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pal	n X		
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	1,500	1	1,500
	2	Savings and temporary cash investments	146,975	2	144,489
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	0	4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L.			
ets	_		0		
Assets	7	Notes and loans receivable, net	0	_	<u> </u>
٩	8	Inventories for sale or use	0	-	C
	9 10a	Prepaid expenses and deferred charges	0	9_	
	IVa	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 9,315			
	ь	5,515	204	10c	
	11	Less: accumulated depreciation	353,380		56
	12	Investments—publicly traded securities	353,380		353,986
	13	Investments—program-related. See Part IV, line 11			0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	502,216		500,031
	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0		0
	19	Deferred revenue			0
	20	Tax-exempt bond liabilities			0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0		0
Ś	22	Loans and other payables to current and former officers, directors,	<u></u>		· · · · · · · · · · · · · · · · · · ·
Liabilities		trustees, key employees, highest compensated employees, and			
ā		disqualified persons. Complete Part II of Schedule L	0	22	o
Ë	23	Secured mortgages and notes payable to unrelated third parties .	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			li.
ā	27	Unrestricted net assets	366,823	27	364,638
Bal	28	Temporarily restricted net assets	58,393	28	58,393
Þ	29	Permanently restricted net assets	77,000	29	77,000
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne.	33	Total net assets or fund balances	502,216	33	500,031
_	34	Total liabilities and net assets/fund balances	502,216	34	500,031
					Form 990 (2013)

Form 9	90 (2013)				P	age 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					₽
1	Total revenue (must equal Part VIII, column (A), line 12)	1				14,518
2	Total expenses (must equal Part IX, column (A), line 25)	2				18,764
3	Revenue less expenses. Subtract line 2 from line 1	3				-4,246
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				02,216
5	Net unrealized gains (losses) on investments	5				2,061
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				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			50	00,031
Par	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. 🗆
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		Г			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ı	n	ı		
	Schedule O.				i	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. [2a	ļ	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oled o	or [
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			- 1		ĺ
b	Were the organization's financial statements audited by an independent accountant?		. L	2b		1
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a [
	separate basis, consolidated basis, or both.					1
	Separate basis Consolidated basis Both consolidated and separate basis			ļ		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over					١.
	of the audit, review, or compilation of its financial statements and selection of an independent accou	ntant?	' L	2c	N,	A
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ı	n [
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n		Ì	
	the Single Audit Act and OMB Circular A-133?			3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		e [
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	ŀ	3b	ふ	A

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Name	of the organization							Employer is	dentificatio	n number	
			COMMUNITY INTERES							515687	
Pa			rity Status (All orga						instructi	ons.	
1 2 3 4	A church, con A school desc A hospital or a A medical resc	vention of churc ribed in section a cooperative ho	ation because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjun- e:	churche ch Sched ation des	s describ lule E.) cribed in	ed in sec section	tion 170	(b)(1)(A)((A)(iii).)(iii). Enter the	ı
5											
6 7								public			
8	A community	trust described i	n section 170(b)(1)(A)(vi). (Co	mplete Pa	art II)					
9	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt funct ent income and unre lifter June 30, 1975. Se	ions-su lated bu	ibject to d siness ta	certain e xable ini	xceptions	s, and (2) ss section) no mor	e than 331/3%	of its
10			doperated exclusively								
11	purposes of o	ne or more pub	nd operated exclusive blicly supported organd describes the type of	nizations	describe	d in sect	ion 509(a	a)(1) or so	ection 50	9(a)(2). See s	
е		indation manage	II c Type II that the organization ers and other than one	is not co	ontrolled o	directly o	r indirectl	ly by one	or more		ersons
f		ation received a check this box	a written determination.	on from	the IRS	that it is	а Туре	I, Type	II, or Ty _l	pe III support	ing 🗆
9	Since August following pers		he organization accep	pted any	gift or co	ontributio	n from a	iny of the	€		
	(III) below,	the governing bo	ndirectly controls, eitlody of the supported of	organızat	tion?		·		dın (11) a	nd Yes	No
			on described in (i) abo							11g(n)	
_		-	a person described in							11g(m)	<u> </u>
<u>h</u>	Provide the fo	llowing informati	on about the support	ed organ	ızatıon(s).			,			
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the orga col (i)	ou notify nization in of your port?	organiza (i) organi	Is the tion in col ized in the S?	(vii) Amount of m support	onetary
	· · · · · · · · · · · · · · · · · · ·			Yes	No	Yes	No	Yes	No]	
(A)											
(B)											
(C)											
(D)											
(E)											
		i	i	I	1	I	1	I	i	I	

