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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

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2013

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2000 M STREET NO 505

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20036

D Employer identification number
53-0132493

E Telephone number
(202)677-4314

G Gross receipts $ 20,444,368

F Name and address of principal officer
SUSAN C KEATING
2000 M STREET NO 505
WASHINGTON,DC 20036

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW NFCC ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1970

M State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE NFCC PROMOTES THE NATIONAL AGENDA FOR FINANCIALLY RESPONSIBLE BEHAVIOR AND BUILDS CAPACITY FOR ITS MEMBERS TO DELIVER THE HIGHEST QUALITY FINANCIAL EDUCATION AND COUNSELING SERVICES

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

Activities & Governance

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	15
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	**5**	21
6	Total number of volunteers (estimate if necessary)	**6**	100
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue **8**	Contributions and grants (Part VIII, line 1h)	7,810,491	16,464,984
9	Program service revenue (Part VIII, line 2g)	3,864,143	3,961,918
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	949	-132,182
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	14,932	17,246
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,690,515	20,311,966
Expenses **13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,923,092	6,832,007
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,913,407	2,070,949
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶130,887		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,819,079	3,983,501
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	11,655,578	12,886,457
19	Revenue less expenses Subtract line 18 from line 12	34,937	7,425,509

		Beginning of Current Year	End of Year
Net Assets or Fund Balances **20**	Total assets (Part X, line 16)	6,390,232	13,861,619
21	Total liabilities (Part X, line 26)	4,736,521	4,782,399
22	Net assets or fund balances Subtract line 21 from line 20	1,653,711	9,079,220

Part II Signature Block

Under penalties of perjury, 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

Sign Here

****** | 2014-10-08
Signature of officer | Date

SUSAN C KEATING CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
ELIZABETH W HELLER				P00397829

Firm's name ▶ TATE & TRYON | Firm's EIN ▶ 52-1855942

Firm's address ▶ 2021 L STREET NW STE 400
WASHINGTON, DC 20036 | Phone no (202) 293-2200

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission

TO PROMOTE THE NATIONAL AGENDA FOR FINANCIALLY RESPONSIBLE BEHAVIOR AND BUILD CAPACITY FOR ITS MEMBERS TO DELIVER THE HIGHEST QUALITY FINANCIAL EDUCATION AND COUNSELING SERVICES (PLEASE NOTE THAT THIS STATEMENT IS CONTINUED ON SCHEDULE O)THE NFCC IS THE NATION'S LARGEST AND LONGEST SERVING NATIONAL NONPROFIT CREDIT COUNSELING NETWORK, WITH NEARLY 90 MEMBER AGENCIES AND OVER 700 OFFICES IN COMMUNITIES THROUGHOUT THE COUNTRY EACH YEAR, NFCC MEMBERS ASSIST MILLIONS OF CONSUMERS, HELPING MANY TO DRIVE DOWN THEIR DEBT AND TAKE CONTROL OF THEIR FINANCES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 5,356,682 including grants of $ 4,278,760) (Revenue $)

HOUSING PROVIDES FEDERAL GRANT FUNDING TO MEMBER AGENCIES TO PROVIDE INDIVIDUAL AND GROUP EDUCATIONAL SESSIONS ON A WIDE VARIETY OF HOUSING ISSUES TO CONSUMERS NEEDING ASSISTANCE SEEKING, FINANCING, MAINTAINING, RENTING, OR OWNING A HOME

4b (Code) (Expenses $ 4,287,606 including grants of $ 2,553,247) (Revenue $ 1,132,345)

EDUCATIONAL SERVICES PROVIDES EDUCATION TO CONSUMERS IN THE AREAS OF PRE-FILING BANKRUPTCY COUNSELING AND PRE-DISCHARGE EDUCATION PROVIDES CERTIFICATION TRAINING TO MEMBER AGENCY STAFF ON A VARIETY OF FINANCIAL, BUDGET, HOUSING, BANKRUPTCY, AND CONSUMER PROTECTION ISSUES DURING 2013, THE FOUNDATION LAUNCHED THE "SHARPEN YOUR FINANCIAL FOCUS" INITIATIVE IN ORDER TO ASSIST CONSUMERS WITH IDENTIFYING AND SOLVING THEIR MOST PRESSING FINANCIAL ISSUES EXPENSES RELATED TO THIS INITIATIVE ARE INCLUDED WITHIN THIS PROGRAM AREA

4c (Code) (Expenses $ 365,717 including grants of $) (Revenue $ 1,524,720)

MEMBER SERVICES PROVIDES MEMBER COMMUNICATIONS INCLUDING VISITS TO MEMBER AGENCIES, MEMBER MEETINGS AND CONFERENCES, PUBLICATIONS OF NEWSLETTERS, AND MAINTENANCE OF IMPORTANT MEMBER INFORMATION THROUGH THE MEMBERS-ONLY SECTION OF THE FOUNDATION'S WEBSITE

(Code) (Expenses $ 345,973 including grants of $) (Revenue $ 302,287)