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Secti	on A. Public Support						
Caler	dar 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.")	238,850	208,970	305,967	204,370	203,715	1,161,872
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0		0
4	Total. Add lines 1 through 3	238,850	208,970	305,967	204,370	203,715	1,161,872
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)	t					
6	Public support. Subtract line 5 from line 4						75,898
_	on B. Total Support	<u></u>					1,085,974
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	238.850	208,970	305,967	204,370	203,715	1,161,872
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	7,362	9,261	5,123	8,116	10,740	40,602
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	. 0	0	0	0	0	0
11	Total support. Add lines 7 through 10	<u> </u>					1,202,474
12	Gross receipts from related activities, etc.	•	-			12	90
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>			▶ □
	on C. Computation of Public Suppor				· · · · · · · ·		
14	Public support percentage for 2013 (line 6		•		•	14	90 31 %
15	Public support percentage from 2012 Sch					15	86 65 %
16a	331/3% support test – 2013. If the organization qual						
D	331/a% support test—2012. If the organic check this box and stop here. The organic					15 15 33 73 70	· —
47-	,	•				401	□
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization mee Part IV how the organization meets the "forganization	ets the "facts-a	and-circumstai	nces" test, che	eck this box an	d stop here. E	xplain in
b	10%-facts-and-circumstances test – 20 15 is 10% or more, and if the organizat Explain in Part IV how the organization m supported organization	ion meets the	"facts-and-cii	cumstances"	test, check th	is box and sto	op here.
18	Private foundation. If the organization did	d not check a t	oox on line 13.	16a. 16b. 17a	, or 17b, check	k this box and	
	instructions					• •	• □

Part						N/A	
	(Complete only if you checked the	ne box on lin	e 9 of Part I o	or if the organ	ization failed	to qualify und	der Part II.
	If the organization fails to qualify	under the te	ests listed bel	ow, please co	omplete Part	II.)	
	on A. Public Support						
	idar 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.")		ļ				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the	,					
_	organization's tax-exempt purpose		ļ				
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513			ļ			
4	Tax revenues levied for the				1		
	organization's benefit and either paid		ł	1		İ	
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the				1		
	organization without charge		<u> </u>				
6	Total. Add lines 1 through 5		ļ		1		
7a	Amounts included on lines 1, 2, and 3		ļ				
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified				1		
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	•						
_	Add lines 7a and 7b						
8	Public support (Subtract line 7c from			-		ŀ	
Sooti	on B. Total Support			1	l		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-) 0010	(A) T-1-1
9	Amounts from line 6	(a) 2009	(0) 2010	(6) 2011	(d) 2012	(e) 2013	(f) Total
10a	Gross income from interest, dividends,						-
.04	payments received on securities loans, rents,			1			
	royalties and income from similar sources .			ļ	1		
ь	Unrelated business taxable income (less						·
_	section 511 taxes) from businesses			ŀ			
	acquired after June 30, 1975						
С	Add lines 10a and 10b		 				
11	Net income from unrelated business						
	activities not included in line 10b, whether		Ì	İ	į		
	or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets		1				
	(Explain in Part IV.)		!				
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for the	e organization	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her						▶ 🗆
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2013 (line 8	i, column (f) di	ivided by line 1	3, column (f))		15	%
16	Public support percentage from 2012 Sch			<u></u> .	<u></u> .	16	%
Secti	on D. Computation of Investment Inc						
17	Investment income percentage for 2013 (I	ine 10c, colun	nn (f) divided b	y line 13, colur	mn (f))	17	%
18	Investment income percentage from 2012					18	%
19a	331/3% support tests-2013. If the organi						
	17 is not more than 33½%, check this box a	and stop here.	. The organization	on qualifies as a	a publicly suppo	orted organizati	on . ▶ 📋
b	331/3% support tests—2012. If the organization						
	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did	d not check a	box on line 14,	, 19a, or 19b, c	check this box	and see instruc	ctions 🕨 🔲

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
	Part III, line 12. Also complete this part for any additional information. (See instructions).
NONE	

	·
•	······································
••	
•	
·	
•••	
************	,

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

Shafeek Nader Trust for the Community Interest, Inc	52-1515687
Organizations Maintaining Donor Advised Funds or Other Similar Fu	
Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	N/A
(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year	
Aggregate contributions to (during year)	
Aggregate grants from (during year)	
Aggregate value at end of year	
Did the organization inform all donors and donor advisors in writing that the assets I	neld in donor advised
funds are the organization's property, subject to the organization's exclusive legal contr	ol? 🗌 Yes 🗎 No
Did the organization inform all grantees, donors, and donor advisors in writing that grantees	int funds can be used
only for charitable purposes and not for the benefit of the donor or donor advisor, or	for any other purpose
conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
rt II Conservation Easements.	
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	N/A
	of an historically important land area
	of a certified historic structure
Preservation of open space	
	on in the form of a conservation
easement on the last day of the tax year.	Held at the End of the Tax Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in (a)	2c
Number of conservation easements included in (c) acquired after 8/17/06, and not	on a
historic structure listed in the National Register	· · 2d
Number of conservation easements modified, transferred, released, extinguished, or ter	minated by the organization during the
tax year ▶	
Number of states where property subject to conservation easement is located ▶	
violations, and enforcement of the conservation easements it holds?	· · 🗌 Yes 🗌 No
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	n easements during the year
)	
	ements during the vear
	J ,
> \$	- ,
Does each conservation easement reported on line 2(d) above satisfy the requirements	of section 170(h)(4)(B)
Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)?	of section 170(h)(4)(B)
Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)?	of section 170(h)(4)(B) Yes . No e and expense statement, and
Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)?	of section 170(h)(4)(B) Yes . No e and expense statement, and
Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's fir organization's accounting for conservation easements.	of section 170(h)(4)(B) Yes No e and expense statement, and nancial statements that describes the
Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's fir organization's accounting for conservation easements. III Organizations Maintaining Collections of Art, Historical Treasures, or	of section 170(h)(4)(B) Yes No e and expense statement, and nancial statements that describes the Other Similar Assets.
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Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's fir organization's accounting for conservation easements. III Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, expublic service, provide, in Part XIII, the text of the footnote to its financial statements that	of section 170(h)(4)(B) or and expense statement, and nancial statements that describes the rother Similar Assets. N/A s revenue statement and balance sheet ducation, or research in furtherance of at describes these items.
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	Complete if the organization answered "Yes" to Form 990, Part IV, line 6. Total number at end of year