ANNUAL CONFERENCE PROVIDES MEMBERS, KEY PARTNERS AND STAKEHOLDERS WITH INFORMATION ON OPPORTUNITIES AND CHALLENGES BOTH WITHIN THE CREDIT COUNSELING AND FINANCIAL EDUCATION SECTORS PROVIDES CONTINUING EDUCATION OPPORTUNITIES, A FORUM TO HONOR OUTSTANDING ACHIEVEMENTS, DISCUSS THE FOUNDATION'S STRATEGIC DIRECTION, AND VOICE OPINIONS AND VOTE ON THE GENERAL OPERATIONS AND LEADERSHIP OF THE FOUNDATION

(Code) (Expenses $ 235,376 including grants of $) (Revenue $ 907,786)

NATIONAL LOCATOR SERVICES PROVIDES INFORMATION AND MEMBER AGENCY LOCATION ASSISTANCE TO CONSUMERS BOTH ONLINE THROUGH THE ONLINE COUNSELING APPLICATION AND TELEPHONICALLY THROUGH THE TOLL-FREE NATIONAL LOCATOR LINE

(Code) (Expenses $ 359,984 including grants of $) (Revenue $)

PUBLIC AWARENESS PROVIDES FINANCIAL, CREDIT, HOUSING, AND BANKRUPTCY INFORMATION TO THE GENERAL PUBLIC PROMOTES AWARENESS OF THE FOUNDATION'S MISSION AND SERVICES THROUGH THE WEBSITE, PUBLIC SERVICE ANNOUNCEMENTS, AND OTHER ACTIVITIES INCLUDING PRESS RELEASES TO THE MEDIA

(Code) (Expenses $ 209,511 including grants of $) (Revenue $)

CREDITOR RELATIONS DEVELOP AND MAINTAIN RELATIONSHIPS WITH CREDIT GRANTING ORGANIZATIONS TO ENSURE CONTINUED SUPPORT OF CLIENTS AND MEMBER AGENCIES

(Code) (Expenses $ 52,244 including grants of $) (Revenue $)

STRATEGIC DEVELOP OVERALL ORGANIZATIONAL DIRECTION TO ADDRESS THE CHANGING NEEDS OF THE FOUNDATION'S MEMBERS AND THE PUBLIC

(Code) (Expenses $ 39,300 including grants of $) (Revenue $)

MILITARY ONESOURCE PROVIDE COUNSELING ASSISTANCE TO MEMBERS OF THE MILITARY THROUGH THE FOUNDATION'S MEMBER AGENCIES

(Code) (Expenses $ 33,967 including grants of $) (Revenue $ 94,780)

PUBLICATIONS PROVIDES INFORMATIONAL AND EDUCATIONAL MATERIALS TO ASSIST MEMBER AGENCIES IN EDUCATION AND COUNSELING

(Code) (Expenses $ 22,725 including grants of $) (Revenue $)

LEGISLATIVE AFFAIRS ACTIVITIES DEFINED BY SECTION 501 (H)

4d Other program services (Describe in Schedule O)

(Expenses $ 1,299,080 including grants of $) (Revenue $ 1,304,853)

4e **Total program service expenses** ▶ 11,309,085

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	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? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		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? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part 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? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) 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)			
a	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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
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**		No
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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	7		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Yes	
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	21		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	3a			No
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)?	4a			No
b	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				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
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			No
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			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
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 organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	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			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
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	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	13a			
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	14b			

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.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a**	15		
	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	**1b**	15		
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**			No
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**		Yes	
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				
a	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

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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

▶ NATIONAL FOUNDATION FOR CREDIT COUNSELING INC 2000 M STREET NO 505
WASHINGTON, DC 20036 (202) 677-4300

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CATHERINE A ALLEN CHAIR	1 00	X		X				0	0	0
(2) DAWN LOCKHART VICE CHAIR	1 00	X		X				0	0	0
(3) KEVIN A RHEIN TREASURER	1 00	X		X				0	0	0
(4) NELSON A DIAZ ESQ SECRETARY	1 00	X		X				0	0	0
(5) MICHAEL ROBARDS TRUSTEE	1 00	X						0	0	0
(6) RICHARD S LEVICK ESQ TRUSTEE	1 00	X						0	0	0
(7) CHRISTOPHER HONENBERGER TRUSTEE	1 00	X						0	0	0
(8) TOM JACOBSON TRUSTEE	1 00	X						0	0	0
(9) JAMES P KROENING TRUSTEE	1 00	X						0	0	0
(10) DONALD LEU TRUSTEE	1 00	X						0	0	0
(11) DR BRADY J DEATON TRUSTEE	1 00	X						0	0	0
(12) ROBERT L CLARKE TRUSTEE	1 00	X						0	0	0
(13) JEAN CHATZKY TRUSTEE	1 00	X						0	0	0
(14) DR CHARLES P BLAHOUS III TRUSTEE	1 00	X						0	0	0
(15) SUSAN C KEATING PRESIDENT & CEO	50 00			X				376,528	0	39,065
(16) DEBRA ADLIS CHIEF FINANCIAL OFFICER	50 00			X				143,363	0	29,589
(17) JESSICA WHIAT VP CREDITOR RELATIONS	50 00					X		118,732	0	10,192

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) GAIL CUNNINGHAM VP COMMUNICATIONS	50 00					X		105,257	0	6,464
(19) MICHELE O'DONNELL CONTROLLER	50 00					X		123,041	0	4,304
(20) HELENE RAYNAUD CHIEF OPERATING OFFICER	50 00					X		136,036	0	22,298
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,002,957	0	111,912