	_	/F	000	2012
Schedule	υ	(FOIII)	330)	2013

Par	III Organizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Ot	her Similar As	sets (co.	ntinued)
3	Using the organization's acquisition,		ther record	ds, chec	k any of the	follow	ing that are a s	gnıfıcant	use of its
	collection items (check all that apply):							N/A	
٠a	☐ Public exhibition		d [Loan	or exchange	e progr	ams	1-7	
b	☐ Scholarly research		е [Other	•				
С	☐ Preservation for future generations	S			•••••			••••••	
4	Provide a description of the organiza	tion's collections a	and explai	in how th	hey further t	he org	anization's exen	npt purpo	se in Part
	XIII.								
5	During the year, did the organization	solicit or receive	donations	of art,	historical tre	easures	s, or other simila	r	
	assets to be sold to raise funds rather	r than to be mainta	ained as pa	art of the	e organizatio	n's co	llection?	☐ Ye	s 🗌 No
Par	IV Escrow and Custodial Arra	angements.							
	Complete if the organization	answered "Yes"	" to Form	1 990, P	art IV, line	9, or r	eported an am	ount on	Form
	990, Part X, line 21.							N/A	
1a	990, Part X, line 21. Is the organization an agent, trustee	, custodian or oth	er intermi	ediary fo	r contribution	ons or	other assets no	t	
	included on Form 990, Part X?				· · ·				s 🗌 No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the foll	lowing ta	able:				_
							Ar	nount	
C	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount	nt on Form 990, Pa	art X, line	21? .				☐ Ye	s 🗌 No
b	If "Yes," explain the arrangement in P	art XIII. Check here	e if the ex	planation	n has been p	provide	d in Part XIII .		
Par	t V Endowment Funds.								
	Complete if the organization	answered "Yes"	" to Form	1990, P	art IV, line	10.			
		(a) Current year	(b) Prioi	r year	(c) Two years	back	(d) Three years back	(e) Four	ears back
1a	Beginning of year balance	77,000		77,000		7,000	77,000		77,000
b	Contributions	0		0		0	()	0
C	Net investment earnings, gains, and								
	losses	6,545		6,545		6,545	6,545	<u>;</u>	6,548
đ	Grants or scholarships	5,000		6,000		5,000	5,000		5,000
е	Other expenditures for facilities and							Ì	,
	programs	1,545		545		1,545	1,545	;	1,548
f	Administrative expenses .	0		0		0	,	1	0
g	End of year balance	77,000		77,000	7	7,000	77,000		77,000
2	Provide the estimated percentage of t	he current year en	d balance		, column (a))	held a	is.	•	
а	Board designated or quasi-endowmer	nt 🕨	%						
b	Permanent endowment ▶	100%							
C	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2	c should equal 10	0%.						
За	Are there endowment funds not in the	e possession of th	ne organiza	ation tha	it are held a	nd adr	ministered for the	9	
	organization by:							. [`	es No
	(i) unrelated organizations							3a(i)	1
	(ii) related organizations							3a(ii)	1
b	If "Yes" to 3a(II), are the related organi	izations listed as re	equired or	Schedu	ule R?			3b	N/A
4	Describe in Part XIII the intended uses	s of the organization	n's endov	vment fu	ınds.				
Par	VI Land, Buildings, and Equip	ment.				_			
	Complete if the organization	answered "Yes'	" to Form	990, P	art IV, line	11a. S	ee Form 990, I	art X, Iır	ne 10.
	Description of property	(a) Cost or oti	her basis	(b) Cost or	r other basis	(c) A	ccumulated	(d) Book	value
		(investme	ent)	(ot	her)	dej	preciation		
1a	Land			•					
b	Buildings								
C	Leasehold improvements								
đ	Equipment		1		9,315		9,259		56
e	Other								
Total.	Add lines 1a through 1e (Column (d) n	nust equal Form 99	90, Part X.	column	(B), line 10(c))	•		56

Part VII	Investments—Other Securitie Complete if the organization an		m 990. Part IV. lin	e 11b. See Form	N/A- 990 Part X line 12
	(a) Description of security or catego (including name of security)		(b) Book value	(c) Me	thod of valuation I-of-year market value
(1) Financial	derivatives				
(2) Closely-h	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Column (i	b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments — Program Relate Complete if the organization an		m 990, Part IV, line		/A 990. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Me	thod of valuation I-of-year market value
(1)					
(2)					
(3)	 				
(4)	· · · - · · · · · · · · · · · · · · · ·	 			
_(5)					
_(6)					
_(7)					
_(8)	····				
(9)	1) / (5 000 B) / (8) 40 b				-
	b) must equal Form 990, Part X, col (B) line 13) ▶	• 	<u></u>	<u> </u>	
Part IX	Other Assets.	1 40 4 19 4 15	000 D + 114 II	444.0 =	NA
	Complete if the organization an		m 990, Part IV, line	e 11d. See Form	
		(a) Description	·· ·· · · · · · · · · · · · · · · · ·		(b) Book value
(1)					
(2)					
_(3)					
_(4)		 			
_(5)					
_(6)					
_(7)					
(8)					<u> </u>
(9)					
	mn (b) must equal Form 990, Part X,	col (B) line 15.)		▶	
Part X	Other Liabilities. Complete if the organization and	swered "Yes" to For	m 990, Part IV, line	۸ e 11e or 11f. See	I/A- Form 990, Part X,
	line 25.				•
1.	(a) Description of liability	(b) Book value			······································
(1) Federal in	come taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)		 			
(8)					
(9)			$\overline{}$		
	o) must equal Form 990, Part X, col (B) line 25)				
	uncertain tax positions in Part XIII, pro		ote to the organization	n'e financial etateme	ints that reports the
	s liability for uncertain tax positions unde				

Schedu	le D (Form 990) 2013		Page
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	r Return.	N/A
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities	~	
Ç	Recoveries of prior year grants	7 1	
d	Other (Describe in Part XIII.) 2d	7 (
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	7	
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	er Return	•
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	 -	
a	Donated services and use of facilities	1 1	
b	Prior year adjustments	-	
C	Other losses	┥ ┃	
d	Other (Describe in Part XIII.)	-	
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3 -	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1 1	
b	Other (Describe in Part XIII.)	-	
C	Add been de and de	- 4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	XIII Supplemental Information.	1 3 1	
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2 XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional		
art V	line 4- Endowment Funds use - The Joe A Callaway Endowment Fund was established with a contributi	on from Joe	A Callaway
The fur	nd is a permanent endowment with the investment income earned annually to be awarded to individuals ii	n anv area of	endeavor who.
		2.5	
vith in	tegrity and at some personal risk, take a public stance to advance truth and justice, individuals who chall	enged preva	ling conditions
n purs	uit of the common good		
			

Schedule D (Fo	orm 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	
NONE		
		·
••••••		
•		
	······································	
	······································	
••••		

SCHEDULE (Form 990)

Department of the Treasury internal Revenue Service Name of the organization

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

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

OMB No 1545-0047	2013	Open to Public Inspection
	·	

► Attach to Form 990

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

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, ° □ (h) Purpose of grant or assistance Employer identification number community lawyer □ Yes 52-1515687 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. n/a (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. book P/u Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash 30,000 grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the instructions for Form 990. General Information on Grants and Assistance 501(c)(3) The Shafeek Nader Trust for the Community Interest, Inc. 36-3920270 (p) EIN (9) 1 (a) Name and address of organization (3) (1) Citizen Advocacy Center 182 N York Road/Elmhurst, IL or government (2) Part I Part II **₹** N 8 8 6 5 <u>2</u> 3

Schedule I (Form 990) (2013)

Cat No 50055P

1

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. Part III

rari III can de duplicated il additional space is needed	al space is needed				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Freedom of Information Prize to students	3	225		n/a book	rva
2 Awards for Civic Courage	2	2,000		n/a book	ก/ล
8					
4					
5					
9					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information r	equired in Part I, Im	e 2, Part III, columr	ι (b), and any other addit	tional information.
NONE					
					Schedule I (Form 990) (2013)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