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 6

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**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**	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) Name and business address	(B) Description of services	(C) Compensation
ARENT FOX LLP 1050 CONNECTICUT AVENUE NW WASHINGTON DC 20036	LEGAL SERVICES	238,265

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 ▶ 1

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e	5,719,490			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,745,494			
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . . ▶		16,464,984			
Program Service Revenue			Business Code				
	2a	MEMBERSHIP DUES	900099	1,524,720	1,524,720		
	b	NATIONAL LOCATOR LINE	900099	817,744	817,744		
	c	CONTRACTED SERVICE FEES	900099	617,780	617,780		
	d	CERTIFICATION FEES	900099	287,830	287,830		
	e	ONLINE EDUCATION	900099	226,789	226,789		
	f	All other program service revenue		487,055	487,055		
	g	**Total.** Add lines 2a–2f . . . . . ▶		3,961,918			
	3	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		220			220
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . . ▶					
			(i) Real	(ii) Personal			
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . . ▶					
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses		132,402			
	c	Gain or (loss)		-132,402			
	d	Net gain or (loss) . . . . . ▶		-132,402			-132,402
Other Revenue	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a	MISCELLANEOUS	900099	17,246			17,246
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . ▶		17,246			
	12	**Total revenue.** See Instructions . . . . . ▶		20,311,966	3,961,918	0	-114,936

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	6,832,007	6,832,007		
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	596,401	426,836	109,346	60,219
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	1,244,895	989,244	232,936	22,715
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	33,595	25,412	7,043	1,140
9 Other employee benefits	79,196	66,711	6,458	6,027
10 Payroll taxes	116,862	88,546	21,350	6,966
11 Fees for services (non-employees)				
a Management				
b Legal	259,867	105,151	150,744	3,972
c Accounting	46,616	19,293	27,323	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	578,390	443,463	126,922	8,005
12 Advertising and promotion				
13 Office expenses	164,188	141,902	21,715	571
14 Information technology				
15 Royalties . .				
16 Occupancy	292,062		292,062	
17 Travel	98,281	91,362	4,856	2,063
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	151,123	151,123		
20 Interest	54		54	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	239,037	132,728	95,084	11,225
23 Insurance	63,574		63,574	
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)				
a MARKETING / PUBLIC RELA	1,221,543	1,221,543		
b ONLINE EDUCATION	211,922	211,922		
c TEMPORARY HELP	169,499	49,903	119,596	
d EQUIPMENT RENTAL & MAIN	144,164	13,220	130,621	323
e All other expenses	343,181	298,719	36,801	7,661
25 **Total functional expenses.** Add lines 1 through 24e	12,886,457	11,309,085	1,446,485	130,887
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			1	
	2	Savings and temporary cash investments		1,680,091	2	7,633,739
	3	Pledges and grants receivable, net		2,982,017	3	4,746,597
	4	Accounts receivable, net		229,023	4	192,896
	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	
	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	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		109,158	8	112,064
	9	Prepaid expenses and deferred charges		719,083	9	86,594
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,571,407			
	b	Less accumulated depreciation	10b 1,634,475	536,077	10c	936,932
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		134,783	15	152,797
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		6,390,232	16	13,861,619
Liabilities	17	Accounts payable and accrued expenses		438,584	17	394,158
	18	Grants payable		3,671,071	18	3,810,859
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	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		626,866	25	577,382
	26	**Total liabilities.** Add lines 17 through 25		4,736,521	26	4,782,399
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,343,700	27	1,180,700
	28	Temporarily restricted net assets		310,011	28	7,898,520
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,653,711	33	9,079,220
	34	Total liabilities and net assets/fund balances		6,390,232	34	13,861,619

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,311,966
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,886,457
3	Revenue less expenses Subtract line 2 from line 1	3	7,425,509
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,653,711
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,079,220

Part 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 _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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 reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

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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*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Employer identification number
53-0132493

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? **11g(i)**		
(ii) A family member of a person described in (i) above? **11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions))**	**(iv)** Is the organization in col **(i)** listed in your governing document?		**(v)** Did you notify the organization in col **(i)** of your support?		**(vi)** Is the organization in col **(i)** organized in the U S ?		**(vii)** Amount of monetary support
			Yes	**No**	**Yes**	**No**	**Yes**	**No**	
Total									

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.)

Section A. Public Support

Calendar 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts 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, etc (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2012 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar 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 ")	22,515,620	11,111,032	8,695,299	9,405,130	17,989,704	69,716,785
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	6,049,487	4,916,437	3,907,126	2,269,504	2,437,198	19,579,752
3 Gross receipts from activities 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 charge						
6 **Total.** Add lines 1 through 5	28,565,107	16,027,469	12,602,425	11,674,634	20,426,902	89,296,537
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	400,000	617,838	533,906	1,341,000	3,700,000	6,592,744
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	400,000	617,838	533,906	1,341,000	3,700,000	6,592,744
8 **Public support** (Subtract line 7c from line 6)						82,703,793

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	28,565,107	16,027,469	12,602,425	11,674,634	20,426,902	89,296,537
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,575	181	302	479	220	34,757
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	33,575	181	302	479	220	34,757
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)			107	14,932	17,246	32,285
13 **Total support.** (Add lines 9, 10c, 11, and 12)	28,598,682	16,027,650	12,602,834	11,690,045	20,444,368	89,363,579

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	92 550 %
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	95 370 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	0 040 %
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	0 110 %

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **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 ▶☐

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

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).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME	OTHER INCOME 2009 AMOUNT $0 2010 AMOUNT $0 2011 AMOUNT $107 2012 AMOUNT $14,932 2013 AMOUNT $17,246

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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*.

OMB No 1545-0047

2013

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

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

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

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

Name of the organization	Employer identification number
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC	53-0132493

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ _____

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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 Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	22,726	
c Total lobbying expenditures (add lines 1a and 1b)	22,726	
d Other exempt purpose expenditures	26,887,674	
e Total exempt purpose expenditures (add lines 1c and 1d)	26,910,400	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h Subtract line 1g from line 1a If zero or less, enter -0-	0	
i Subtract line 1f from line 1c If zero or less, enter -0-	0	

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	1,000,000	846,459	732,779	1,000,000	3,579,238
b Lobbying ceiling amount (150% of line 2a, column(e))					5,368,857
c Total lobbying expenditures	117,070	76,124	9,417	22,726	225,337
d Grassroots nontaxable amount	250,000	211,615	183,195	250,000	894,810
e Grassroots ceiling amount (150% of line 2d, column (e))					1,342,215
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation

Part IV Supplemental Information *(continued)*

Return Reference	Explanation

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Employer identification number
53-0132493

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
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 on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	(b) (c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		518,364	138,946	379,418
d Equipment		1,124,538	1,110,836	13,702
e Other		928,505	384,693	543,812
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				936,932

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED RENT	202,303
DEFERRED TI ALLOWANCE	375,079
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	577,382

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	34,335,909
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	13,891,541		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	13,891,541
3	Subtract line **2e** from line **1**			3	20,444,368
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	-132,402		
c	Add lines **4a** and **4b**			4c	-132,402
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	20,311,966

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	26,910,400
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	13,891,541		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	132,402		
e	Add lines **2a** through **2d**			2e	14,023,943
3	Subtract line **2e** from line **1**			3	12,886,457
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	12,886,457

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART X, LINE 2	THE FOUNDATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND THEREFORE, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS THE FOUNDATION'S TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS AFTER THEY ARE FILED
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS FROM DISPOSAL OF FIXED ASSETS -132,402
PART XII, LINE 2D - OTHER ADJUSTMENTS	LOSS FROM DISPOSAL OF FIXED ASSETS 132,402

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990**

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Employer identification number
53-0132493

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 71

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

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	(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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	FEDERAL GRANT COMPLIANCE OVERSIGHT IS MANAGED BY THE NATIONAL FOUNDATION FOR CREDIT COUNSELING'S COMPLIANCE AND RISK MANAGEMENT DEPARTMENT WITH OVERSIGHT BY THE NFCC'S CFO AND CEO THE GRANT COMPLIANCE PROCESS IS DESIGNED TO ENSURE FISCAL AND PROGRAMMATIC ACCOUNTABILITY OF FEDERAL FUNDS AWARDED TO THE NFCC AND AS AN INTERMEDIARY TO ITS SUB GRANTEES