The Shafeek Nader Trust for the Community Interest, Inc	52-1515687
Part XI, Line 5 Other changes in net assets. Adjustment reflects change in market value on investment	nts held at 12/31/13.
Part VI - Section B - Policies, Line 11a The form 990 is mailed to the governing body for review and co	omment, prior to filing
Part VI - Section C - Line 19 The governing documents and financial statements are available to the g	eneral public, upon written request.
Part IX - Statement of Functional Expense, Line 11g Fees for service Other	
Community Lawyer \$93,958	
Speakers Fee 1,000	
Internship fees 7,085	
Total \$102,043	
Part I - Summary Briefly describe the organization's mission or most significant activities (continued):	
an annual award recognizes individuals who courageously pursue justice for the common good, a lection	ure series on urgent public issues
stimulates collective discourse, educational workshops, films and lectures are held to advance a more	resourceful and self-reliant
civic life, with a particular focus on locally-based economies, health care, farmers' markets, community	gardens, and all such activity directed
to meeting basic human needs	
······	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization The Shafeek Nader Trust for the Community Interest, Inc.

Part I

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.

2013

OMB No 1545-0047

Open to Public Inspection

Employer identification number

52-1515687

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

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

(9) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2013 (f)
Direct controlling
entity ž 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. Yes (f)
Direct controlling
entity (e) End-of-year assets 9 509(a)(3) Public charity status (if section 501(c)(3)) (d) Total income (d) Exempt Code section 170(b)(1)(A)(vi) (c) Legal domicile (state or foreign country) Cat No 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity 20 (b) Primary activity educational For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization (1) The Shafeek Nader Trust Supporting Fund (1) Not Applicable O Box 53305 / Washington, DC 20009 Part II **£** <u>N</u> ල 3 9 Ø <u>(0</u> € ପ 9

Schedule R (Form 990) 2013

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

Note. Complete line 1 if any entity is listed in Parts II III or IV of this schedule				Yps	SN SN
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?	or more related orgar	nzations listed in Par	ts II–IV?		
				1a	>
_				9	>
Gift, grant, or capital contribution from related orgar			•	۲ ۲	
d Loans or loan guarantees to or for related organization(s)				19	>
e Loans or loan guarantees by related organization(s)				1e	>
f Duidonds from related executation(s)				;	_
				=	>
				1g	>
h Purchase of assets from related organization(s)				1h	>
i Exchange of assets with related organization(s)				=	>
j Lease of facilities, equipment, or other assets to related organization(s)				=	\
k Lease of facilities, equipment, or other assets from related organization(s)	•				<u>`</u>
l Performance of services or membership or fundraising solicitations for related organization(s)				=	<u> </u>
m Performance of services or membership or fundraising solicitations by related organization(s)				Ę	>
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).				5	>
o Sharing of paid employees with related organization(s)				10	>
p Heimbursement paid to related organization(s) for expenses				1p	>
q Reimbursement paid by related organization(s) for expenses				19	\
r Other transfer of cash or property to related organization(s)				<u>-</u>	`
s Other transfer of cash or property from related organization(s)				18	<u> </u>
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	implete this line, incli	uding covered relatio	inships and transactic	on thresh	olds.
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determination and transfer	טו למווסשב ר	payon
	type (a-s)				3
(1) The Shafeek Nader Trust Supporting Fund	3	200'00	200,000 operating budget		
(2)					
(3)					
(4)					
(5)					
(9)					
			Schedule R (Form 990) 2013	(Form 99	90) 2013

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

10	ê	(0)	9	(9)	(a) (b) (c) (d) (a) (b)	3	8	0	3	3
Name, address, and EIN of entity	ctivity	nicile preign y)	Predominant income (related, unrelated, excluded from tax under	Are all partners section 501(c)(3)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	te Code V – UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Percentage ownership
			$\overline{}$	Yes No	,		Yes No	 _	Yes No	
(1)										
(2)										
(6)										
(4)										
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(15)										
(16)										

ichedule H (Form 990) 2013	Page 5
Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions).	
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