Additional Data

Software ID:
Software Version:
EIN: 53-0132493
Name: NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CCCS OF ALABAMA INC 640 S LAWRENCE ST MONTGOMERY MONTGOMERY,AL 36104	51-0235743	501 (C)(3)	5,293				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF MOBILE-FAMILY COUNSELING CENTER OF MOBILE INC 705 OAK CIRCLE DRIVE EAST MOBILE,AL 36609	63-0388685	501 (C)(3)	55,465				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF CENTRAL ALABAMA (DIVISION GATEWAY) 1401 20TH ST S STE 100 BIRMINGHAM BIRMINGHAM,AL 352054913	63-0288854	501 (C)(3)	20,318				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
FAMILY SERVICE AGENCY CCCS 628 W BROADWAY STE 300 NORTH LITTLE ROCK,AR 72114	71-0237511	501 (C)(3)	23,529				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CREDIT COUNSELING OF ARKANSAS 1111 ZION RD FAYETTEVILLE,AR 72703	71-0772094	501 (C)(3)	43,742				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS KERN AND TULANE COUNTY 2001 F ST BAKERSFIELD,CA 93301	95-2460971	501 (C)(3)	117,799				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
SPRINGBOARD 4351 LATHAM ST RIVERSIDE,CA 92501	33-0656671	501 (C)(3)	129,014				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF SAN FRANCISCO 595 MARKET ST 15TH FLR SAN FRANCISCO,CA 94105	94-1688163	501 (C)(3)	217,845				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF ORANGE COUNTY 1920 OLD TUSTIN AVE SANTA ANA,CA 92705	95-2426981	501 (C)(3)	145,261				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS NORTH COAST 1309 11TH ST STE 104 ARCATA,CA 99521	68-0048766	501 (C)(3)	15,133				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CCCS OF WEST FLORIDA PO BOX 950 PENSACOLA,FL 32591	52-1242143	501 (C)(3)	46,282				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF JACKSONVILLE 1639 ATLANTIC BLVD JACKSONVILLE,FL 32207	59-0768265	501 (C)(3)	72,180				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CONSUMER DEBT COUNSELORS INC 831 W MORSE RD WINTER PARK,FL 32789	59-3458266	501 (C)(3)	46,755				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
INCHARGE DEBT SOLUTIONS 5750 MAJOR BLVD STE 300 ORLANDO,FL 32819	33-0770440	501 (C)(3)	459,843				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF MIDDLE GEORGIA 901 WASHINGTON AVE MACON,GA 31201	58-1105840	501 (C)(3)	46,439				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF SAVANNAH AREA 7505 WATERS AVE PARK S SUITE C-11 SAVANNAH,GA 31406	58-0958705	501 (C)(3)	43,675				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF GREATER ATLANTA 270 PEACHTREE ST STE 1800 ATLANTA,GA 303037662	58-0942924	501 (C)(3)	208,216				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF EAST ALABAMAWEST GEORGIA PO BOX 1825 COLUMBUS,GA 31902	58-0828094	501 (C)(3)	16,679				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NORTHERN IDAHO INC 1113 MAIN ST LEWISTON,ID 83501	82-0370044	501 (C)(3)	10,548				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CHESTNUT CREDIT COUNSELING SERVICES 1003 MARTIN LUTHER KING DR BLOOMINGTON,IL 61701	42-1692441	501 (C)(3)	6,400				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CCCS OF MCHENRY COUNTY INC 400 RUSSEL CT STE A WOODSTOCK,IL 60098	36-3185383	501 (C)(3)	35,414				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NORTHEASTERN INDIANA 4105 W JEFFERSON BLVD FORT WAYNE,IN 46804	52-1284819	501 (C)(3)	14,496				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NORTHWEST INDIANA 800 E 86TH AVE MERRILLVILLE,IN 46410	35-1337079	501 (C)(3)	10,949				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
HORIZON CCCS 819 5TH ST SE CEDAR RAPIDS,IA 52401	42-0837621	501 (C)(3)	8,564				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NORTHEASTERN IOWA 1003 W FOURTH ST WATERLOO,IA 50702	42-1236403	501 (C)(3)	52,167				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS INC 1201 W WALNUT SALINA,KS 67402	48-0995970	501 (C)(3)	14,052				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF TOPEKA (HCCI) SUITE 101 1195 SW BUCHANAN TOPEKA,KS 66604	48-0822466	501 (C)(3)	79,574				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF MARYLAND AND DELAWARE 757 FREDERICK RD 2ND FLOOR BALTIMORE,MD 21228	52-0846275	501 (C)(3)	221,248				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
GREENPATH INCDBA GREENPATH DEBT SOLUTIONS 36500 CORPORATE DRIVE FARMINGTON HILLS,MI 48331	38-6142925	501 (C)(3)	509,031				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF DULUTH (LUTHERAN SOCIAL SERVICE OF MN) 424 W SUPERIOR ST STE 600 DULUTH,MN 55802	41-0872993	501 (C)(3)	57,875				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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FAMILYMEANS CONSUMER CREDIT COUNSELING SERVICE 1875 NORTHWESTERN AVE S STILLWATER,MN 55082	41-6045574	501 (C)(3)	12,875				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF SPRINGFIELD 1515 S GLENSTONE SPRINGFIELD,MO 65804	43-1483251	501 (C)(3)	27,756				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF MONTANA 2022 CENTRAL AVE GREAT FALLS,MT 59403	81-0303443	501 (C)(3)	84,626				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NEBRASKA 809 N 96TH ST STE 100 OMAHA,NE 681142498	47-0574245	501 (C)(3)	53,487				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF SOUTHERN NEVADA & UTAH 2630 JONES BLVD LAS VEGAS,NV 89146	88-0121775	501 (C)(3)	163,838				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NEW JERSEY 185 RIDGEDALE AVE CEDAR KNOLLS,NJ 07927	22-2222343	501 (C)(3)	26,661				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF CENTRAL NEW JERSEY 1931 NOTTINGHAM WAY HAMILTON,NJ 08619	22-3237254	501 (C)(3)	46,350				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
NOVADEBT A GARDEN STATE CONSUMER CREDIT COUNSELING 225 WILLOWBROOK RD FREEHOLD,NJ 07728	22-3120920	501 (C)(3)	396,358				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF BUFFALO SUITE 300 40 GARDENVILLE PKWY WEST SENECA,NY 14224	16-0909583	501 (C)(3)	39,535				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS - ROCHESTER 1000 UNIVERSITY AVE STE 900 ROCHESTER,NY 14607	16-0972260	501 (C)(3)	50,889				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CCCS OF WESTERN NORTH CAROLINA INC 50 S FRENCH BROAD AVE STE 227 ASHEVILLE,NC 288013217	59-1056077	501 (C)(3)	14,900				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF FAYETTEVILLE PO BOX 2009 FAYETTEVILLE,NC 28302	56-0845795	501 (C)(3)	12,200				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF GASTON COUNTY (A DIVISION OF FAMILY SERVICE INC) 214 E FRANKLIN BLVD GASTONIA,NC 28052	56-6068395	501 (C)(3)	51,805				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF GREATER GREENSBORO A DIVISION OF FAMILY SERVICE OF THE PIEDMONT I 315 E WASHINGTON STREET GREENSBORO,NC 27401	56-2061741	501 (C)(3)	107,345				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS CATAWBA VALLEY 17 US HIGHWAY 70 SE HICKORY,NC 28602	56-6020417	501 (C)(3)	29,613				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS - TRIANGLE FAMILY SERVICES 700 BLUE RIDGE RD STE 101 RALEIGH,NC 27606	56-0547491	501 (C)(3)	36,127				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF FORSYTH 8064 N POINT BLVD STE 204 WINSTON SALEM,NC 27106	56-1015074	501 (C)(3)	39,495				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF THE VILLAGE FAMILY SERVICE CENTER 1201-25TH S SOUTH FARGO,ND 58103	45-0226423	501 (C)(3)	106,475				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF CENTRAL OHIO INC 4500 E BROAD ST COLUMBUS,OH 43213	31-0731111	501 (C)(3)	347,972				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF THE MIAMI VALLEY (SPONSORED BY LUTHERAN SOCIAL SERVICES) SUITE 300 3131 S DIXIE DRIVE DAYTON,OH 454392284	31-1325015	501 (C)(3)	40,897				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CCCS OF CENTRAL OKLAHOMA 3230 N ROCKWELL BETHANY,OK 73008	73-0766646	501 (C)(3)	21,432				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF OKLAHOMA INC 4646 S HARVARD TULSA,OK 74159	23-7138701	501 (C)(3)	28,742				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF SOUTHERN OREGON INC SUITE 202 820 CRATER LAKE AVENUE MEDFORD,OR 97504	93-0585893	501 (C)(3)	16,048				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF DELAWARE VALLEY 1608 WALNUT ST 10TH FL PHILADELPHIA,PA 19103	23-1671903	501 (C)(3)	491,608				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
ADVANTAGE CCCS SUITE 400 2403 SIDNEY STREET RIVER PARK COMMONS PITTSBURGH,PA 15203	25-1201741	501 (C)(3)	33,229				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NORTHEASTERN PENNSYLVANIA INC 401 LAUREL ST PITTSTON,PA 18640	23-2072807	501 (C)(3)	42,679				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
FAMILY SERVICES CCCS 4925 LACROSS RD STE 215 NORTH CHARLESTON,SC 29406	57-0324920	501 (C)(3)	45,274				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CONSUMER CREDIT COUNSELING SERVICE OF LUTHERAN SOCIAL SERVICES OF SOUTH DAK 705 E 41ST ST STE 100 SIOUX FALLS,SD 57105	46-0224731	501 (C)(3)	25,615				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
PARTNERSHIP FAMILIES CHILDREN 2245 A OLAN MILLS DR CHATTANOOGA,TN 37421	62-0911679	501 (C)(3)	42,826				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF GREATER DALLAS SUITE 200 8737 KING GEORGE DR DALLAS,TX 75235	75-1437638	501 (C)(3)	152,287				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CCCS OF GREATER SAN ANTONIO SUITE 100 6851 CITIZENS PKWY SAN ANTONIO,TX 78229	74-1882935	501 (C)(3)	41,074				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF HAMPTON ROADS A PROGRAM OF CENTER FOR CHILD & FAMILY SERVICE INC SUITE 400 2021 CUNNINGHAM DR HAMPTON,VA 23666	54-0505893	501 (C)(3)	8,936				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CLEARPOINT FINANCIAL 8000 FRANKLIN FARMS DRIVE RICHMOND,VA 23229	54-1125309	501 (C)(3)	71,316				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
AMERICAN FINANCIAL SOLUTIONS 2815 2ND AVE STE 280 SEATTLE,WA 98121	91-1163554	501 (C)(3)	68,381				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS - HUNTINGTON 1102 MEMORIAL BLVD HUNTINGTON,WV 25701	23-7374240	501 (C)(3)	8,250				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF THE MID-OHIO VALLEY 2715 MURDOCH AVE B-4 BEECHWOOD PLAZA PARKERSBURG,WV 26101	23-7124716	501 (C)(3)	12,942				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF NORTH CENTRAL WEST VIRGINIA (CRISS-CROSS INC) 209 W PIKE ST STE B CLARKSBURG,WV 26301	55-0567161	501 (C)(3)	8,646				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS SHEBOYGAN 1930 N 8TH ST STE 100 SHEYBOYGAN,WI 53081	39-1945061	501 (C)(3)	117,388				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS NORTHEASTERN WISCONSIN 1800 APPLETON ROAD MENASHA,WI 54952	39-1496649	501 (C)(3)	36,273				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT
CCCS OF PUERTO RICO 1607 PONCE DELEON COBIANS PLAZA SUITE GM09 SAN JUAN,PR 00909	66-0471798	501 (C)(3)	394,622				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

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MONEY MANAGEMENT INTERNATIONAL 14141 SOUTHWEST FREEWAY STE 1000 SUGAR LAND, TX 774783494	54-1837741	501 (C) (3)	727,788				HOUSING, LOSS MITIGATION, AND PROGRAM SUPPORT

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **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*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Employer identification number
53-0132493

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)SUSAN C KEATING PRESIDENT & CEO	(i)	365,729	0	10,799	23,650	19,362	419,540	0
	(ii)	0	0	0	0	0	0	0
(2)DEBRA ADLIS CHIEF FINANCIAL OFFICER	(i)	142,925	0	438	21,851	11,647	176,861	0
	(ii)	0	0	0	0	0	0	0
(3)HELENE RAYNAUD CHIEF OPERATING OFFICER	(i)	128,198	0	7,838	4,316	19,499	159,851	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NATIONAL FOUNDATION FOR CREDIT COUNSELING INC

Employer identification number
53-0132493

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE BOARD EXECUTIVE COMMITTEE IS RESPONSIBLE FOR CONDUCTING THE BUSINESS OF, AND HAS THE POWER AND AUTHORITY TO ACT ON BEHALF OF, THE BOARD IN BETWEEN THE MEETINGS OF THE BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE NFCC BY LAWS PROVIDE, IN RELEVANT PART, THE FOLLOWING CLASSES THE FOUNDATION SHALL HAVE ONE CLASS OF MEMBERS IN ORDER TO BE A MEMBER AN ORGANIZATION MUST BE TAX EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE BE DULY QUALIFIED AND EXISTING UNDER THE LAWS OF THE DISTRICT OF COLUMBIA, OR ANY STATES OR TERRITORY OF THE UNITED STATES OF AMERICA PROVIDE FINANCIAL COUNSELING SERVICES AND ACT IN COMPLIANCE WITH ALL APPLICABLE FEDERAL AND STATE LAWS AND REGULATIONS BE ACCREDITED BY THE COUNCIL ON ACCREDITATION OR HAVE SUBMITTED APPLICATION AND INITIAL PAYMENT COMPLY WITH THE NFCC'S MEMBER QUALITY STANDARDS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE NFCC BYLAWS PROVIDE, IN RELEVANT PART ARTICLE II, SECTION 7 ANNUAL MEETING THE ANNUAL MEETING OF MEMBERS SHALL BE HELD PRIOR TO NOVEMBER 1 OF EACH YEAR, AND SHALL BE FOR THE PURPOSE OF ELECTING MEMBER-REPRESENTATIVE TRUSTEES TO THE BOARD, RATIFYING THE ELECTION OF AT-LARGE TRUSTEES TO THE BOARD, ELECTING MEMBERS OF THE OPERATING COMMITTEE, AND FOR THE TRANSACTION OF SUCH OTHER BUSINESS AS MAY COME BEFORE THE MEETING ARTICLE III, SECTION 4 ELECTION OF AT-LARGE TRUSTEES EXCEPT AS OTHERWISE SET FORTH IN THIS ARTICLE, NOMINEES FOR AT-LARGE TRUSTEES SHALL BE RECOMMENDED TO THE BOARD BY THE NOMINATING COMMITTEE AND SHALL BE ELECTED BY A MAJORITY VOTE OF THE BOARD AND SUBJECT TO RATIFICATION BY MEMBERS AT THE NEXT ANNUAL MEETING OF MEMBERS THE SLATE OF AT-LARGE TRUSTEES SHALL BE DISTRIBUTED TO MEMBERS AT LEAST FIFTEEN (15) DAYS PRIOR TO THE ANNUAL MEETING OF MEMBERS AT THE ANNUAL MEETING OF MEMBERS, MEMBERS SHALL BE ENTITLED TO VOTE TO RATIFY THE ELECTION OF AT-LARGE TRUSTEES BY BALLOT LISTING THE AT-LARGE TRUSTEES SUBJECT TO RATIFICATION MEMBERS MAY VOTE TO RATIFY THE ELECTION OF AT-LARGE TRUSTEES OR WITHHOLD THEIR VOTE TO RATIFY THE ELECTION OF AT-LARGE TRUSTEES EITHER AS A SLATE OF AT-LARGE TRUSTEES OR AS INDIVIDUAL AT-LARGE TRUSTEES FOR PURPOSES OF SECTION 3 OF THIS ARTICLE, THE TERM OF OFFICE FOR AN AT-LARGE TRUSTEE SHALL BEGIN AT THE CONCLUSION OF THE ANNUAL MEETING OF MEMBERS AT WHICH THE AT-LARGE TRUSTEE IS RATIFIED BY MEMBERS SECTION 5 ELECTION OF MEMBER-REPRESENTATIVE TRUSTEES EXCEPT AS OTHERWISE SET FORTH IN THIS ARTICLE, MEMBER-REPRESENTATIVE TRUSTEES SHALL BE ELECTED BY MEMBERS AT THE ANNUAL MEETING OF MEMBERS FROM A LIST OF ELIGIBLE CANDIDATES WHO HAVE EXPRESSED THEIR WRITTEN INTENTION TO STAND FOR ELECTION TO THE SECRETARY OF THE OPERATING COMMITTEE AT LEAST THIRTY (30) DAYS PRIOR TO THE ANNUAL MEETING OF MEMBERS THAT LIST SHALL BE DISTRIBUTED TO MEMBERS AT LEAST FIFTEEN (15) DAYS PRIOR TO THE ANNUAL MEETING OF MEMBERS ALL ELIGIBLE CANDIDATES SHALL APPEAR ON A SINGLE BALLOT, AND THE CANDIDATES RECEIVING THE HIGHEST TOTAL NUMBER OF VOTES SHALL BE ELECTED TO THE OPEN POSITIONS, RESPECTIVELY, FOR THE TERM DESIGNATED BY THIS ARTICLE TO BE AN ELIGIBLE CANDIDATE UNDER THIS SECTION, A CANDIDATE MUST BE THE VOTING REPRESENTATIVE OF A MEMBER IN GOOD STANDING MEMBERS OF THE OPERATING COMMITTEE ARE NOT ELIGIBLE TO BE CANDIDATES FOR ELECTION AS MEMBER-REPRESENTATIVE TRUSTEES

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	SEE LINE 7A

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS PREPARED AND VERIFIED BY STAFF, AND THEN PROVIDED TO THE NFCC'S FINANCE COMMITTEE FOR REVIEW AND ACCEPTANCE. THE NFCC'S TREASURER, AS CHAIR OF THE FINANCE COMMITTEE, PRESENTS THE FORM 990 TO THE BOARD OF TRUSTEES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	PLEASE NOTE THAT ALL TRUSTEES, OFFICERS AND COMMITTEE MEMBERS (''INTERESTED PERSONS'') ARE SUBJECT TO THE CONFLICT OF INTEREST POLICY AND ARE REQUIRED TO ANNUALLY AFFIRM HAVING RECEIVED, READ AND UNDERSTOOD THE POLICY AND HAVE AGREED TO COMPLY WITH THE POLICY THE POLICY, IN RELEVANT PART, REQUIRES DISCLOSURE REQUIREMENT IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE TRUSTEES AND/OR COMMITTEE MEMBERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT CONFLICT DETERMINATION BY BOARD FOLLOWING FULL DISCLOSURE OF AN ACTUAL OR POSSIBLE CONFLICT, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE BOARD OR COMMITTEE MEETING, AS THE CASE MAY BE, WHILE THE DETERMINATION OF A CONFLICT IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT EXISTS THE POLICY FURTHER SPECIFIES THE PROCEDURE FOR ADDRESSING CONFLICTS THAT ARISE AND VIOLATIONS OF THE POLICY PROCEDURES FOR ADDRESSING POSSIBLE CONFLICTS (A) AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE ACTUAL OR POSSIBLE CONFLICT (B) THE BOARD OR THE COMMITTEE, AS THE CASE MAY BE, MAY, IF APPROPRIATE, APPOINT ONE OR MORE DISINTERESTED PERSONS OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT (C) AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE, AS THE CASE MAY BE, WILL DETERMINE WHETHER THE NFCC CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT (D) IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER THE CIRCUMSTANCES WITHOUT PRODUCING A CONFLICT, THE BOARD OR THE COMMITTEE, AS THE CASE MAY BE, WILL DETERMINE, BY A MAJORITY VOTE OF THE DISINTERESTED MEMBERS, (I) WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE NFCC'S BEST INTEREST FOR ITS OWN BENEFIT, AND (II) WHETHER ITS TERMS AND CONDITIONS ARE FAIR AND REASONABLE IN CONFORMITY WITH THE ABOVE DETERMINATIONS, THE BOARD OR THE COMMITTEE, AS THE CASE MAY BE, WILL MAKE ITS DECISION AS TO WHETHER TO AUTHORIZE THE NFCC TO ENTER INTO THE TRANSACTION OR ARRANGEMENT VIOLATIONS OF THE CONFLICTS OF INTEREST POLICY (A) IF THE BOARD OR THE COMMITTEE, AS THE CASE MAY BE, HAS REASONABLE CAUSE TO BELIEVE A PERSON HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT, IT WILL INFORM THE PERSON OF THE BASIS FOR THAT BELIEF AND AFFORD THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE (B) IF, AFTER HEARING THE PERSON'S RESPONSE AND MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE BOARD OR THE COMMITTEE, AS THE CASE MAY BE, DETERMINES THAT THE PERSON HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT, IT WILL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE NATIONAL FOUNDATION FOR CREDIT COUNSELING'S BOARD OF TRUSTEES ENACTED THE FOLLOWING POLICY ON THE PROCESS OF DETERMINING COMPENSATION FOR THE NFCC'S PRESIDENT AND CHIEF EXECUTIVE OFFICER, AND OTHER OFFICERS AND KEY EMPLOYEES OF THE NFCC WHOSE COMPENSATION IS REQUIRED TO BE DISCLOSED ON FORM 990 THE PROCESS INCLUDES ALL OF THE FOLLOWING ELEMENTS 1 REVIEW AND APPROVAL (A) COMPENSATION OF THE PRESIDENT AND CHIEF EXECUTIVE OFFICER IS REVIEWED AND APPROVED BY THE NFCC'S PERSONNEL COMMITTEE, PROVIDED THAT PERSONS WITH CONFLICTS OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT AT ISSUE ARE NOT INVOLVED IN THIS REVIEW AND APPROVAL (B) COMPENSATION OF THE OTHER OFFICERS AND KEY EMPLOYEES IS APPROVED BY THE PRESIDENT AND CHIEF EXECUTIVE OFFICER AND OVERALL STAFF COMPENSATION IS REVIEWED ON AN ANNUAL BASIS BY THE NFCC'S BOARD OF TRUSTEES OR THE PERSONNEL COMMITTEE 2 USE OF DATA AS TO COMPARABLE COMPENSATION THE COMPENSATION OF THE PERSON IS REVIEWED AND APPROVED USING DATA AS TO COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS 3 CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING THERE IS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	NFCC DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR